2006 was a year of significant achievement for the St Vincent’s Clinical School, on many fronts: staff, students and innovations. In an era where clinical medical education is under significant pressure, both nationally and internationally, we are not only maintaining a high standard but are constantly adapting to maximize learning and teaching opportunities. Some of the highlights of 2006 were:

- introduction of Phase 2 of the New Medicine Curriculum and the inaugural Independent Learning Project year with 16 students doing various research projects around the campus.
- commencement of Allan Spigelman as Professor of Surgery
- appointment of a new Senior Lecturer in Medicine, Dr Mark Danta (commencing December 06) and a new Lecturer in Surgery, Dr Rohan Gett (commencing February 07).
- implementation of our strategy of interprofessional learning, with our “Train the Trainer” workshop, our “RIME assessment method” Learning and Teaching project and our nomination for a Sisters of Charity National Award for Quality.

The year ahead also holds many exciting challenges and we are continually striving to maximise teaching opportunities right across the Darlinghurst campus. Watch out for the following:

- introduction of the “Keepad’ instant feedback system in Douglas Miller Lecture Theatre
- establishment of a video film studio facility, to record history taking and examination sessions for evaluation
- “Teach the Teacher” professional development workshop, to build on the 2006 program

On a personal note, I would like to thank the Clinical School staff, who do a superb job supporting my position and running increasingly complex timetables; the academic staff who create such a supportive environment for the School; the conjoint staff, who continually give of themselves to provide training and guidance to students despite the high pressures of the clinical environment; and especially to all our volunteers and patients, without whom we could not teach clinical medicine.

My door is always open- please feel free to come at any time to discuss how we at the Clinical School can facilitate your involvement in clinical teaching. Best wishes of the Season to you and your families.
2006 was the first full year for our new Dean, Professor Peter Smith. Peter has been very active at the St Vincent’s Clinical School. Among other things he has accepted invitations to join both the Board of St Vincent’s and Mater Health Sydney and the Board of the Garvan Institute. Peter has also attended a number of other meetings on the campus, including a meeting of the Campus Medical Council which he addressed, and Medical Grand Rounds at which he spoke. There was also a special meeting at which he addressed the campus clinical staff about issues related to both to the new curriculum and to the research enterprise of the University of New South Wales.

There have been major changes in the administration and governance of the University of New South Wales at the highest levels over the last twelve months. We have a new Chancellor, Mr David Gonski AO, and a new Vice Chancellor, Professor Fred Hilmer, both of whom are providing a major impetus for sweeping changes to how the University does business. Finally, Richard Henry, former Professor of Paediatrics at Sydney Children’s Hospital and Senior Associate Dean of the Faculty of Medicine, has been appointed as Deputy Vice Chancellor (Academic), UNSW.

It is already clear that these new senior people are very well disposed towards research and in particular towards the research effort contributed to the University of New South Wales by the Faculty of Medicine. It is worth noting here that the Faculty of Medicine, which is one of some nine faculties within UNSW, contributes well over 50% of the university’s entire research income. There has been a feeling in the past that this has not been well recognised by the University. Those days are clearly over, and we look forward to working with the new team which Fred Hilmer is putting into place. We fully anticipate the new approach will lead to increased resources for the Faculty compared to previous years and that these resources will go particularly towards our research enterprise.

Professor Terry Campbell

Seasons Greetings

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

Farewell Sesil

In July this year we sadly said farewell to our Administrative Officer, Sesil Almendrala. We wish her all the best with her new position at Westmead Hospital and thank her for all her hard work while she was with us.

Congratulations Naomi

It was a great pleasure to appoint Naomi Esselbrugge as Administrative Officer for SVCS, to replace Sesil. Chris was then successful in obtaining the Administrative Assistant position.

Clinical Teaching Committee

The Clinical Teaching Committee met three times during 2006 and was well represented by those involved in medical student teaching across the campus. Minutes of the meetings are available on the Clinical School website. Dates for 2007 are listed below. Please forward any issues you wish to have discussed to the Clinical School for inclusion in the agenda. All welcome.

**2007 Meeting Dates:**

<table>
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<tr>
<th>Date</th>
<th>Time</th>
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<tbody>
<tr>
<td>14 February 2007</td>
<td>8:30am - 9:30am</td>
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<tr>
<td>16 May 2007</td>
<td>8:30am - 9:30am</td>
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<tr>
<td>15 August 2007</td>
<td>8:30am - 9:30am</td>
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<td>14 November 2007</td>
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Clinical School Website

The website will shortly be fully updated for 2007. The new timetables and term information will be available for all staff and students, along with any resources. To keep fully informed and up to date with what is happening in the school, look out for the weekly newsletters starting up again early in January and also log onto the Bulletin Board!

http://stvcs.med.unsw.edu.au/

Teaching Equipment

The Clinical School has various equipment available for staff and students to borrow to assist with teaching:

- Laptop
- Data Projector
- Digital View
- Digital Camera
- Keepad Response System
2006 has been a big year for the Professorial Unit. It saw the first year of Phase 2 of the new Medical Curriculum being rolled out. This has led to significant changes in the way medical students are being taught by our conjoint staff and is discussed in more detail elsewhere. As with anything new, there have been teething issues, but there have also been many positives and much valuable feedback has been obtained both from the teachers and from the students which will enhance our teaching efforts in future years. I am very grateful to Dr Eva Segelov and the St Vincent's team of teaching staff, both academic and honorary, who have given so much of their time to this enormously important task.

Allan Spigelman started with us in February in his dual roles of Professor of Surgery and Director of Cancer Services for St Vincent's and Mater Health Sydney. Allan, who also represents the universities on the NSW Medical Board, is very busy and is already making a big difference to both these areas. The Surgical Professorial Unit makes a major contribution to St Vincent's Trauma Service via Senior Lecturer, Dr Tony Grabs, who is the Director of that service. The Surgical Professorial Unit is also reinvigorating the surgical audit process at St Vincent's Hospital. A new Surgical Lecturer post has been established with Dr Rohan Gett appointed to take up this position in early 2007. Dr Gett will contribute both to the surgical service and in particular to teaching within the discipline of Surgery within the Clinical School.

Dr Donald Frommer retired from the University of New South Wales and the St Vincent's Clinical School after more than 30 years service as a clinical academic. Fortunately for us, he has agreed, at least for the time being, to continue to contribute to teaching within the Clinical School. We wish him all the best in his retirement.

We were fortunate to have Dr David Brown return to the hospital and Clinical School after spending some time in the United States on a prestigious NHMRC post-doctoral award. David still has two more years of his award to run in Australia, and will spend that time establishing his research program in the Centre for Immunology and becoming involved more directly in teaching within the Clinical School.

Another significant new clinical academic appointment has been made this year. Dr Mark Danta, has been appointed to the position of Senior Lecturer in Medicine as a replacement for Dr Don Frommer. Mark is a gastroenterologist with a research interest in Hepatitis C and will continue this work here with others at St Vincent's and especially in the National HIV Centre, in this important area.

Negotiations are continuing with the University of Notre Dame about the placement of a small number of their senior clinical students on the St Vincent's campus. This is likely to proceed, though not for several years yet. The majority of the Notre Dame students will be undertaking their clinical studies at hospitals other than St Vincent's, but a small number (10-20 from the final two years at any given time), are likely to undertake attachments to the St Vincent's campus, including the Private Hospital and the Hospice. We are working with the University of Notre Dame to ensure that this has little or no impact on the current clinical placements available for students from the University of New South Wales and that the impact on our teachers will be minimal and I am confident that the exercise will in the end be a largely positive one.

