



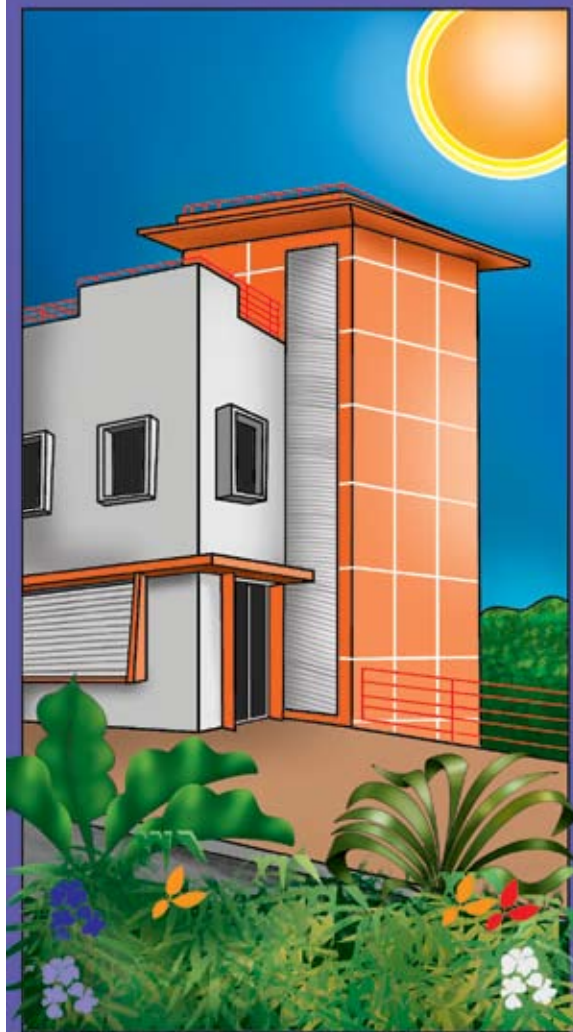
THE UNIVERSITY OF THE WEST INDIES  
CAVE HILL CAMPUS, BARBADOS

THE FACULTY OF  
**MEDICAL  
SCIENCES**

*REGULATIONS & SYLLABUSES*

**2010-2011**

**Information Guide**





**THE UNIVERSITY OF THE WEST INDIES**  
**CAVE HILL CAMPUS**

**FACULTY OF MEDICAL SCIENCES**  
**UNDERGRADUATE HANDBOOK 2010 - 2011**  
**Email: [fms@cavehill.uwi.edu](mailto:fms@cavehill.uwi.edu)**

**DISCLAIMER:**

The information in this booklet is accurate at the time of printing. Subsequent publications may therefore reflect updated information. Students should consult the Dean's office where clarification is required.

This booklet gives information on the medical programme at the Cave Hill Campus of the University of the West Indies (Barbados). For courses offered at the other Campuses, please see Faculty booklets for the Mona (Jamaica) and St. Augustine (Trinidad & Tobago) Campuses.

**Note:** The Cave Hill Curriculum is modelled on the Mona Curriculum, and approved by the Academic Quality Assurance Committee (AQAC).

**THE UNIVERSITY RESERVES THE RIGHT TO MAKE SUCH CHANGES TO THE CONTENTS OF THIS PUBLICATION AS MAY BE DEEMED NECESSARY.**

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### **MISSION STATEMENT OF THE FACULTY OF MEDICAL SCIENCES**

The mission of the Faculty of Medical Sciences is to recruit and train capable and committed students as competent health care professionals who will be able to meet the health needs of the people they serve, but particularly those of the Caribbean, and who will strive for professional excellence throughout their careers in a constantly changing world.

## INTRODUCTION TO THE FACULTY

### Background

The Faculty of Medical Sciences (FMS) began its distinguished history as the principal institution for medical education in the Commonwealth Caribbean in 1948 with the Medical Faculty at the Mona Campus, Kingston, Jamaica. Founded as the University College of the West Indies, as a College of the University of London, the Faculty of Medical Sciences was the first established faculty of what later became the University of the West Indies (UWI) in 1962. In 1967, the Faculty expanded to incorporate clinical teaching programmes at the Cave Hill Campus and the Queen Elizabeth Hospital in Barbados and the St. Augustine Campus and Port of Spain General Hospital in Trinidad and Tobago.

In 1989, the Eric Williams Medical Sciences Complex was opened at Mount Hope in Trinidad and Tobago. This facility houses UWI's second full medical programme under a multi-disciplinary Faculty, with a Medical School as well as Schools of Dentistry, Pharmacy and Veterinary Medicine.

From inception until 5 years ago, the UWI medical programme was accredited by the General Medical Council of the UK. In July 2004, The Caribbean Accreditation Authority for Education in Medicine (CAAM-HP) and Other Health Professions was established by the Governments of the Region (CARICOM). With representatives of both the GMC and the Canadian Licensing Authority on its executive, it replaces the GMC for the purpose of accreditation of medical programmes in the region. The UWI Medical Programmes have been accredited by CAAM-HP until 2012.

In 2008 the Cave Hill Campus upgraded and expanded its School of Clinical Medicine and Research, with its 40 year old, two-year, clinical programme, to include a Phase 1 programme (years 1 to 3) and become a full faculty.

Over the years graduate programmes in a wide range of specialties have been developed at all campuses, and the Cave Hill Campus has strong programmes in clinical specialties, leading to the DM in hospital based specialties and the Diploma, Masters and DM in Family Medicine, while it initiated the Diploma and Masters in Public Health in 2008.

Today, the University of the West Indies as a whole has the unique status of being a truly international university, serving as the principal tertiary education institution for 14 Caribbean (CARICOM) countries, as well as hosting a growing number of international students.

The Faculty of Medical Sciences, therefore, plays a vital role in the training of health care professionals, particularly doctors and at all levels, from undergraduate through post graduate to continuing medical education, for the entire region.

## **DEAN'S MESSAGE**

Welcome to the Faculty of Medical Sciences at the Cave Hill Campus!

You are members of a very special group – only the third class to enter the new Phase 1 Programme of the MBBS degree – the Bachelor of Medicine, Bachelor of Surgery – at the UWI's Cave Hill Campus. You are entering university at a historic period in the life of the University and the Faculty of Medical Sciences, and you are in fact helping to “make history”; you will be a part of that soon-to-be historic cohort of new graduates who will help to build health care in Barbados and the Eastern Caribbean to be the envy of the world, and to build our Queen Elizabeth Hospital into the Mayo Clinic of the Caribbean.

The UWI was founded 62 years ago, at the Mona Campus in Jamaica, on the site of an old sugar estate, in wooden buildings hastily built to serve as the Gibraltar Camp for World War II refugees. In 1948 a mere 33 students entered the university's first ever class, the First MB class. They were selected by interview from more than 600 applicants across the Caribbean, and almost all of them justified their selection by distinguishing themselves, as specialists, consultants, lecturers, family practitioners, public health leaders and several as eminent professors in our alma mater. An honours graduate of an early class (1957) is now our own UWI Chancellor, Sir George Alleyne, Director Emeritus of PAHO / WHO.

With the expansion of the Medical Faculty to better serve the Caribbean, satellite teaching programmes were developed in Barbados and Trinidad in 1967 – 68. In 2007 we celebrated the 40th anniversary of teaching at Cave Hill and the Queen Elizabeth Hospital. And in looking back we can take pride in the splendid achievements of our alumni, in the Caribbean and all over the World, and the progress made in health care, teaching and research in our region as a result. Our own Cave Hill alumni are leading in these successes, as we see in the outstanding results in several areas of research, especially in our Chronic Disease Research Centre. This is the research arm of the Faculty of Medical Sciences, and it is an internationally recognised Centre of Excellence, led by one of our own Cave Hill / QEH UWI alumni, Professor Anselm Hennis. And UWI Cave Hill graduates comprise 84 % of QEH doctors.