Finally, I should report that his will be my last report as Clinical Associate Dean. I have been appointed Senior Associate Dean, Faculty of Medicine, replacing Richard Henry in the position he vacated to become Deputy Vice Chancellor. I will remain as Professor of Medicine at St Vincent's Clinical School however and will still be very much an active member of the School. The Dean will shortly announce my replacement as Head of School. I will work with the new Head and am very confident of the continuing excellence of this Clinical School. I wish you all the very best for the coming festive Season and for the New Year.

J Campbell
This year has been a busy year with many changes happening within the Clinical School Administration Office, such as:

**Admin Staff Leaving**
Sesil Almendrala, our Admin Officer for 2 years left us in July to commute closer to home. She is now working for Sydney University based at Westmead Hospital in the School of Dentistry.

Jennifer Moore, Professor Allan Spigelman’s Executive Assistant, left us in August to work for the National Centre for HIV and Epidemiology.

**Admin Staff Arriving**
Chris Pile, our new Admin Assistant, commenced in September. He joins us from the UNSW School of Computer Science and Engineering.

Vivienne Malcolm, is Professor Allan Spigelman’s new Executive Assistant who commenced in November. She joins us from The University of Technology.

**Student’s Common Room**
In August we saw the temporary relocation of the student's common room from the Cator Building to Level 6 of the de Lacy Building. This common room is a lot smaller but the students are now closer to the main teaching area and the hospital wards.

**New computer laboratory**
In July we renovated an old laboratory to build a new computer lab for the students. The laboratory is located in the Medical Professorial Unit on de Lacy 5. It has 6 PC’s which are networked to SVH. The lab was well utilised this year but PLEASE no food or drink in there!

**New Skills Equipment**
The School has purchased more skills equipment. Such items include: two breast cancer training models, an eye simulation model (JED), another airway management trainer, otoscopes, thermometers, sphygmos, IV trainer and an injection trainer. All items are available for students and staff to use.

**Walter McGrath Library Print Server**
The School purchased an online print management system to monitor and charge users for printing in January. It was necessary to install such a system as the library’s paper and ink consumables were extremely high. The system seems to be working very well and now brings the library into the online age.

Looking forward to working with you all in the New Year!

Melinda Gamulin
Clinical School Manager
Dr Mark Danta is a gastroenterologist with a subspecialist interest in hepatology who will take up the position of Senior Lecturer in Medicine in December, following the retirement of Dr Don Frommer. He is returning from London where he has been for 5 years, initially as a Senior Clinical Fellow in Hepatology and then Research Fellow and Honorary Lecturer in the Department of Medicine, Royal Free and University College Medical Schools, London.

In 2002, following the completion of his FRACP in Gastroenterology/General Medicine at St Vincent’s Hospital and Royal North Shore Hospital, Sydney, he commenced a two-year clinical hepatology fellowship at the Royal Free Hospital, London. The Royal Free Hepatology Unit is an internationally renowned clinical and academic unit. During this time he subspecialised in hepatology, in particular, viral hepatitis and HIV-related liver disease. This has allowed him to consolidate his other interests in infectious diseases and public health, which he acquired from periods of work in Thailand, Colombia and Mexico; and pursued through a Diploma of Tropical Medicine and Hygiene (DTM&H, London 1996) and a Masters of Public Health (MPH, Sydney 2000). He has been involved in the expansion of the clinical HIV liver service at the Royal Free Hospital; a response to the increased clinical impact of viral hepatitis in HIV co-infected individuals. Given that St Vincent’s Hospital has Australia’s premier HIV unit and a burgeoning viral hepatitis service, his experience and interests will significantly strengthen these areas.

His major research interest is viral hepatitis, having recently completed a Doctor of Medicine (MD) thesis at University College London into HCV/HIV co-infection. He is particularly interested in the molecular and clinical epidemiology, natural history and host-viral interactions of HCV. Currently, he is co-ordinating a pan-European collaborative study into the epidemiology of an epidemic of HCV in the HIV population. In Australia his research will continue to focus on viral hepatitis and HIV co-infection, specifically through

New Lecturer of Surgery, Dr Rohan Gett

Dr Rohan Gett was educated at St Ignatius College, Riverview. His undergraduate studies were completed at the University of New South Wales with most of his clinical attachments at the Prince of Wales Hospital. After graduation he completed residency at Concord Hospital followed by general surgical training at Royal Prince Alfred and Nepean Hospitals. Post fellowship training in colorectal surgery has been at the Prince of Wales Hospital in 2005 and St Vincent’s Hospital in Melbourne in 2006. At both institutions he has enjoyed the undergraduate teaching programs as a conjoint lecturer in general surgery.

Professionally, Rohan is interested in the further development of multidisciplinary approaches to the management of colorectal cancer and inflammatory bowel disease. In addition, he would like to foster greater surgical input into undergraduate medical teaching while operatively he looks to incorporate more and more laparoscopy into his clinical practice.

Out of work, Rohan is a keen photographer and skier who is also looking forward to enjoying the beaches of Sydney with a morning swim as often as possible on his return from Melbourne.
collaborative links with the Viral Hepatitis Program at the National Centre for HIV Epidemiology and Clinical Research, UNSW.

Having graduated from the University of Newcastle, NSW, which has a self-directed problem-based learning program, he understands the importance of modernisation in medical education and some of the challenges that the new medical program at UNSW faces. He will bring valuable undergraduate and postgraduate teaching experience to the St Vincent’s campus. Imbued by the vitality and excitement of London, he hopes to bring a fresh perspective to the position.

**2006 Events & Innovations**

**Tutor Awards**

In 2006, students were again asked to vote anonymously for the various categories to reward tutors who were innovative and exciting. As well as a certificate, each award recipient received an Berkelow book voucher.

**Student Awards**

As in previous years, the St Vincent’s Clinic Foundation generously sponsored prizes for student excellence during the Year 6 Surgical Term at St Vincent’s Private Hospital and St Vincent’s Clinic. The winning students received a certificate and a cheque which was presented by Dr Eva Segelov at the Year 6 Farewell Dinner.

**2006 Tutor Award Recipients:**

- **Consultant Tutor of the Year (SVPH/SVC)** - Professor Ken Ho
- **Consultant Tutor of the Year (SVH)** - Professor Jo-anne Brien
- **Registrar Tutor of the Year** - Dr Rohit Kumar
- ** Resident Tutor of the Year** - Dr James Jabbour
- **Intern Tutor of the Year** - Dr Duncan George

**2006 Student Award Recipients:**

- **Best Students in the Year 6 Surgical Term at SVPH/SVC/SVH** - Hanneke Chudleigh & Belinda Gray
- **Best Student Presentations at the SVPH/SVC/SVH Education Sessions** - Tristan Barnes & Georgina Tiller

**Intern Allocations**

In 2007 we will welcome back to St Vincent’s Hospital the following students as interns:

- Sanjeev Kumar
- Hanneke Chudleigh
- Jon Salicath
- Rachelle Cohen
**New in 2007**

**Summary of major changes**

**Year 6** moves to 8 week terms (two complimentary 4 week ward attachments).
All Year 6 students required to do a geriatrics attachment (2-4 weeks)

**Year 6** exams brought forward to September, to be followed by a PRINT term (Preparation for internship)

**Year 5** students will be at SVCS for a 4-8 week term, with 5-8 students in any one time

**Phase 2 clinical students** will continue their rotations through Health Maintenance, Ageings and Endings, Society & Health and Beginnings, Growth & Development, The end of Phase 2 exam will be held in April 2007, followed by their ILP (Independent Learning Project).

**Phase 2 ILP students** will continue their projects until April 2007 and then enter their clinical rotations.

**Phase 1 students** will continue their fortnightly clinical attachments, with the senior Phase 1 students undertaking the end of Phase 1 exams in May 2007.

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**2007 Exam Dates** - Note Changes

- **Phase 2 Exams**: 12 March - 23 March 2007
- **Phase 1 Exams**: 21 April - 13 May
- **Year 6 Exams**: 17 September - 5 October

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**Teaching the Teacher Interprofessional Workshop**

**Wednesday, 7 March 2007 8:30AM-12NOON**

Small Group Workshops include:

- The Difficult Student: A case study
- Giving clinical feedback and assessment
- Governance within a teaching environment
- Engaging the student
- One-on-one teaching: recipe for success

More information will be sent out early in 2007
**2007 Teaching Program - We Need You!!**

**Phase 1 Clinical teaching:**
Fortnightly bedside tutorials on basic communication, history taking and clinical examination for students in Year 1-3 of the New Medicine Program. Especially good for JMO’s and tutors who enjoy teaching the most junior students.

**Phase 2:**
Course tutors for “Ageings and Endings” and “Health Maintenance”: 2x2 hour sessions for a 4-8 week block, discussing cases with students to develop an understanding of clinical reasoning in diagnosis and management. Very enjoyable!

Various specialty ‘one-off’ tutorials relating to the weekly themes.

Bedside teaching of physical examination skills in Surgery and Medicine- 1.5 hour tutorial fortnightly with a group of 4-5 students

**Independent Learning Projects:**
Want a student for a one year research project? Perfect for clinical research, including audit and trials, as well as lab based projects (see the ILP page). Projects have already allocated for 2007, but please plan to offer a project in 2008 (calls for projects will start around August 2007). Students are highly motivated and have 32 weeks (mostly full time) to devote to a project. Help with cosupervision available if you wish. See [http://www.med.unsw.edu.au/medweb.nsf/page/Independent+Learning+Project](http://www.med.unsw.edu.au/medweb.nsf/page/Independent+Learning+Project) for more information.

**Year 5:**
For the first time, Year 5 students will be doing some clinical time in Medicine/Surgery as well as their specialty rotations. We are placing students in:

- Nuclear Medicine
- Neurosurgery
- Ophthalmology
- Radiology (SVPH)
- Plastic Surgery
- Diagnostics (SVC)
- Radiation Oncology

**Year 6:**
The traditional program will run, however the terms have been extended to 8 weeks and the end of year exam will be held in September, followed by the inaugural PRINT term (Preparation for INTernship).

We are offering rotations in the following terms:

- Cardiology
- Haematology
- Thoracic Medicine
- Plastic Surgery
- Nephrology/ Haemodialysis
- Cardio/Thoracic Investigations
- Geriatrics
- Neurology
- Palliative Care
- Urology
- Rheumatology/Pain Medicine
- Infectious Diseases/ STD/Microbiology
- Gastroenterology
- Medical Oncology
- Hand Surgery
- Ophthalmology
- Cardiothoracic/ Vascular
- Diabetes/Endocrine
- Drug & Alcohol
- Anaesthetics
- Diagnostics (SVH)
- Upper & Lower Gastro Intestinal

All students will also rotate through 2-4 weeks in Geriatrics, and 4 weeks in rural if they have not done so previously in the course.
What we did this year - The 2006
Undergraduate Program

Phase I

Fortnightly Clinical Tutorials: small group bedside tutorials led by a combination of GP, Intern and Registrar tutors.

Procedural Skills: Manual Handling, non-invasive blood pressure measurement; non-invasive measurement of temperature; Urinalysis

Tutors: Dr Don Frommer, Dr Emily Chong, Dr Alison White, Dr J Sevastos, Dr John Chang, Dr Carol Fenton-Lee, Dr Steven Tattersall, Dr Ina Nordman, Dr Tim Ramaciotti, Dr Jon Hogan-Doran, Dr Alice Tang, Dr Laila Girgis, Dr Caitlin Matthews, A/Professor Bill Sewell, Dr Belinda Yeo, Dr Duncan George, Dr Catherine Ashes, Dr Chelsea McMahon, Dr Carrie van der Weyden, Dr Alina Stoita, Dr Mitchell Nash, Dr Fraser Drummond, Dr Kavitha Muthiah, Dr Clare Suttie, Dr Eva Segelov, Dr Payal Saxena, Dr Joe Rizk, Dr James Jabbour, Dr Joe Suttie, Dr Katrin Sjoquist.

Phase II

Clinical Rotations

Health Maintenance
Ageing & Endings
Society & Health (Off Campus)
Beginnings, Growth & Development (Off Campus)

Scheduled Teaching:


Bedside Teaching (Medicine & Surgery): Dr Laila Girgis, Dr Terence O’Connor, Dr Joe Suttie, Dr Viral Shah, Dr Ishtiaq Ahmed, Dr Emily Granger

Year 4

Clinical Rotations

Medicine (Neurology & Plastic Surgery)
Surgery (Orthopaedics & Ambulatory Care)
Health Maintenance
Ageing & Endings
Society & Health (Off Campus)

Scheduled Teaching:

Wound Care

Bedside Teaching (Medicine & Surgery): A/Professor Andrew Carr, Dr Stephen Quain, Dr Joanne Joseph, Dr Bo Gao, Dr David Robinson, Dr Andrew Jabbour, A/Professor Reg Lord, Dr Joe Suttie, Dr Jon Morton, Dr Susan Miles, Dr Tony Grabs, Dr Geoffrey Warwick

Pathology (including Morgue Visits): Weekly tutorials. Tutors: A/Professor Bill Sewell, Dr Kumeradevan, A/Professor Nick Hawkins, Dr Michael Buckland, Dr Wade Barrett, A/Professor Jock Harkness, A/Professor Debbie Marriott, Dr Joanne Joseph, Dr Sam Milliken, Dr John Moore, Dr Graham Jones, A/Professor Adrienne Morey, Dr Andrew Field, Dr Anthony Dodds

Lecture series in Ophthalmology (including Private Consulting Room and Theatre visits): Tutors: Dr Jenny Danks, Dr Michael Delaney, Dr John Kennedy, Dr Dennis Lowe, Dr Raj Shah, Dr Max Conway

Year 6 Clinical Rotations
- Elective Term: Undertaken in the Summer Teaching Period
- Surgery (based at St Vincent’s Private Hospital): Cardiothoracic & Vascular Surgery; Orthopaedics; Neurosurgery; Plastic Surgery; Urology; Upper & Lower Gastrointestinal Surgery; Surgical Oncology/ENT; Ophthalmology. Includes sessions in consultant rooms in St Vincent’s Clinic. Coordinator: A/Professor Michael Neil
- Medicine: Cardiology, Diabetes & Endocrine; 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: Dr Eva Segelov
- Critical Care: ED, ICU including Sydney Hospital. Coordinator: A/Professor Gordian Fulde
- Rural: Bowral; Port Macquarie; Nowra; Albury; Lismore
- 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: Weekly
- Lecture series in Radiology
- Procedural Skills: Advanced Life Support; Wound Care, Passage of Nasogastric Tube; Urinary Catherisation
- Small Group Bedside Tutorials (Surgery & Medicine): Tutors: Professor Allan Spigelman, Dr Romesh Markus, Dr Doug Fenton-Lee, Dr Mark Nichols, Dr Viral Shah, Dr Warren Hargreaves, Dr Chris Holloway, Dr Jon Morton, Dr Geoffrey Warwick, Dr Joseph Rizk, A/Professor Greg Dore, Dr Chris Hayward, Dr John Raftos, Dr Ian Sutton, Dr Michael Jensen, Dr Julian Bosco, Dr Gary Nichols, Dr Alfred Hing, Dr Anthony Chambers, Dr John Moore, Dr Sandy Beveridge, Dr Joe Suttie
Life as a medical student at St. Vincent’s has been a wonderful experience for all 32 of its final year students. This year saw a very strong self directed and determined group of young adults.