You will be among a new group of pioneers – leaders (as the name “doctor” implies, from the Latin for leader or teacher) in the development of Caribbean medicine over the next 40 years or more of your careers. And as members of a young programme, you will benefit from the enthusiasm and commitment of a dedicated faculty, whose aim is to teach you the methods, the benefits and the joys of entering the most honourable profession and the benefits and joys of life-long learning.

UWI now teaches medicine at four sites – Mona, St. Augustine, Nassau (the clinical programme) and Cave Hill – where the School of Clinical Medicine and Research became the Faculty of Medical Sciences in 2008, with the entry of the historic first year class. The Faculty also teaches nine graduate programmes – from Accident and Emergency Medicine to Surgery. Recently emphasis is being placed on Primary Care training and Public Health training, in response to the needs of the Governments.

You will be at the centre of these changes. They are all a part of the UWI Strategic Plan for 2007 – 2012. In this comprehensive strategic plan, which emphasises excellence in research and teaching, student centredness, regional needs and global outreach, the whole university is engaged, and students are at the centre. In medicine in particular, the Medical Student Association (MSA) is integral to the planning process, and our MSA President and Class Reps are actively involved at every level, from curriculum planning to Faculty Board.

We have focused on creating high quality facilities at Cave Hill and the Queen Elizabeth Hospital, with emphasis on small numbers and personalised teaching, and strong support services. Our curriculum is a modern, integrated curriculum, with a hybrid approach and a mixture of teaching and learning modalities. Every student is assigned a mentor / counsellor (and the availability of the very best in counselling services is something we are proud of) to help students in the transition to a demanding and sometimes stressful career in medicine. Among our appendices we include some hints on dealing with stress and converting stressful events into energy. And we also point out that with our broad range of health sciences in Phase 1 (years 1 to 3) and exposure to research methods in year 3, students who successfully complete Phase 1 receive the B Med. Sci (**Bachelor of Medical Sciences**) degree. This allows those who prefer to pursue a more scientific career or a career outside of clinical medicine to do so, rather than force themselves into a career mould of medical doctor, which may not suit them.

We also include in our curriculum strong training and experience in communication skills and in teaching and learning methods, to make your path easier and more fulfilling, as you develop the habit of life-long learning.

And finally, it should be noted that the University of the West Indies MBBS programmes are fully accredited by the Caribbean Accreditation Authority for Medicine and other Health Professions (CAAM-HP), the regional (CARICOM) accreditation Board, analogous to the GMC of the UK.

And so, we congratulate you on your choice of career. The pursuit of a career as a medical doctor is the most honourable, the most fulfilling, and at the same time the most privileged that you could choose. With a positive attitude and a love for humanity, we hope you will enjoy every day of your life as a medical student, and subsequently as a doctor.

I welcome you on behalf of our entire faculty, and on behalf of my successor as Dean from the beginning of this academic year – Professor Mike Branday, distinguished surgeon and medical educator, who joins us from our sister campus at Mona.

May God bless you all as you strive to be the best you can be.

**Henry S. Fraser**  
**Professor of Medicine and Clinical Pharmacology, and outgoing Dean,**  
**Faculty of Medical Sciences**



## **Faculty of Medical Sciences Representative Message 2010-2011**

Colleagues and Friends,

It is with great pleasure I welcome and congratulate you on your choice to study here at the Cave Hill Campus of the University of the West Indies and your admission to the Faculty of Medical Sciences. The fact that you have chosen this field of study and the place for study indicates that you understand the high quality that surrounds this program and the excellence being emulated by our predecessors.

Like our predecessors, we in the M.S.A. will ensure your smooth transition into what can be considered the bittersweet days of your life. Therefore, we will be continuing our Med Brother/Med Sister program, where you will have access to a mentor who can give you advice or assistance when needed.

All work and no play makes Jack a dull boy, therefore, we will be having a series of activities during the year which you are encouraged to attend and participate in as part of your 1st year experience. These activities range from philanthropic drives to social gatherings and should assist you in balancing your work and your play.

Finally, let me on behalf of the Medical Students' Association, wish you success in this voyage you are about to embark on. We all know the challenges surrounding this area of study but we also know the rewards that can be reaped, as you have the power to make a difference in someone's life each and every day.

I know some of you will become disheartened with the pressures of work but what I want you to always remember in your journey to become the finest steel, you must go through the hottest fires!

Sincerely,

**Christopher St. Hill**  
**President 2010-2011**  
**Medical Students' Association**  
**UWI Cave Hill Campus**

**ACADEMIC CALENDER  
2010-2011**

**SEMESTER I:**

**August - December 2010**

August 29  
August 30 - September 3

Semester I Begins  
Registration and Orientation

September 06  
September 17

Teaching starts  
Last day for Add/Drop Period  
Last day for late Registration

October 23

Graduation Ceremony, Cave Hill

December 03  
December 06-21  
December 21

Teaching ends  
Examination Period  
Semester I Ends

**SEMESTER II:**

**January - May 2011**

January 23  
January 24  
January 30

Semester II Begins  
Teaching starts  
Deadline for applications for transfer to  
Faculties of Medical Sciences and Law  
Last day for Add/Drop Period  
Last day for Registration

March  
March 30

Scholarship Examinations  
Deadline for applications for transfer  
to Faculties other than Law and  
Medical Sciences

April 21  
April 27 - May 13

Teaching Ends  
Examination Period

May 13

Semester II Ends

**STAFF LIST**  
**2010-2011**

**Academic Staff**

**DEAN:** Professor J. Michael Branday  
MBBS, MS (UWI), FACS, FRCSEd., MSc (Medical Education)

**DEPUTY DEAN, Pre Clinical:** Dr. Peter Adams  
MBBS (UWI), MSc, DM (Fam Med)

**DEPUTY DEAN, Clinical:** Dr. Jerome Jones  
MD (Cornell)

**DEPUTY DEAN, Research** Professor Anselm Hennis  
MBBS (UWI), MSc (Lond), PhD (Lond), FRCP UK, FACP

**DIRECTOR OF MEDICAL EDUCATION:** Dr. Priscilla Richardson  
BA, MA, M.Ed., Ed.D.

**Administration Staff (Pre-Clinical)**

Grace Ifill  
Christianne Walcott, BA, MA  
Margarita Walton  
Nicole Barrow BSc.  
Susan Phillips, CPS  
Wesley Moore

Administrative Assistant  
Administrative Officer  
Stenographer Clerk  
Stenographer Clerk  
Stenographer Clerk  
Stenographer Clerk

Kiana Hall, BSc., MSc.  
Keisha Mascoll, BSc., MPhil

Medical Laboratory Technologist  
Medical Laboratory Technologist

Jamal Inniss

Office Assistant

**Administration Staff (Clinical)**

Alan Barrow, BSc  
Judy Best, BSc. Hons.  
Marcia Murrell, BSc.  
Pamela Alleyne  
Cheryl Charles  
Esther Harrison  
Kirk Marshall

IT Support Technician  
Administrative Assistant  
Stenographer Clerk  
Stenographer Clerk  
Stenographer Clerk  
Stenographer Clerk  
Stenographer Clerk

Emerson Haynes

Clinical Photographer/Audiovisual IT Support Technical

Cedric Alleyne

Laboratory Technician

Tyrone Belle, DMT, MPH, MPhil  
Juann Ward, FMT

Senior Medical Technologist  
Medical Laboratory Technologist

## **Academic Staff by Area of Specialisation (Pre-Clinical)**

### **Anatomy**

Uma Gaur, MBBS (Delhi), MS Anatomy

Senior Lecturer

### **Biochemistry, Molecular Biology**

Abboud Ghalayini, BSc (Beirut), MSc (Houston), PhD (Houston)  
Nkemcho Ojeh, BSc (Wales), MRes (Manchester) PhD (Lond)

Senior Lecturer  
Lecturer

### **Bioethics, Medical Ethics, Medical Education**

Priscilla Richardson, BA, MA, MEd, EdD  
Heather Hennis, BSc, MEd, Adv. Dip Management

Director of Medical Education  
Lecturer

### **Pharmacology**

Damian Cohall, BSc (UWI), PhD Pharmacology (UWI)  
Alaya Udupa, MBBS, MD (Mysore), PhD (Manipal)

Lecturer  
Senior Lecturer

### **Physiology**

Subir Gupta, BSc, MSc, PhD (Calc)  
Jacqueline Vigilance, BSc (UG), Dip Ed (UT), MPhil (UWI)

Lecturer  
Lecturer

### **Public Health & Epidemiology**

Alafia Samuels, MBBS, MPH, PhD  
Nigel Unwin, BA (Oxon), MB, BCh (Oxon), MRCP (UK),  
MFPH, MSc, FRCP, DM (Oxon)

Senior Lecturer  
Honorary Professor of Public Health  
and Epidemiology  
Senior Lecturer  
Part time Lecturer

Carol Mulder, DVM (Guelph), MSc (Epidem)  
Madhuvanti Murphy, BSc, MPH, Dr. PH.

**Academic Staff by Area of Specialisation (Clinical)**  
**Anaesthetics & Intensive Care**

Curtis Alleyne, BSc (Hons), MBBS, DM (Anaes)	Associate Lecturer
Rowena Ayhee-Hallsworth, MBBS (UWI), FFARCS	Associate Lecturer
Michael Fakoory, MBBS (UWI), DM (Anaes)	Associate Lecturer
Philip Gaskin, MBBS, DM (Anaes & Intensive Care)	Associate Lecturer
Yasodananda Kumar Areti, MBBS, Dip (Anaes), MD (Anaes)	Senior Lecturer
Kumar Mahadevappa, MBBS, DA, MD	Associate Lecturer

**Child Health**

Shirley Alleyne, MBBS (UWI), FCAP	Associate Lecturer
Jennifer Campbell, MBBS (UWI), DCH, DM (UWI)	Associate Lecturer
Clyde Cave, MBBS (UWI), DCH, FRCP (Can)	Associate Lecturer
Angela Jennings, MBBS, DM (UWI) (Paediatrics)	Associate Lecturer
Ranita Jhagroo, MB BCh, BAO, MRCPCH	Associate Lecturer
Kandamaran Krishnamurthy, MBBS, DM (Paediatrics)	Associate Lecturer
Alok Kumar, MBBS (India), DCH (India), MD (India)	Senior Lecturer
P. Michele Lashley, MBBS (UWI), DCH, DM (Paed) (UWI), FRCP (Edin)	Lecturer
Anne St. John, MBBS (UWI), FRCP (Can)	Honorary Professor
Julianne Steel-Duncan, MBBS, DM (Paeds)	Associate Lecturer
Gayle Medford, MBBS, DCH, DM (Paeds)	Associate Lecturer

**Emergency Medicine**

Brian Charles, MBBS (UWI), MSc (Emer Med), DM (Emer Med)	Associate Lecturer
Anne-Marie Cruickshank, MBBS (UWI) DM (Emer Med) (UWI)	Associate Lecturer
Reginald King, MBBS (UWI), DM (Emer Med) (UWI)	Associate Lecturer
Rawle Springer, MBBS DM (Emer Med) (UWI)	Associate Lecturer
Haresh Thani, MBBS (Ind), FRCS (Glas)	Associate Lecturer
Harold Watson, MBBS (UWI), MSc (Emer Med), DM (Emer Med) (UWI)	Lecturer

## Family Medicine

Peter Adams, MB BS, MSc, DM (Fam. Med), (UWI)  
Colin Alert, MB BS, MSc, DM (Fam. Med), (UWI)  
Michael Hoyos, MBBS (UWI), Dip Anaesthesia (UWI)

Lecturer  
Associate Lecturer  
Associate Lecturer and Honorary  
Fellow, (UWI)  
Associate Lecturer  
Lecturer  
Associate Lecturer

Adrian Lorde, MBBS MSc. (UWI) (Fam Med)  
Euclid Morris, MB BS, MSc, MRCP  
O. N. DaCosta Thompson, MB BS, MSc, DM (Fam. Med), (UWI)

## Haematology

Cheryl Alexis, MBBS (UWI), Dip (Child Health) MRCP  
Theresa Laurent, BSc (Hons), MBBS, DM (Haem)  
E. Emmanuel Fakunle, MBBS, MSc (Haematology), FMCPath

Lecturer  
Associate Lecturer  
Associate Lecturer

## Medicine

Suleman Bhamjee, MBBS (UWI), Dip Derm  
Jocelyn Brookes, MBBS, MRCP (UK), FRCR  
David Corbin, BA, MB BChir Camb, MRCP (UK)  
Rudolph Delice, MBBS, DM Medicine (UWI)  
Charles Edwards, BSc, MBBS (UWI), MACP, FRCP (Can)  
Andrew Forde, (M) BSc, MBBS (UWI), Dip Derm (Lond), SAAD  
Raymond Forde, MBBS, DM (Fam Med)  
Cindy Flower, MBBS, DM (UWI)  
Henry Fraser, GCM, BSc Lond, MBBS (UWI), PhD (Lond.)

Associate Lecturer  
Associate Lecturer  
Honorary Professor  
Associate Lecturer  
Senior Associate Lecturer  
Associate Lecturer  
Associate Lecturer  
Associate Lecturer  
Professor, of Medicine and Clinical  
Pharmacology  
Associate Lecturer  
Lecturer

Colette George, MBBS (UWI), MRCP (UK)  
Carlisle Goddard, MBBS, DM (UWI), MSc (Lond)

Graham Griffith, MBBS (UWI), DM (Internal Med) (UWI)  
Trevor Hassell, GCM, MBBS (Lond)-UCWI, FRCP  
Anselm Hennis, MBBS (UWI), MSc. (Lond), PhD (Lond) FRCP, FACP

Associate Lecturer  
Adjunct Professor (Cardiology)  
Professor of Medicine and  
Epidemiology

Richard Ishmael, MBBS (UWI), FAAP, FACC, FRCP (Can),  
FCCP  
Krishna Kilaru, MBBS, IFCD, MD (Derm & Venereology)  
Michael Krimholtz, MBBS, MRCP, MSc., MD

Associate Lecturer  
Associate Lecturer  
Associate Lecturer

Sean Marquez, MBBS (UWI), FRCP (Can)	Associate Lecturer
Raymond Massay, BSc McM, MBBS, (UWI), FRCP (UK)	Associate Lecturer
Stephen Moe, MBBS (UWI), Dip (Internal Med), Dip	Associate Lecturer
Emile Mohammed, MB ChB (Aberdeen), MRCP (UK)	Associate Lecturer
Harley Moseley, MBBS (UWI)	Associate Lecturer
George Nicholson, DM, FRCP, FACP	Professor Emeritus
Anders Nielsen, MD, MPA, MPH	Senior Lecturer
Ambrose Ramsay, BSc. (Hons) MBBS, Dip. Gerontology	Associate Lecturer
Timothy Roach, BA (Camb), MA (Lond), MB BChir (Cantab), MRCP	Honorary Professor
Radhakanth Shenoy, MBBS, MD, RT DMRT	Associate Lecturer
Suzanne Smith-Connell, MD (Diplomat in America Board of Radiology Certified in Radiation, Oncology and Hospice and Palliative Medicine	Associate Lecturer

### **Obstetrics & Gynaecology**

Carlos Chase, MBBS, DGO, CLM DM (UWI)	Associate Lecturer
Garth McIntyre MBBS FRCOG	Lecturer
Ibukunle Adebayo Ogunbiyi, MBBS, FRCS (Ed.), MRCOG (UK), DFFP	Associate Lecturer
Hugh Thomas, MBBS (UWI), MRCOG	Lecturer
Wayne Welch, MBBS (UWI), MRCOG	Associate Lecturer

### **Pathology & Microbiology**

Stewart Garriques, MBBS (UWI), Cert (Anat Path), Amer Bd Path	Associate Lecturer
David Gaskin, MBBS (UWI), DM Path (UWI)	Associate Lecturer
Stephen Jones, MBBS (UWI), DM (UWI)	Associate Lecturer
Desiree Skeete, MBBS (UWI), DM (Pathology)	Lecturer
Efosa Oghagbon, MBBS, FMCPATH	Associate Lecturer
Marquita Gittens, (St. Hilaire), PhD	Lecturer
Delores Lewis, BSc, MSc (Micro) MBBS (UWI)	Associate Lecturer

### **Psychiatry**

Ermine Belle, MBBS, DM (Psych)	Associate Lecturer
Cyralene Bryce, BSc (Hons.) MBBS, DM (Psych)	Associate Lecturer



Michael Campbell, BA. (New Col. Fla.), MS. (Fla. State),  
PhD. (Fla.)