The year commenced with our elective term, a two month attachment to a specialty and location of our choice. St. Vincent’s students spread themselves around the globe from a remote village in Cambodia to the tortuous mountains in the Himalayas to the ski fields in Canada to the Spanish speaking city of Buenos Aires to the buzzing hot spot Berlin to the sun drenched Pacific Islands. Absolute magic!

A few of our students were even actively involved in the Medical Student Aid Project and responsible for taking supplies such as much needed medicines and equipment into under developed countries.

The majority of our year consisted of clinical rotations in medicine, surgery, emergency, critical care and various rural placements. Each rotation was a valuable learning platform not only for experiencing the respective specialty and acquiring relevant clinical skills but also experiencing being part of a team and receiving encouragement and support from its members. Throughout the year we also attended scheduled teaching sessions, for which St. Vincent’s is well known in the medical student world. These sessions ranged from weekly therapeutics and interactive topic teaching, lecture series in radiology, emergency/critical care teaching, bedside tutorials in medicine and surgery, and management viva ‘coaching’. A huge thank you to all those teachers involved and more specifically to the Clinical School, who provided us with constant support.
and fueled our motivation to strive for excellence.

So it’s over! Six years of medical school completed…working life now begins! At the bottom of the ladder. Placed inevitably on a steep learning curve.

What will the future hold for the students of St. Vincent’s? Watch out for the budding orthopaedic surgeon, the incredibly intelligent radiologist, the stylish cardiologist, the savvy plastic surgeon, the dedicated geneticist and who knows who else!

Rebecca Kozor
Year 6 Student Representative

Year 6 Farewell Dinner

On Tuesday 14th November 2006, the 6th year students were finally able to let their hair down and celebrate a successful year at St Vincent’s Clinical School. It also provided the opportunity for the students to thank all the Clinical Academics, Conjoint Professors, Bedside Tutors and Clinical School staff for all their support and assistance throughout our time as medical students. It also provided the opportunity for the students to give a gift to Dr Eva Segelov, in appreciation for all her time and efforts, over the past six years.

The evening was held at Oregano Mediterranean Restaurant in East Sydney. We dined on a variety of antipasto to start followed by a selection of authentic mains. This was all washed down with many well-deserved glasses of red and white wine. A great time was had by all!

There were a variety of awards given out on the night to both students and teachers. The recipients were:

Tutors:
- Consultant Tutor of the Year (St Vincent’s Public Hospital): Professor Jo-Anne Brien
- Consultant Tutor of the Year (St Vincent’s Private Hospital and Clinic): Professor Ken Ho, who unfortunately was unable to attend on the night, but sent some very kind words of thanks

The awards for Registrar and RMO/intern tutor of the year will be awarded later in the year at their annual mess dinner in December.

Students:
- Best Student on Surgery Term (St Vincent’s Private Hospital): Hanneke Chudleigh & Belinda Gray
- Best Student Presentation on Surgery Term (St Vincent’s Private Hospital): Tristan Barnes & Georgina Tiller

Overall, the night was a great success with students and staff all enjoying wining, dining and “clever” conversation.

Belinda Gray
Year 6 Student Representative
As we rapidly tunnel into the dreaded end of year exam period, I took some time out to reflect on the year of teaching at St Vincent’s which has almost come to a close.

The integrated Phase 2/Year 4 program, coupled with the pilot implementation of five 8-week terms, the Independent Learning Project and more structured teaching was a challenging experience for both students and teachers this year. The 4th year students completed two ‘traditional’ terms attached to Neurology, Rheumatology, Endocrinology, Plastic Surgery, and Orthopaedic Surgery, as well as three new terms, Society and Health, Health Maintenance and Ageing and Endings (incorporating Geriatrics and Oncology). The Phase 2 students joined us for the new terms. Although many of my peers have told me that they felt most engaged during the traditional style terms, many also commented on the usefulness of the many structured teaching sessions during the three new terms, which aided in consolidation of knowledge learned in clinical situations, as well as provided more contact with a wealth of experienced teachers. The discussion-centred format of the new courses also allowed for feedback to be given by students on which aspects of the course they particularly enjoyed, and aspects which we all felt could have been improved. Having the Phase 2 students with us also added a new dimension of interaction between old and new courses, although it proved logistically difficult in some situations to accommodate ten students in intimate teaching sessions. Thankyou to Naomi, Sesil and Chris in the office for tackling the logistical nightmare which was coordinating our tutorial schedule throughout the year.

Outside scheduled teaching, Phase 2 and 4th years have been active around and outside the hospital this year. Six 4th year students presented on the new CPR protocols at Medical Grand Rounds in June. A number of our students are also involved in MSAP (the Medical Students’ Aid Project), which sends medical supplies to the developing world. Other activities and organisations we’ve been involved with include St. John Ambulance, Australian Red Cross, UNSW Medical Society, and the Australian Medical Students Association. Outside of hospital we are well-rounded individuals involved in everything from stage shows to mountaineering. It has been a busy but rewarding year for us, and we would like to collectively thank our teachers – the consultants, registrars, residents, interns, and nursing staff who took time out of their busy work schedules to share their wisdom and experience with us.

Wei Jiang
4th Year/Phase 2 Student Representative
After 2 years at the Rural Clinical School in Wagga Wagga, I was offered a 6 week placement at one of UNSW’s metropolitan teaching hospitals to compliment my rural training and to give me exposure to some of the pathology that a tertiary referral centre has to offer.

Having heard glowing reports from previous Rural Clinical School students, Ben Brabin and Joseph Russell, regarding the opportunities at St Vincent’s Hospital, I elected to spend my clinical placement there, doing a Critical Care term. St Vincent’s reputation for excellent teaching is well founded. I found the Critical Care term to be a great mix of structured teaching and clinical attachments.

The structured teaching sessions were staffed by an array of keen, approachable and knowledgeable specialists, covering a huge number of clinical topics and scenarios. Coupled with Friday afternoon’s teaching sessions, my 6 weeks at Vinnie’s were filled with more up to date information than I would have thought could be squeezed into the short time available.

Structured teaching is certainly not all that my time at Vinnie’s had to offer. I enjoyed an excellent opportunity to see a whole new array of patients in the casualty department. From the HIV positive patient with intractable hiccups to the fighter pilot with an INR of 10, the patients at St Vincent’s were an entirely different population to the ones in Wagga Wagga. (There are far fewer farming accidents in Darlinghurst for example!) The Emergency Department also offered an excellent opportunity for me to enhance and practice my clinical skills, and to act as part of a team by taking charge of a patient and following them through all of their management.

During my week of anaesthetics, I was able to watch an emergency coronary artery bypass procedure. This was something that I really wanted to witness while I was at St Vincent’s. I was so pleased to have a chance to see something that I would never have been able to see in Wagga!