Lecturer

Maisha Emmanuel, MBBS (UWI), DM (Psych)(UWI), MSc. (Birm)

Lecturer

Sharon Harvey, MBBS (UWI), MRCPsych

Associate Lecturer

## **Public Health**

George Boulton, DHSM, DHSA, FCMI, FRSM

Associate Lecturer

Nigel Unwin, BA (Oxon), MB, BCh (Oxon), MRCP (UK),  
MFPH, MSc, FRCP, DM (Oxon)

Honorary Professor of Public Health  
and Epidemiology  
Lecturer

Pamela Gaskin, BSc (Biology), PhD (Nutrition)

Associate Lecturer

Geert Victor Haghebaert, MD, Dip (Tropical Med),

Associate Lecturer

Stuart Morgan, MA, BSc, Chartered FCIPD, FCMI,

Associate Lecturer

Carol Mulder, DMV, MSc (Epidemiology)

Senior Lecturer

Madhuvanti Murphy, BSc, MPH, Dr. PH.

Part time Lecturer

Anne Nicolay, BSc (Economics), MSc

Associate Lecturer

Alafia Samuels, MBBS, MPH, PhD

Senior Lecturer

## **Radiology**

Peter Jolly, MBBS (UWI), DM (Rad) (UWI), FRCR

Associate Lecturer

Cecil Rambarat, MBBS, DM (UWI)

Associate Lecturer

Graeme Thomas, MBBS, DM (UWI)

Associate Lecturer

Okella Ward, MBBS

Associate Lecturer

## **Surgery**

David Callender, MBBS, FRCOphth

Associate Lecturer

Randy Carrington BSc (Hons), MBBS, FRCS (Edin), FRCS  
(Intercollegiate Board in Trauma and Orthopaedic Surgery)

Associate Lecturer

Vincent Clarke, MBBS (UWI), FRCS (Edin)

Associate Lecturer

Jerry Emtage, MBBS (UWI), FRCS (Can)

Associate Lecturer

Selwyn Ferdinand, MBBS (UWI), FRCS (Edin)

Associate Lecturer

D. Clive Gibbons, MA, MB BCH (Camb), LRCP,

Senior Associate Lecturer

DO (Lond), MRCS, MRCP, FRCS (Edin)

Haresh Gopwani MBBS (UWI), FRCS (Edin)

Associate Lecturer

Anthony Harris, MBBS (UWI), FRCS (Edin)

Associate Lecturer

Halstead Howell, MD, FACS

Associate Lecturer

Selma Jackman, MBBS (UWI), FRCS (Edin)	Associate Lecturer
Jerome Jones, MD (Cornell)	Senior Lecturer
Ramesh Jonnalagadda, MBBS, MS Madr, FAIS	Senior Lecturer
Mohammed Kazi, BSc, MBBS (UWI), FRCS	Associate Lecturer
Margaret O'Shea, MBBS, DM (Gen Surg) (UWI)	Associate Lecturer
W. J. Cyril Reifer, MBBS (UWI), FAA Ophth	Associate
R. David Rosin, MS, MB, FRCS, FRCS(Ed), FICS, FCCS, FIAS, FIASO, DHMSA	Professor of Surgery
Hannu Savolainen, MD, PhD	Professor of Vascular Surgery
Gita Sajeev, MBBS, Dip. (Ophth), MRCOphth, FRCS	Associate Lecturer
Winston Seale, MBBS (UWI), FRCS (Edin)	Associate Lecturer
Roger Thomas, MBBS (UWI), FRCOphth	Associate Lecturer
Errol Walrond, CHB, FRCS, FACS	Professor Emeritus
Maurice Walrond MBBS (UWI), DM (Gen Surg)	Associate Lecturer
Christopher Warner, MBBS (UWI), FRCS (Edin), FCCS	Associate Lecturer
Judy Ward, MBBS FRCS	Associate Lecturer

**Academic Staff by Area of Specialisation (Research)  
Chronic Disease Research Centre (CDRC)**

Anselm Hennis, MBBS (UWI), MSc. (Lond), PhD (Lond) FRCP, FACP	Professor of Medicine and Epidemiology, and Director
R. Clive Landis, PhD	Professor in Cardiovascular Research
Ian Hambleton, PhD (Lond)	Professor in Biostatistics
Angela Rose, BSc, MSc (Lond)	Lecturer
Kim Quimby, MBBS (UWI), MSc (Lond)	Lecturer

## **OFFICERS OF THE UNIVERSITY OF THE WEST INDIES**

### **CHANCELLOR**

Prof. The Hon. Sir George Alleyne  
OCC, MD, FRCP, FACP (Hon), DSc (Hon) UWI

### **VICE CHANCELLOR**

Prof. E. Nigel Harris  
BSc Howard, MPhil Yale, MD Penn, DM UWI

### **CHAIRMEN, CAMPUS COUNCILS**

Cave Hill      Mr. Paul B. Altman JP  
GCM, BCH, LLD

Mona            Dr. Marshall Hall  
CD, BSc Col, PhD Wis

St. Augustine    Mr. Ewart Williams  
BSc, MSc UWI

Open Campus    Sir K. Dwight Venner  
BSc, MSc UWI

### **CAMPUS PRINCIPALS & PRO-VICE CHANCELLORS**

Prof. Wayne Hunte  
BSc, PhD UWI, (Post Doctoral  
Fellow Dalhousie, Canada)

Dr. Bhoendradatt Tewarie  
BA Northwestern, MA Chicago, PhD Penn

Prof. Ronald Edward Young  
BSc, MSc UWI, PhD St. Andrew

Prof. Alvin Wint  
BSc UWI, MBA North Eastern, PhD Harvard

Cave Hill      Prof. Sir Hilary Beckles  
Principal      BA, PhD Hull

Mona Principal	Hon. Prof. Gordon Shirley BSc UWI, MBA, DBA Harv
St. Augustine Principal	Prof. Clement Sankat BSc, MSc UWI, PhD Guelph, MASAE, MAPETT, FIAgreE
Open Campus Principal	Prof. Hazel Simmons-Mc Donald BA, Dip. Ed. UWI, MA Ling, MA Dev Ed, PhD Stanford

#### **DEPUTY CAMPUS PRINCIPALS**

Cave Hill	Prof. V. Eudine Barriteau BSc UWI, MPA New York, PhD Howard
Mona	Mr. Joseph Pereira BA, Dip Ed UWI, MA Quebec
St. Augustine	Prof. Rhoda Reddock BSc UWI, MSc ISS, PhD AMST
Open Campus	Prof. Vivienne Roberts BSc UWI, Dip Ed, MSc, PhD UWI

#### **UNIVERSITY REGISTRAR**

Mr. C.W. Iton  
BSc UWI, LLM Essex

#### **UNIVERSITY BURSAR**

Mr. Archibald Campbell  
BSc MSc UWI, FCA

#### **UNIVERSITY LIBRARIAN**

Ms. Jennifer Joseph  
BA UWI, Dip Lib & Info Sci UWI, MS Columbia,  
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## **PRINCIPAL OFFICERS OF THE CAVE HILL CAMPUS**

### **CAMPUS PRINCIPAL**

Prof. K.A. Hilary McDonald Beckles – Cave Hill  
BA, PhD (Hull)

### **DEPUTY CAMPUS PRINCIPAL**

Prof. V. Eudine Barriteau  
BSc (UWI), MPA (NYU), PhD (Howard)

### **CAMPUS REGISTRAR**

Mrs. Jacqueline Wade, JP  
BA (UWI), MSc (Manc)

### **CAMPUS BURSAR**

Miss Lisa A.C. Alleyne

### **CAMPUS LIBRARIAN**

Miss. Elizabeth Watson  
B.A (UWI), M.Sc. (LIU), FCLIP

### **Affiliated Campus Facilities of all teaching sites**

#### **Barbados**

- The Faculty of Medical Sciences (formerly The School of Clinical Medicine and Research), Cave Hill Campus, Barbados
- The Queen Elizabeth Hospital, Barbados
- The Chronic Disease Research Centre, TMRI, Jemmotts Lane, Bridgetown
- Government Polyclinics in Barbados in which undergraduate training takes place (chiefly The Edgar Cockrane Polyclinic and the Randall Phillip Polyclinic)

#### **Jamaica**

- The Tropical Metabolism Research Institute (TMRI)
- The Medical Research Council's Sickle Cell Research Unit
- The Caribbean Food and Nutrition Institute (CFNI)
- University Hospital of the West Indies (UHWI)
- Kingston Public Hospital (KPH)
- Bustamante Hospital for Children (BHC)
- Cornwall Regional Hospital (CRH)

#### **Trinidad**

- The Eric Williams Medical Sciences Complex, St. Augustine, Trinidad & Tobago
- San Fernando General Hospital
- Port of Spain General Hospital
- Affiliated Health Centres where undergraduate training occurs

#### **Bahamas**

- The School of Clinical Medicine and Research, Nassau, Bahamas
- The Princess Margaret Hospital, Nassau, Bahamas

Students will be accepted from Barbados and other Caribbean countries. International students will also be accepted to the programme. The Barbados Government will support Barbadian nationals at all three campus sites, in the interest of regional integration, according to specific quotas.

#### **International Students**

Students may be accepted from non-contributing territories for the five-year MBBS programme as full fee paying students. Students from other medical schools may be accepted for electives of 4 to 10 weeks on application.

*Movement of students between campuses can take place at the end of Phase 1 (year 3), and courses or rotations can be taken at other campuses than that at which a student is registered.*

#### **Fees**

A fixed number of students are accepted from contributing territories based on a quota system. Fees for these students may be subsidized by their respective governments.

Students admitted outside the established quota and international students are required to pay the full fees.

## REGULATIONS FOR THE MBBS DEGREE

### PROGRAMME

#### 1. ENTRY REQUIREMENTS

##### Age Requirements

Applicants must be at least 18 years old on December 30 of the year of entry to the programme.

##### Admissions

- (a) Applicants must submit their applications to the Campus Registrar, The University of the West Indies, Cave Hill Campus by the end of the second week of January of each year. For procedures concerning applications and for further information candidates should write to the Assistant Registrar, Admissions.
- (b) Applicants required to withdraw from the Faculty for failing to complete the MBBS Degree Programme within the stipulated time or because of poor performance may be considered for readmission to the MBBS Degree Programme after at least one year has elapsed since their withdrawal.
- (c) Applicants for admission to this programme must satisfy both the *general matriculation requirements* of the University and the *specific requirements* of the Faculty of Medical Sciences for entry to the MBBS.

##### General Entry Requirements

*Note that entry to the MBBS Programme is highly competitive and being qualified is not a guarantee of acceptance.*

- Minimum of five (5) CSEC CXC subjects (general proficiency Grades I-III (from 1998)) and/or GCE 'O' Levels (grades A-C) including English Language and Mathematics, Biology, Chemistry and Physics
- Passes in two two-units of Biology/ Zoology, Chemistry and one other two-unit CAPE or A' Level subject.

The following scheme is now required for entry.

#### 2010 and beyond

Scheme	(CAPE)/GCE 'A' Level passes	Must include these subject(s) among the five(5) CXC /GCE 'O' Level passes required for matriculation
A	Chemistry, Biology/ Zoology and either Physics or Math.	
B	Biology/Zoology, Chemistry and a non-science subject	Physics

Applications to enter the MBBS will be also considered in the following categories:

##### Transfers from UWI

- Transfer applicants to the MBBS from the Faculties of Pure and Applied Sciences of the UWI may only be considered on completion of the First Year/ Phase 1 of the programme.

- All such applicants must complete and submit a Transfer Form (only) by the second Friday in January in the year of application.
- Qualification for entry will be based on performance in Chemistry, Biology and one other subject.

### **Applicants Holding UWI Science Degrees**

Persons holding UWI first degrees from the Faculties of Pure and Applied Sciences in the relevant subjects (see above) and with a minimum of lower second-class honours or a GPA of between 2.00 and 2.99 may be considered for entry.

### **Applicants holding Degrees from other Universities**

Persons holding degrees from Universities other than the UWI will also be considered provided that:

- The University which granted the degree is recognized by the UWI as competitive.
- Credits have been obtained in Biology / Zoology and Chemistry
- A minimum cumulative Grade Point Average of 3.0 or its equivalent has been obtained.

### **Associate Degrees**

Applicants holding a triple major Associate Degree, in the appropriate subjects, from an approved Community College, provided that a cumulative GPA of 3.5 or greater has been attained will be considered for entry to the MBBS programme.

### **Equivalent qualifications to the above**

Applications may also be considered from persons holding other qualifications which are deemed by the

Faculty to be equivalent to the categories above as determined from official transcripts.

## **2. NON- ACADEMIC CONSIDERATIONS**

2.1 All applicants are required to submit a short 250-300 word autobiographical summary outlining the reasons for their career choice. An applicant's chances of entry will be enhanced by documented and certified involvement in extracurricular activities in the years prior to his/her application.

2.2 Candidates must also produce evidence of their involvement in relevant extra-curricular/co-curricular activities, socially-oriented projects and voluntary community service in the year prior to their application.

In addition to academic ability, the Faculty is seeking rounded individuals with a range of abilities and interests. Such must be readily definable and subject to proof. They include, but are not limited to, leadership qualities, social awareness and excellence in sport, language or the arts.

2.3 All applicants are required to submit original documents with certified evidence of their abilities or involvement in such activities in support of their applications.

2.4 Documents must be signed and stamped by an appropriate person (school official, employer, supervisor, etc.) and, to be considered, must state both the duration of involvement in the activity and the level of involvement or achievement attained.



- 2.5 Any information in such submissions, if found to be falsified, will result in withdrawal of the offer of entry and may constitute grounds for dismissal.
- 2.6 In general, sustained involvement in one or two activities over time is favoured over recent activity in many areas.

### **Fitness to Practise**

Becoming a doctor means more than acquiring knowledge and skills. Medical students cannot complete the undergraduate curriculum without coming into close, and sometimes intimate, contact with members of the public who may be vulnerable or distressed. It is essential that you do nothing to diminish the trust which sick people and their relatives place in you. The award of a medical degree entitles you to be provisionally registered and to practise under supervision as a doctor. The award of a medical degree by the University thus confirms that you are fit to practise to the high standards laid down by the profession.

Universities have a duty to ensure that no member of the public is harmed as a consequence of participating in the training of their medical students and that your conduct as a medical student maintains the high standards of honesty and behaviour that the public has a right to expect from the medical profession.

### **3. REGISTRATION**

Registration for courses takes place during the first week of each semester of the academic year.