Living at the student accommodation across the road gave me a chance to experience the joys of city living. Coffee shops and restaurants open all night; a short walk to Centennial Park, the Botanic Gardens, Hyde Park; and (obviously) the shopping! I must say, I’ve really developed a taste for it. Well, for the coffee at least! While at Vinnie’s, I made so many new friends and had the chance to catch up with some old ones as well. It certainly was the best way that I can imagine to start off my final year of undergraduate training.

Warm thanks go to the staff at the Clinical School for being so welcoming, and to the students for making me feel right at home. I’ll be looking forward to returning to St Vincent’s Hospital during my working life.

Kim Poole
Year 6 Rotation Student from Wagga Wagga
E lective (Clerkship) Overview

In 2006 St Vincent’s Clinical School together with various supervisors hosted 31 undergraduate Medical students for their Elective term. Students came from all over the world, including the UK, USA, Canada, Sweden, Austria, Germany, Columbia, The Netherlands and New Zealand. Along with International students we also saw several from around Australia.

These students undertook their elective terms in the following specialities: Anaesthetics, Cardiology, Emergency, Endocrinology, ENT, IBAC/HIV, Oncology, Orthopaedics, Plastic Surgery, Ophthalmology, Trauma and Vascular Surgery.

Elective terms at St Vincent’s are highly popular and must be applied for well in advance (at least 1 year). The students generally have a very positive experience at St Vincent’s. Here are some comments from several students who we saw in 2006:

- **Sotiris Nicholas, Imperial College, London (Trauma Elective):** [Staff were] very keen to get us involved and never ignored us. A great experience.
- **Eyston Vaughan-Huxley, Imperial College, London (Trauma Elective):** Good variety of experience, very well organised.
- **Verity Sullivan, University of Edinburgh (Emergency Elective):** We were made to feel very welcome and part of the team and as if we were really contributing. Doctors were very willing to teach.
- **Tahreema Matin, Imperial College, London (Oncology Elective):** Helpful and encouraging supervisor, varied programme with interactive teaching sessions and beneficial feedback.
- **Susannah Towland, University of Edinburgh (Emergency Elective):** Friendly and supportive staff who taught me a great deal (ad gave sight-seeing recommendatins!). The tutorials with 6th year students were excellent.
- **Megan Turner, Memorial University of NL, Canada (Vascular Surgery Elective):** Excellent organisation, everyone was very welcoming and inclusive, very flexible about clinics and theatre time.

A full list of specialities 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 the Clerkship Coordinator: clerkships@med.unsw.edu.au

**It takes time!**

**Please Note:** All students must formally apply through the Faculty of Medicine (UNSW) for any elective term at St Vincent’s Hospital. The process can take time (an average of 8 months) as various mandatory checks and procedures to work in hospitals must be fulfilled. Supervisors, please do not accept students for UNSW placement outside these arrangements, but refer them to the Clerkship coordinator.
Elective Student Report

I am currently in my final year of medicine at the University of Adelaide. Ophthalmology teaching has been very minimal over the six years of my course, in fact, it has mainly comprised of one outpatient session with twenty other students. For this reason I decided that I would do my four-week elective in ophthalmology, and I luckily managed to organise it with Dr Kennedy in my original home of Sydney.

Dr Kennedy arranged an excellent program for me that encompassed many of the different sub-specialties within ophthalmology. Over the four weeks I was exposed to general outpatient sessions during which I saw many different conditions such as glaucoma, age-related macular degeneration, cataracts, diabetic retinopathy, and many rare ophthalmological diseases. I became proficient in the use of the direct ophthalmoscope and slit lamp, and was taught to use the indirect ophthalmoscope and many of the other tools. I also sat in with the registrar a couple of times a week and learnt some very important skills, including how to manage foreign body injuries.

I was also exposed to some other aspects of ophthalmology, the procedural and surgical sides. I was able to observe and assist in cataract surgery, and learn about the pre- and post-operative management of cataract surgery. I attended theatre lists of a number of different surgeons and therefore I was exposed to a variety of operations. I also spent some time watching LASIK eye assessments and surgery in Macquarie Street. Dr Kennedy performs retinal angiograms in his rooms as well as some other procedures, so that was great to see.

During my four weeks I had the opportunity to co-author a clinical case review that will hopefully be published, and also construct an ophthalmology slide tutorial for the new ophthalmology dummy. All in all it was a fantastic experience for me, not just to learn about ophthalmology, but also to experience a hospital in a different state. I met a number of students throughout my time and it was interesting to share stories and learn about studying medicine in NSW.

I am very grateful to Dr Kennedy and Dr Segelov for helping me organise this wonderful elective.

Jed Lusthaus
6th Year Medicine, The University of Adelaide

“JED” Ophthalmology Trainer

All students are encouraged to practice their Ophthalmoscopy skills using the new trainer “JED”. He is available from the Clinical School office along with the slide set and written guides.
Phase 1 Report

Phase 1 of the New Medicine Program (Years 1, 2 and the first term of Year 3) is based on a series of health scenarios which integrate clinical presentations with the underlying pathophysiology. The Clinical School is involved primarily in the Clinical and Communications element, for which students attend hospital every fortnight for a 2 hour tutor-led bedside session in groups of 6-7. Students progress through the terms based on the ‘life cycle’ backbone of the program, starting with the Foundations term (learning how to learn) then Society and Health, Beginnings, Growth and Development, Health Maintenance and then Ageings and Endings. Procedural skills (blood pressure, urinanalysis etc) are also integrated into the program, with special sessions in the Patient Safety Simulation Centre. St Vincent’s clinicians are also involved in some on campus teaching and project work undertaken by the students.

In 2006, Phase 1 tutorials were taught by a number of our community GPs, who come in to the hospital for bedside tutorials focused on the foundations of communicating with patients, taking a history and performing a systems examination. In addition, a number of JMOs were recruited this year to take Phase 1 groups. This was a highly successful strategy, with good rapport between the JMOs and the junior students. Many JMOs were former SVCS students- nice to see the student-teacher cycle in action! Logistics of the JMO timetable do make rostering challenging, so thanks to all for your flexibility.

Next year there will be a number of changes to the Phase 1 teaching, and St Vincent’s will take slightly more students (our places are always in demand!). Anyone interested in taking a Phase 1 group (fortnightly commitment for a 7 week block) your chance to be the very first clinicians these students meet, please contact us.

Dr Eva Segelov

Comments from a Phase 1 tutor:
Phase 1 teaching has been enjoyable for me. The quality of students at St Vincents have been high during my time there; most have shown enthusiasm and willingness to participate. I have been most impressed by their ability to effectively communicate with patients.

A word of advise to all Phase 1: Practice!

Dr Emily Chong

Phase 2 Report

It seems like only yesterday I was writing a report about the introduction of Phase 2 teaching into the St Vincent’s Clinical School. Today I can report that we have held five 8 week courses in Health Maintenance and Ageing & Endings which this year integrated year 4 students from the old curriculum and Phase II students from the new curriculum. Despite our initial anxieties, both Health Maintenance and Ageing & Endings courses have been exciting to teach and have allowed vertical integration of students at different stages of their medical education.

As the new medical curriculum rolls on we come to the end of an era of teaching year 4 students in the old medical program. Next year the Health Maintenance Phase 2 courses will only have new curriculum students but will still allow vertical integration depending on the timing of students ILP’s.

I would like to thank all of the course tutors and staff who have taken part in tutorials and clinical examination sessions and look forward to seeing you again next year.

Dr Tony Grabs
Phase 3 Report

Phase 3 of the New Medicine Program (Years 5 and 6) is currently being designed, ready for the first students in mid-2008. It is a series of 10, eight week blocks with some mandated terms and some ‘selectives’. Students will primarily be based at one Clinical School, but will do some rural time and also may elect for some time at a different School.

The program is designed based on 1:1 teaching, along the model of elective students who are attached primarily to a single supervisor. This will hopefully solve the problem of the student being rostered to another session right when they would benefit most from seeing something with you! However, it does mean that students need to cover generic skills of communication, history taking, diagnosis, clinical examination and management in all rotations, as there will be no separate lecture or tutorial series. Relevant basic sciences also will need to be revised during each term.

The basis of the term will be a learning contract, between the student and supervisor, outlining the term objectives, student and tutor obligations and assessment tasks (chosen from a suite - may include observed long cases, short cases, written or oral case histories, writing a Letter to the Editor etc). We are working on a modular framework so that each term coordinator can easily construct a learning contract easily with the student when they arrive.

As always, interested parties please contact me!!

Dr Eva Segelov

RIME Learning and Teaching Report

The issue of giving student feedback in a timely, constructive and formative manner is of great importance in clinical medical education. The “RIME' project, funded by a UNSW Learning and Teaching Award, is a trial of a new ‘360 degree’ assessment system for senior medical students. The acronym stands for “Reporter, Investigator, Manager and Evaluator”, which can describe levels of sophistication in clinical reasoning. This provides a non-threatening, developmental framework for summative and formative assessment of students in their clinical skills, taking into account such aspects as teamwork, communication and application of knowledge.

RIME is based on continued observation of students during a clinical attachment, rather than at a nominated ‘exam’ or assessment task. An additional benefit is that feedback is obtained from multiple sources, including senior and junior medical staff but also nursing and allied health staff.

In 2006, we ran a pilot study with Year 6 students in the surgery term at SVPH, with modifications based on our previous study of Year 4 students. Overall, the scheme was deemed suitable for the 1:1 learning experience of the Year 6 terms (more than Year 4) and both students and tutors felt it was of positive benefit. Students reported that participation had motivated them to see and present more patients during the term and tutors reported that participation had stimulated thought on how evaluation should occur, which they felt would alter their approach to future teaching.

This work was accepted as an oral presentation at the 2006 ANZ Association of Medical Educators Annual Meeting, where it was well received, generating much discussion. Presentations were also made at the Annual Learning and Teaching Forum at UNSW.

RIME will continue to be refined through further pilots next year, ready for implementation in Phase 3 of the New Medicine Program.
Independent Learning Project Reports

The New Medicine Program affords the opportunity for all students to undertake an in-depth research project of 32 weeks duration. Projects are offered on the Faculty website, or established between students and supervisors on a topic of interest. The call for projects occurs in August, for commencement in May the following year.

ILP students are required to undertake a comprehensive literature review, then perform a research project involving data collection and analysis. A final report needs to be submitted. Students at SVCS are strongly encouraged to present their work at conferences and to aim to publish at least one paper. An excellent Medical Grand Rounds session presented by the students stimulated much discussion in November this year.

The ILP has been positively received by students and supervisors alike. A further bonus has been the large increase across the Faculty in students opting to undertake a formal BSc. Honours year. SVCS traditionally has not been a common site for Honours, but a number of students will commence this in 2007.

The ILP is ideally suited to clinical research, including audit. In 2006, the inaugural ILP year, SVCS offered a range of projects, some of which are reported below:

Project: Simulation based skills & teamwork training during Critical Care Rotations - Can we produce more competent doctors?
Student: Judith Clarke
Supervisor: Dr Martin Duffy

My project’s aim is to determine the difference, if any, between traditional training methods and simulation training in emergency medicine education. I will be assessing the training methods in terms of skill and knowledge acquisition, and skill retention. In order to determine this I am conducting a study of 6th year medical students being trained in emergency airway management, with a 3 month follow-up.

The ILP is very different from university studies, however has provided me with an insight into the rigors of research and the process by which an article is prepared for publication.

Project: Major Orthopaedic trauma from motor vehicle accidents - a descriptive study of the acute response in a hospitalised population
Student: Lachland Donaldson
Supervisors: Drs Kathryn Brooke & Steven Faux

The project seeks to investigate the poor rehabilitative outcomes of MVA patients, by describing the pattern of acute intervention of consecutive MVA victims with fractures across 18 months.

The most enjoyable aspects of the project included an increased appreciation of the complexities of designing & conducting a research project, learning to interpret xrays and completing ward rounds with the trauma CNC and a rehab physician. Finally, the opportunity to study History and Political Economics (my non-Faculty subjects) was also greatly appreciated.

Project Title: Functional Outcome Following Total Knee Replacement
Student: Shuo Zhao
Supervisor: Dr Brett Courtenay

My ILP examines the functional outcomes following total knee replacements and whether new prosthesis
designs have improved these outcomes. The aspect of my project that I like the most was the clinical and surgical setting in which I learnt more about orthopaedics and medical research. My greatest challenge in this project has been collecting retrospective data, as many patients had difficulty remembering what their health was like a few years ago. Overall, I have thoroughly enjoyed the ILP and I definitely believe it has been a worthwhile experience. My supervisor has been very enthusiastic and supportive which has been integral in making this project so enjoyable. In the future, my supervisor and I are looking to expand this project and to present our findings and to publish them in the literature.

**Project: What is Blood Pressure**  
Student: Amanda Cox  
Supervisor: Professor Michael O’Rourke

Challenges: The project initially required a lot of reading to get up to date with this very modern research area. I feel the ILP is too varied between different students.

Enjoyable aspects: A lot of clinical experience and patient contact. I enjoyed this practical side of the project as well as the opportunity to look deeper into an area of interest.

**Project Outcomes:** I presented a poster at the 2006 St Vincent’s Research Symposium. The results of my pilot study may be used to design a project for a future ILP student.

**Project: Optimising the dosage of the anti-gout drug, allopurinol**  
Student: Yewon Chung  
Supervisor: Prof Ric Day

During the course of this project, I was able to write a review article on trends in the utilisation of allopurinol and a short data study based on figures available online from Medicare Australia. I also recruited inpatients currently taking allopurinol for gout for therapeutic drug monitoring of allopurinol and a 29-item questionnaire surveying patient compliance, knowledge and attitudes towards the management of their gout. Despite numerous challenges (most notably finding and recruiting enough patients!), I have found the ILP a thoroughly rewarding experience in developing a taste for clinical research. I enjoyed the flexibilities a negotiated project had to offer and being able to collaborate with colleagues to make an original contribution to this field of study. Some time off to take an English Literature course was fantastic as well.

**Project: Chrystalline Methamphetamine (“Ice”) presentations to the Emergency Department of St Vincent’s Hospital**  
Student: Pip Bunting  
Supervisor: Associate Professor Gordian Fulde

What an amazing year! I was lucky enough to undertake my ILP in the Emergency Department at St Vincent’s Hospital this year under the supervision of Associate Professor Gordian Fulde. My research project centres around drug-related presentations and, more specifically, patients presenting to the department as a result of Chrystalline Methamphetamine (“Ice”) use. As yet there is no published Australian data available with regards to the number of patients, demographics, signs and symptoms or intoxication related information on presentation to the Emergency Department - so the project is working towards rectifying this. It’s such a topical area and, whilst the project has been somewhat challenging at times, it has always been intriguing and exciting. And my clinical skills have developed in leaps and bounds!