*The registration of a student is not complete until the appropriate tuition and other fees have been paid in respect of that student or arrangements acceptable to*

*the Campus Bursar have been made with respect to the payment of such fees.*

### **4. PROGRAMME OF STUDY**

- 4.1 The programme for the MBBS Degree lasts not less than ten (10) semesters: Phase I (3 years/6 semesters and Phase II (2 years/4 semesters).
- 4.2 Both phases consist of courses or clerkships in which are included lectures, conferences, seminars, tutorials, self study, the use of learning aids (including information technology), practicals and demonstrations, including clinical bedside teaching. Outlines of these are provided in the Student Handbook.
- 4.3 The candidate's progress in each course or clerkship is assessed on the basis of his or her performance in a combination of in-course assignments and projects, and written, practical, clinical and oral examinations, as outlined in the Student Handbook.
- 4.4 Phase I consists of an integrated series of courses spanning the first three years leading to a *comprehensive*, multidisciplinary examination. Successful candidates will be awarded the Bachelor of Medical Sciences Degree (BMedSci).
- 4.5 Phase II comprises the final two years and is made up of a series of clinical attachments followed by the final MBBS examination. The degree is awarded at pass level or with honours or distinction on the satisfactory completion of the programme.

## 5. EXEMPTIONS

- 5.1 A student who has completed a course and passed an examination from this or another recognised University in a subject which forms a part or the whole of an analogous subject in the MBBS Degree programme may apply to the Academic Board, through the Dean, for exemption. The Academic Board shall make a decision on the matter after considering the recommendation of the Faculty Board which shall take into account the syllabus, the nature and duration of the course, the person's grading in examinations in the course, the time which has elapsed since the course was completed and, in particular, whether it is analogous in whole or in part to that offered in this University.
- 5.2 The Faculty Board shall make one of the following recommendations to the Academic Board, indicating the reasons for such recommendation:
- that the application be rejected; or
  - that the person be exempted from a part or the whole of the subject; but be required to take a part of or the full examination; or
  - that the person be exempted both from the course and the examination.
- 5.3 Exemptions will not be granted to persons who have been asked to withdraw and/or re-admitted to the Faculty for whatever reason.
- 5.4 Persons entering the programme with a Bachelor of Basic Medical Sciences Degree from the UWI may be granted exemptions of a maximum of the first two years of the programme depending upon the time which has elapsed between the completion of that Degree and the date

of application to enter the MBBS Degree Programme.

- 5.5 Applications for exemptions will not normally be considered in respect of persons who obtained the Bachelor of Basic Medical Sciences Degree more than two years prior to the date of application to enter the programme.

## 6. EXAMINATIONS - GENERAL

- 6.1 Registration in both phases takes place during the first week of each semester of each academic year. Registration for examinations consists of registration for the appropriate course(s) for that phase.
- 6.2 A candidate must attempt at the same sitting all Sections of the Examinations for which he or she has been registered.
- 6.3 A candidate must attend all the written, practical, clinical and oral sections of the Examinations for which he or she has registered, and that are applicable in his or her case.
- 6.4 A candidate who fails to attend any written, practical, clinical or oral section of any Examination for which he or she has registered and that is applicable in his or her case shall be recorded as having failed the Examination.
- 6.5 A candidate who fails any section of the written, practical, clinical or oral Examinations on his or her first attempt shall be required to re-sit the Examination at the next available opportunity, unless otherwise decided by the Academic Board, Cave Hill, on the recommendation of the Board of Examiners and the Faculty Board.

- 6.6 A candidate who applies to re-sit an Examination must attempt all sections of the Examination at the same sitting.
- 6.7 A candidate who fails the Phase I or Phase II Examinations on his or her third attempt shall be required by the Academic Board, Cave Hill Campus, to withdraw from the MBBS Degree programme. However, should the candidate's performance be deemed unsatisfactory due to adverse conditions, the Academic Board, on the recommendation of the Faculty Board, may support another attempt and, if warranted, grant an extension of time in which the Examination is to be completed. In considering whether to recommend an extension of time, the Faculty Board shall take account of the requirement that the time between the completion of the course and the examination must not exceed nineteen months.
- 6.8 A candidate may be awarded a Pass with honours or distinction in Phase I or Phase II Examinations, depending on the standard that he or she has reached, and provided that it is his or her first attempt at the examination.

Letter Grade	Numeric Score	QPs
A+	>85	4.3
A	70-85	4.0
A-	67-69	3.7
B+	63-66	3.3
B	60-62	3.0
B-	57-59	2.7
C+	53-56	2.3
C	50-52	2.0
F	< 50	0.0

**Categories of Degree:**

Category of Degree	Description	Grade Average Point
Honours Degree with Distinction	Demonstrates an outstanding and comprehensive grasp of the knowledge, skills and competencies required.	3.7 and above
Honours Degree	Demonstrates an excellent grasp of the knowledge, skills and competencies required	3.3 – 3.6
Pass	Demonstrates a satisfactory grasp of the knowledge, skills and competencies required.	2.0 – 3.2

## 7 GRADING SCHEME

Grading Scheme for BMedSci degree.

***Effective from 2007/2008 academic year the grading scheme shown in Table below will apply to the BMedSci programme.***

## **8. UNSATISFACTORY PERFORMANCE**

- 8.1 In the MBBS Degree Programme, a candidate's performance is considered unsatisfactory if he or she displays poor academic attendance, performance, or unprofessional behaviour.
- 8.2 A candidate's academic performance is poor if he/she has failed any form of assessment, examination or on-going evaluation in any defined course, module, clerkship or learning unit which forms a part of the MBBS Degree Programme.
- 8.3 A candidate's behaviour is unprofessional if he/she displays inappropriate, unethical or unprofessional behaviour in his/her interpersonal contacts especially in relation to patients or their families, colleagues, or members of the University or Hospital staff.
- 8.4 Where unsatisfactory performance is serious or is, for any other reason, considered to be a cause for concern, the matter should be reported in writing to the Dean and copied to the candidate.
- 8.5 The candidate will be given an appointment to be interviewed by the Dean or the Dean's nominee who, (except where regulation 8.8 applies), will arrange for appropriate remedial action to assist the candidate, followed by re-evaluation.
- 8.6 A candidate who fails to attend the interview or to participate in the remedial measures or the re-evaluation may be barred by the Academic Board, on the recommendation of the Faculty Board, from continuing in the programme.
- 8.7 The Faculty Board shall consider a written report on the result of the remedial action and shall make a recommendation to the Academic Board as to whether or not the candidate may proceed to the next phase of the programme at that time.
- 8.8 Where poor academic performance is repetitive or where unprofessional misconduct is serious; the Dean shall convene a Committee to examine the case and to provide a report to the Faculty Board. The Committee shall include staff members from at least three different Departments. The candidate concerned shall be given an opportunity to be heard and may be accompanied by a member of the student body selected by the candidate.
- 8.9 The Faculty Board shall consider the report of the Committee and may make a determination that no further action is required or may submit the matter to the Academic Board for its decision, with a recommendation as to the measures to be taken.  
Such measures may include:
- the institution of further remedial measures (which may include professional counselling),
  - leave of absence for a period of up to one year ,
  - withdrawal from the MBBS programme.
- 8.10 The decision of the Academic Board or the Faculty Board, as the case may be, will be conveyed to the candidate in writing and the candidate will have the right to appeal the decision by application to the Board for Undergraduate Studies.

## 9. PHASE 1 COURSES

- 9.1 Phase I courses extend over the first three years leading to Phase I Examinations for the BMedSci Degree. It comprises a series of courses (as set out in the Student Handbook) which integrate the disciplines of Human Anatomy, Biochemistry and Physiology, Community Medicine, Pathology, Microbiology and Pharmacology and includes early exposure to patients and basic clinical skills.
- 9.2 Continuous assessment of a candidate's performance in courses throughout these three years normally contributes 40-60% of the final mark for Phase I (BMedSci).
- 9.3 In addition, the candidate is required to follow and complete the following University Foundation Courses:  
FOUN1001 English for Academic Purposes (3 credits)  
FOUN1301 Law, Governance, Economy and Society (3 credits)  
FOUN1101 Caribbean Civilisation (3 credits)
- 9.4 The candidate must complete the required Foundation Courses before commencing Phase II. Award of the BMedSci and MBBS degrees require satisfactory completion of the medical programme, including the requisite nine credits for the Foundation Courses.