Along the way I’ve been able to undertake some great extra-curricular activities... everything from drug and
alcohol and trauma conferences, riding along with the ambos (which was brilliant!), visiting numerous other hospitals and their emergency departments, to assisting the St Vincent’s Hospital medical team at this year’s City to Surf. I am so thankful to A/Prof Gordian Fulde for providing me with so much more than a research project. I have learnt so much about medicine and life and I cannot thank everyone in the St Vincent’s Hospital Emergency Department enough. I will certainly miss everyone and the department next year!

**Project: Capsule Endoscopy: (1) Assessing Small Bowel Visibility & (2) Indications, Findings and Outcomes in Capsule Endoscopy Patients at a Sydney Teaching Hospital**

Student: Ketaki Ballurkar

Supervisors: Drs Donald Frommer & Robert Feller.

During this two-part study I learnt a great deal about all aspects of capsule endoscopy, including typical patient presentation, procedural skills and the assessment of a capsule endoscopy recording. I gained some insight into the practice of gastroenterology. I was able to practice history-taking through 160 patient interviews. Some aspects of the project were tedious and logistically challenging, and it was very difficult to find statistical support. Despite this, many aspects of this year were very rewarding.

**Project: Prognostic factors in breast cancer**

Student: Shu-Fen Lee

Supervisor: A/Professor Nick Hawkins.

My project involves validating the utility of an existing breast cancer database and using materials from this database to investigate the effect of variations in pathology reporting over the years on the reliability of ‘Adjuvant! Online’ – a web-based prognostic tool that has been developed to help clinicians in adjuvant therapy decision making. Although cleaning up the database was a very tedious process due to the amount of missing data and the lack of documentation of previous work that has been done, it has been a good learning experience. Another major challenge that I faced was being based in a colorectal cancer research lab. Consequently, I have to do a lot of self-directed learning, especially when I have questions that are specific to breast cancer. Nonetheless, despite all the problems that I encountered, I have enjoyed my ILP year in regards to both the research project itself and the experience of sitting in at an oncology clinic. This year has also given me some free time to pursue interests outside of medicine.

**Project: Outcome of patients undergoing a curative program of chemotherapy and surgery for oesophagogastric cancer**

Student: Taina Lee

Supervisor: Dr Eva Segelov

So far I have had a lot of experiences through the ILP in the many areas that it has focused on, such as data analysis and patient information. I have thoroughly enjoyed my time working on the ILP as I find that I have learnt a lot about the clinical side of medicine and the workings of the hospital whilst also spending some time on the data analysis and input side of research. I think that these experiences with research and statistics have really broadened my perspective on medicine and taught me a lot although I found it very challenging and intimidating at first. Another aspect of the ILP that I found challenging was my recent attendance at the COSA conference which was a lot of work but also gave back a lot in terms of experiencing conferences and learning how to make posters. Overall, ILP been a great experience and has made a valuable contribution to my understanding of medicine and I hope that it will continue to do so for the next couple of months.
Project: Timing of Antiretroviral Initiation in Primary HIV Infection (Clinical outcomes in HIV+ patients)
Student: Gerard Moynihan
Supervisor: Dr Tim Ramaciotti and A/Professor Tony Kelleher

Primary HIV infection (PHI) is being recognised more and more, especially in the Sydney area. This has offered practitioners a unique opportunity to treat HIV infection early. Whether this is beneficial when weighed up against the side effects of HIV drugs, the cost of the drugs and also long term adherence problems has yet to be proven. Using a large cohort (n>600) followed since the mid 80’s this project uses clinical progression to AIDS or death to assess if early treatment (<180/days) is better than later treatment. The project has been useful in introducing me to the world of both hospital and also specialised clinical practice... as well as to the world of statistics- which is quite hard to get your head around sometimes. Overall I have learnt a lot about HIV and also indirectly the public health around the disease and its prevention.

Project: Alcohol-related Presentations of Young People to The Emergency Department – Screening, Intervention & Follow-Up
Student: Natalie Tolvanen
Supervisor: Dr Judy Alford

I have been researching the current system of managing adolescents (25 years or younger) that present with alcohol abuse as either a primary or secondary diagnosis. I began with a literature review that revealed the success of the screening tools currently in place and the benefits of early intervention in reducing representation and development of dependence. However, the data collected so far from a review of records is revealing the need for more stringent screening protocol and intervention procedures.

My experience of the ILP has been both exciting and challenging. I have really appreciated the opportunities presented to me as I have been based in the ED, and I have found this clinical exposure invaluable (although my knowledge and lack of skills were burdensome at times!) I am now greatly anticipating returning at the beginning of 2007 to complete analysis of my findings and write up the final report.

Project: Decision Making About Patient Investigations and Treatment
Student: David Wu
Supervisor: Prof Bernadette Tobin

In this project, we followed up a US study by Nolan et al which investigated patient choices in terminal situations, and the roles they assigned for their doctors and their families. After interviewing over 50 patients, we’ve found the results to be similar in an Australian setting with minor differences yet to be analysed. These results show that the process of decision making is more complicated than current models and instruments(such as surrogate decisions and Advanced directives) suggest.

Aspects I’ve enjoyed: Working with the Professors at the Plunkett centre, patient contact at St. Vincents hospital, and learning about the process of medical research.
Aspects I found challenging: The lack of medical theory and clinical experience this semester.

Other projects in 2006 were:

- Behavioural Disturbances in General Hospitals
  Student: Gillian Edwards, Supervisor: Dr Nick Brennan

- ‘Rosacea’
  Student: Nishmi Gunasingham, Supervisor: Dr Margot Whitfeld

- HIV Dermatology
  Student: Sara Hungerford, Supervisor: Dr Margot Whitfeld
2006 has been an extremely busy year for the Patient Safety Simulation Centre. The centre reopened in January following extensive refurbishment of the interior, the installation of state-of-the-art audiovisual equipment and the purchase of more task trainers. The centre has strengthened its liaison with the staff of the St Vincent’s Clinical School and the St Vincent’s secretariat of UNSW in the planning and implementation of learning experiences for the medial undergraduates, especially in the development of the students’ practical clinical skills and cardiopulmonary resuscitation. Great support was obtained from Alex Pile RN, the Clinical Emergency Response Coordinator, Marea Reading RN, Pat Manusu RN, Carmen Frost RN and a multidisciplinary team approach to teaching.

During 2006 the centre expanded its services to students in three ways:

- **New Programs:** Under the guidance of Dr Tony Grabs and A/Professor Gordian Fulde, sessions were developed to introduce the student to the principles of trauma management. Trigger videos were developed in the centre to facilitate the objectives of the sessions. The sessions provided opportunities for the participants to practice the skills of airway management and emergency ventilation of the lungs on realistic manikin task trainers.

- **The facilities of the centre were made available to students of all UNSW hospitals considerably increasing group sizes for some sessions.**

- **The number of sessions conducted by the centre that were for the simpler practical skills increased considerably.** For example, 480 Phase 1 students learned “Blood pressure measurement by indirect sphygmomanometry” over eight sessions.

To accommodate the increased teaching load, the Centre and the Clinical School purchased a number of additional task trainers that are stored in the Centre. Feedback from the students on use of simulation in teaching has been strongly positive and the centre is planning some innovative learning experiences for next year in addition to refinement of those already in place.

**Professor G.A (Don) Harrison**
**Director, Patient Safety Simulation Centre**
Post-Graduate Students Report

There has been a steady increase in PhD student numbers at St Vincent’s over the last few years, reflecting tremendous opportunities for post-graduate research. Projects are available in the Garvan Institute, the Victor Chang Cardiac Research Institute, the Centre for Immunology, the National Centre for HIV Epidemiology and Clinical Research and the St Vincent’s Hospital Research Laboratories. Areas of particular strength include immunology, cancer, HIV, cardiology, diabetes and neurology. In 2006, throughout the St Vincent’s campus, there have been over 90 research students studying for their degree. This year saw the start of construction of a major new research facility adjacent to the Garvan building. When the new building is opened, there will be further opportunities for post-graduate students.

While most students are science graduates studying for PhD degrees, there are numerous medical graduates studying for a PhD or MD, and some students are enrolled for Masters degrees. At the time of writing, in mid-November, 19 students have had their theses passed in 2006, and 2 others are expected to pass by the end of the year. Most of these received PhD degrees, and there were 2 MDs and 2 Masters.

Several student projects were highlighted during the year. A large number of students presented posters at the St Vincent’s Research Symposium held on 15 September, and oral presentations were given by Sarah Sasson, Liz Caldon, David Liuwantara, Samantha Oakes and Andrew Hoy. Many students from St Vincent’s took part in the Faculty Research Day at Kensington in October, where Milena Furtado, Alfred Hing and Heather Lee won awards. In the May issue of Uniken, Kate Jeffrey was featured in an article on leading Post-Graduate Students.

In 2006 the UNSW Graduate Research School took a number of initiatives. It introduced a user-friendly web site, which provides a wealth of information for prospective research students, as well as for those already enrolled. The Graduate Research School sends an email bulletin several times per year to all PhD students. A streamlined Annual Progress Review Form has been introduced. The review involves at least one experienced researcher who is not part of the student’s supervision team. At St Vincent’s, the reviews are carried out by the various Institutes and Centres, most of which have substantial experience in this process. First Year Students also participate in orientation programs held by the Faculty of Medicine at Kensington.

A/Professor William Sewell
Post-Graduate Co-ordinator
## Staff Listing 2006

### Administration

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<tr>
<th>Name</th>
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<tbody>
<tr>
<td>Mrs Melinda Gamulin</td>
<td>Clinical School Manager</td>
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<tr>
<td>Ms Naomi Esselbrugge</td>
<td>Administrative Officer</td>
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<tr>
<td>Ms Irena Williams</td>
<td>Administrative Officer to Professor Ric Day</td>
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<tr>
<td>Mr Chris Pile</td>
<td>Administrative Assistant (commenced Sept 06)</td>
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<tr>
<td>Ms Kate Rowe</td>
<td>Executive Assistant to Professor Terry Campbell and Dr Eva Segelov</td>
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<td>Ms Vivienne Malcolm</td>
<td>Executive Assistant to Professor Allan Spigelman</td>
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### Academic

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<tr>
<td>Professor Terry Campbell</td>
<td>Head of School &amp; Clinical Associate Dean</td>
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<td>Professor Allan Spigelman</td>
<td>Professor of Surgery</td>
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<td>Professor Ric Day</td>
<td>Professor of Clinical Pharmacology</td>
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<td>Professor David Cooper</td>
<td>Scientia Professor of Medicine</td>
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<td>Professor Richard Harvey</td>
<td>Professor of Medicine</td>
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<td>Associate Professor William Sewell</td>
<td>Associate Professor of Clinical Immunology</td>
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<tr>
<td>Dr Don Frommer</td>
<td>Senior Lecturer in Medicine (Retired July 2006)</td>
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<tr>
<td>Dr Eva Segelov</td>
<td>Senior Lecturer in Medicine</td>
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<tr>
<td>Dr Tony Grabs</td>
<td>Senior Lecturer in Surgery</td>
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<tr>
<td>Dr Mark Danta</td>
<td>Senior Lecturer in Medicine (Commenced Dec 2006)</td>
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### Conjoint Appointments

#### Professors

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<td>Anthony Basten</td>
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#### Associate Professors

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<td>Kenneth Williams</td>
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<td>Steven Wilson</td>
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26 SVCS Annual Report
**Senior Lecturers**

Russell Aldred
Asne Bauskin
Lourens Bester
Alexander Beveridge
Ian Blair
Christopher Bradbury
Philip Brenner
Robert Brink
David Brown
Michael Buckland
Neil Buckland
Alison Butt
Jacqueline Center
Paul Darveniza
Michael Dawson
Martin Duffy
Michael Exton
Steven Faux
Robert Feller
Douglas Fenton-Lee
Andrew Field
Andrew Finckh
Ray Garrick
Laila Girgis
Thomas Grewal
Shane Grey
Jenny Gunton
Vanessa Hayes
Lisa Horvath
William Hughes
Graham Jones
Joanne Joseph
Maija Kohonen-Corish
Vincent Lamaro
David Laybut
Kin-Cheun Leung
Monique Malouf
Romesh Markus
Samuel Miliken
Steven Mistilis
John Moore
Philippa O’Brien
Terence O’Connor
Sharon Oleskevich
Gregory O’Sullivan
Kurosh Parsi
Malcolm Pell
Marshall Plit
Paul Preisz
Michael Rolph
Stephen Rosenman
Amanda Sainsbury-Salis
Neville Sammel
Carsten Schmitz-Peiffer
Pablo Silveira
Elizabeth Silverstone
Vasantha Stesin
Ian Sutton
Stuart Tangye
Helen Tao
Peter Ver Vaart
Bryce Vissel
Bruce Walker
Colin Watts
Stephanie Wilson
Alexander Wodak
Michael Wyer

**Lecturers**

Patricia Austin
Traude Beilharz
Damien Boyd
Kathryn Brooke
Gavin Champion
Catherine Clarke
Kharen Doyle
Suzanne Everitt
Gerald Fogarty
Adam Hill
Megan Hitchins
Michael King
Rhonda Kwong
Juliana Lamoury
Melanie Lovell
Philip Macaulay
Simon McErlane
Susan Parker
John Raftos
Jacqueline Stoeckli
Clive Sun
Catherine Suter
Geoffrey Warwick
David Williams

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**Promotions in 2006**

Congratulations to the following consultants on their promotion:

- Andrew Carr  Conjoint Professor (effective Jan 2007)
- Anthony Kelleher  Conjoint Associate Professor (effective Jan 2007)

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**Becoming a Conjoint**

If you are interested in becoming an Conjoint with UNSW for St Vincent’s Clinical School, please contact Melinda Gamulin on 8382 2290 or at mgamulin@unsw.edu.au
### Phase 1

<table>
<thead>
<tr>
<th>Teaching Period 1</th>
<th>26 February - 29 April 2007</th>
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<td>Mid Session Recess</td>
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### Phase 1/2 (Clinical Attachment)

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### Phase 2 (ILP)

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| Mid Year Break         | 9 July - 22 July 2007       |

| Teaching Period 3      | 23 July - 16 September 2007 |
| Recess                 | 17 September - 23 September 2007 |

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### Year 5

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| Teaching Period 2      | 14 May - 6 July 2007        |
| Mid Year Break         | 9 July - 22 July 2007       |

| Teaching Period 3      | 23 July - 14 September 2007 |
| Recess                 | 17 September - 23 September 2007 |

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### Year 6

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| Teaching Period 2      | 14 May - 8 July 2007        |
| Mid Year Break         | 9 July - 22 July 2007       |

| Teaching Period 3      | 23 July - 16 September 2007 |
| Study & Exam Break     | 17 September - 7 October 2007 |

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