## 10. PHASE I EXAMINATIONS (BMedSci)

- 10.1 With the exceptions noted in Section 5 (Exemption) all candidates will be required to pursue and complete the prescribed courses of study in a satisfactory manner for the award of the BMedSci.

- 10.2 Phase I end of course Examinations will be held at the completion of the respective courses with repeat examinations normally held within seven months.
- 10.3 A candidate who does not achieve a passing grade for a Phase I course after completion of the written examinations will normally be required to sit the repeat examination within seven months.
- 10.4 A candidate who fails a Phase I examination on his/her second attempt will be required to follow a prescribed remedial course of study and to sit the examination at the next available opportunity. No further attempt will be allowed unless the Academic Board otherwise decides under section 6.7.
- 10.5 Successful completion of the Phase I Examinations must be achieved within twelve months of completion of the Phase I courses of study. The Academic Board, on the recommendation of the Faculty Board, may require a candidate who fails to complete the Examinations within that time to withdraw from the programme, except in a case where the Academic Board, under section 6.7, has approved a fourth attempt at the Examinations and extended the period for completion of Phase I Examinations.
- 10.6 Candidates will be notified of the results of the Examinations as soon as possible, subject to ratification by the Board for Undergraduate Studies. Passes in Phase I (BMedSci) will be awarded at Pass or Honours with Distinction levels depending upon the overall standard attained in both continuous assessment and the final examinations.

10.7 Candidates must satisfy the examiners in the continuous assessment of the Phase I programme and pass all of the Phase I examinations in order to proceed to Phase II.

## 11. PHASE II COURSES

11.1 The requirement for entry to Phase II is the completion of Phase I by following the prescribed courses of study and by passing the examinations unless exemptions (Section 5) apply.

11.2 Phase II spans at least 24 months and includes courses of study/clerkships in the following subjects: Anaesthetics; Child Health; Community Health; Emergency Medicine; Internal Medicine (including Dermatology and Venereology); Microbiology; Obstetrics and Gynaecology; Pathology; Psychiatry; Radiology; and Surgery (including Ophthalmology, Emergency Medicine, Orthopaedics, and Otorhinolaryngology). There is also an elective period.

11.3 A candidate who has done any course of study/clerkship in an unsatisfactory manner will be required to repeat it before proceeding. Repetition of any part of the course may necessitate delay in completion of the Programme.

## 12. PHASE II EXAMINATIONS

12.1 The procedures for entering these examinations are the same as for the Phase I Examinations (see Section 10).

12.2 In order to be permitted to take the examination, candidates must have satisfactorily completed all required clerkships in Phase II.

12.3 The examination consists of both written and clinical/oral components.

12.4 The written component will consist of at least three written papers including questions from all disciplines taught in the programme and will normally contribute 50% towards the total mark for Phase II.

12.5 Clinical competence will be assessed by means of clinical examination(s) which will contribute 50% towards the Phase II final grade.

12.6 Candidates must pass the clinical component(s) of the examination in order to pass the overall examination.

12.7 Candidates who fail the clinical component and/or the overall examination will be required to resit within seven months those components which they have failed.

12.8 A candidate who fails a Phase II Examination will be required to follow a prescribed remedial course of study and to sit the examination at the next available opportunity. No further attempts will be allowed unless the Academic Board otherwise decides under Section 6.7.

12.9 The Academic Board, on the recommendation of the Faculty, may require a candidate who has not successfully completed the examination within a twelve-month period to withdraw for failure to progress. The foregoing provision shall not apply in a case where the Academic Board has allowed subsequent attempts at the examination under Section 6.7 and has extended the time for completion, in accordance with that section.

- 12.10 Candidates will be notified of the results of each part of the Phase II Examinations as soon as possible, subject to ratification by the Board for Undergraduate Studies.
- 12.11 The MBBS Degree will be awarded at Pass, Honours or Honours with Distinction, depending on the standard reached in examination and in the continuous assessment. At the discretion of the Examiners, candidates who are being considered for honours/distinctions or who have obtained borderline failing grades may be invited to attend an oral examination, after which a final grade will be awarded.
- 12.12 A candidate is eligible for the award of the MBBS Degree following satisfactory completion of the programme, and the University Foundation Courses.
- 12.13 A candidate becomes eligible for the award of MBBS (Honours) by attaining a pass at Honours level at the first attempt in the Phase I programme and a pass at Honours level in two subjects in Phase II.
- 12.14 A candidate becomes eligible for the award of MBBS (Honours with Distinction) by attaining a pass at the honours or distinction level in Phase I and a pass at Distinction level in two subjects in Phase II.
- 12.15 A candidate will not be awarded an Honours or Distinction degree unless he or she passes all of the Phase I and Phase II Examinations at the first attempt.

### **13. AWARD OF THE MBBS DEGREE**

- 13.1 After the Board for Undergraduate Studies has approved the pass list, the Degree of Bachelor of Medicine and Bachelor of Surgery shall be awarded to each successful candidate.
- 13.2 The class of BMed Sci degree shall be awarded as follows:
- Honours Degree with Distinction Weighted GPA of 3.7 and above
  - Honours Degree Weighted GPA of 3.3 -3.6
  - Pass

*Note that degrees at the level of Honours or Distinction will normally be awarded only to those students who have passed all required courses/clerkships at their first attempt.*

#### **Rules governing the adoption of the GPA System (The GPA System applies *ONLY* to Phase One courses).**

1. The Faculty at Mona implemented the GPA system with assignment of credits to courses commencing in the academic year 2006/07 with the intake of the class of 2011; at Cave Hill the system was implemented with the first class entering in 2008 (class of 2013).
2. The general conversion scheme adopted by the University for assigning quality points will be adopted and applied to define letter grades for all core courses in Phase 1 with the exception noted in (7.) below.
3. The award of the MBBS Degree requires that students complete (and pass) all specified core courses and clerkships except where an exemption has been granted (see regulations governing exemptions).

4. The lowest passing letter grade to be applied to courses is a C which will constitute a pass.
5. The cut point for awarding a C in any course or clerkship will be determined by a process of standard-setting using recognized and defensible methods and employing multiple examiners.
6. Students who fail to achieve a C will be assigned an F (0.0 quality points) which will be recorded permanently on their transcript.
7. The letter grades C-, D+ and D will not be used or assigned to students' results
8. Students assigned an F (fail) will be required to pass the failed course/clerkship at a subsequent attempt.
9. Students will normally be allowed a maximum of two further attempts at any failed course
10. Students unable to pass a failed course after a total of three attempts will normally be required to withdraw.
11. Whenever a course is passed following a failed first attempt, the maximum grade that can be assigned will be a C.
12. Although the F grade will remain on the student's record, the GPA for the student will be recalculated using the passing grade of C.

### **Phase I**

- Students in years 1 and 2 will be permitted to proceed into the subsequent year only if the credit value of failed courses in the preceding year does not exceed a total of 6 credits.
- Students who proceed into subsequent years carrying failed courses will be required to register for and sit them at the next available opportunity

### **Phase II**

- Students in Year 4 will be permitted to proceed into the 5th and final year only if the credit value of courses/clerkships failed does not exceed a total of 6 credits.
- Students who proceed into year 5 carrying failed courses/clerkships will be required to register for and sit them at the next available opportunity.
- Students must complete and pass all courses/ clerkships in Phase 2 and pass all parts of the final MBBS examination to be eligible for the award of the MBBS Degree



## Award of the MBBS Degree

The following categories of degree will be awarded on the basis of the cumulative grade point average over the duration of the Phase One programme.

Level or Category of Degree	Description
Honours Degree with Distinction	Demonstrates an outstanding and comprehensive grasp of the knowledge, skills and competencies required.
Honours Degree	Demonstrates an excellent grasp of the knowledge, skills and competencies required.
Pass	Demonstrates a satisfactory grasp of the knowledge, skills and competencies required.

*Note that degrees at the level of Honours or Distinction will normally be awarded only to those students who have passed all required courses/clerkships at their first attempt.*

## GLOSSARY TO THE REGULATIONS

### TERM DEFINITION

1. Discipline - A body of knowledge encapsulated in a set of courses distinguishable from other such bodies on the basis of criteria

such as method of enquiry, axioms, areas of application.

2. Subject - An area of study traditionally assigned to the purview of a department.
3. Course - A body of knowledge circumscribed by a syllabus to be imparted to students by sundry teaching methods and usually followed by an examination.
4. Faculty Courses - All courses except Foundation and Co-curricular courses.
5. In-Faculty Courses - All Faculty courses originating in the Medical Faculties.
6. Out-of-Faculty Courses - All Faculty courses originating in Faculties other than the Medical Faculties.
7. Foundation Courses - Broad-based courses, three of which must be taken, and which provide a general foundation of knowledge.
8. Programme - A selection of courses (designed to achieve pedagogical goals) the taking of which is governed by certain regulations and the satisfactory completion of which (determined by such regulations) makes a candidate eligible for the award of a degree/diploma/certificate.

9. Credit - A measure of the workload required of students. 1 Credit Hour = 1 hour lecture/tutorial/problem class per week OR 2 hour laboratory sessions per week, for a Semester.
10. Elective - A course within a programme taken by choice of the student.
11. Pre-requisite A course which must be passed before another course for which it is required may be pursued.
12. Semester GPA - Grade point average (GPA) computed on the basis of all courses done in a semester, without reference to weighting except in terms of credits. (The terms Grade Point, GPA, Quality Hours and Quality Points are defined in the UWI Grade Point Average Regulations Booklet).
13. Honours GPA - Weighted grade point average used to determine the class of degree.
14. Cumulative GPA - Grade point average obtained by dividing the total grade point earned by the total quality hours for which the student has registered for any period of time excluding courses taken on a Pass/Fail basis, audited courses, courses taken for Preliminary credit, incomplete and in-progress courses.

## UNIVERSITY FOUNDATION COURSES

Certain foundation courses are compulsory for all undergraduate students and must be completed before a degree is awarded. Each course is equivalent to 3 credits and the themes have been chosen to promote sensitivity to, and awareness of the distinctive features of Caribbean identity. They include:

- FOUN1001- English for Academic Purposes
- FOUN1101- Caribbean Civilization
- FOUN1301- Law, Governance, Economy and Society

The Medical Faculty recommends that students aim to complete these courses within the first two years of the curriculum and we have made provisions for them in the timetables during the first three semesters. Because it is a University regulation that these courses are completed satisfactorily before a University degree can be awarded, you are required to pass all of them before proceeding into the final two years of the programme.

### FOUN1001 ENGLISH FOR ACADEMIC PURPOSES (3 CREDITS)

This course is designed to: equip students with the study and research skills they will need in order to get the maximum benefit from all their courses at the University; to familiarize them with the linguistic situation in the Caribbean and break down certain misconceptions they usually have about it and to introduce students to the rhetorical modes of discourse.

### FOUN1101 CARIBBEAN CIVILIZATION (3 CREDITS)

This course is designed to develop an awareness of the main process of cultural development in Caribbean societies, highlighting the factors, the problematics and the creative output that have fed the emergence

Caribbean identities; to develop a perception of the Caribbean as wider than island nations or linguistic blocs; to stimulate students' interest in, and commitment to Caribbean civilization and to further their self-determination.

### **FOUN1301 LAW, GOVERNANCE, ECONOMY AND SOCIETY (3 CREDITS)**

This is a multi-disciplinary course of the Faculty of Social Sciences which is designed mainly for non-Social Sciences students. The course will introduce students to some of the major institutions in Caribbean society. It will expose them to both historical and contemporary aspects of Caribbean society, including Caribbean legal, political and economic systems. In addition, Caribbean culture and Caribbean social problems are discussed.

### **THE CORE MEDICAL CURRICULUM**

The curriculum includes structured time and unstructured time. Most of the structured time is spent completing essential courses covering the core content (that which all students must learn.)

During the first three years, a modular, system-based approach is used, with courses designed to encourage integration between the basic medical science subjects and the clinical (patient-centered) disciplines. 'Health' rather than 'disease' is emphasized but you will begin to meet people in their roles as patients from the first year.

A course entitled, "Man, Health and the Environment" is taught in four modules spanning the first three years and is followed in the fourth and fifth year by practical exposure to the delivery of health care to communities in urban and rural settings.

On successful completion of the courses in the first three years, you are required to sit an integrated

examination. If you are successful, you will be eligible for the award of a Bachelors Degree in Basic Medical Science (BMedSci) and will continue into the final two years of the MBBS programme, subject to the approval of the University authorities.

During the final two years, students rotate through the main clinical disciplines, with emphasis on general training rather than on specialist hospital practice.

### **Cross-disciplinary Themes**

Cross-disciplinary subject areas such as medical *ethics* and *nutrition* have been worked into the existing courses as themes or strands. These themes are part of the 'core curriculum' and are included in the assessment of students. In addition, a theme encompassing *personal and professional development* has been designed to ensure that the attitudinal components of learning considered as important for good medical practice are included in the overall educational process.

### **Study Options**

In addition to this core curriculum, the programme includes a number of options to allow you to undertake courses and activities in areas of special interest to you. These include *electives*.

### **Electives**

There are elective periods in the Phase II programme. During an elective, you have the opportunity to spend a supervised period of study in a specialty of your choice. This period of study is useful for exploring future career options. We encourage you to spend it at an institution outside of the UWI if at all possible and to consider including a component of research. It is wise to discuss your plans for your elective with your Academic Advisor by the fourth year or even earlier.

## **Structure of the Programme**

The undergraduate medical programme is divided into Phase 1 (Years 1-3) and Phase 2 (Years 4-5).

The first two years of the new programme are fully semester based while the first semester in year three has been extended using a portion of the summer vacation. This has been done to maintain the desired emphasis on clinical skills training which has been an important strength of the UWI medical tradition. This shortened summer vacation at the end of year two was always a feature of our medical curriculum.

### **PHASE I** **Years 1 and 2 Orientation**

In your first week, time is devoted to a Faculty orientation exercise intended to complement Freshman's Week activities and to sensitize you about what to expect in the restructured medical programme.

Time is allotted for you to meet with both teaching staff and senior students. You are also assigned to Academic Advisors and have an opportunity to attend sessions on study skills, time management and coping with stress.

The University has committed itself to providing facilities that take advantage of current trends in information technology and you will need to be comfortable with and competent in their use. Arrangements have been made to ensure that you are familiar with the use of computers in locating information and for communicating with your tutors and colleagues.

## **Phase I (Years 1-3)**

### **Aims**

- To enable students to understand the development of man and man's relationship to society and the environment
- To provide a fundamental knowledge of molecular and cellular biology, genetics and human nutrition
- To provide a thorough and integrated knowledge of the structure and functioning of the human body in health and disease
- To promote personal development and the skills required to obtain information from and communicate effectively with patients and colleagues
- To enable students to carry out a full clinical examination and perform a defined set of simple invasive techniques

### **Phase I Courses and Clerkships**

#### Year 1

MDSC1000	Fundamentals of Disease and Treatment
MDSC1103	Meiosis to Man – An Introduction to Embryology and Histology
MDSC1104	Introduction to Molecular Medicine
MDSC1105	The Locomotor System
MDSC1201	Cell Biology
MDSC1202	Introduction to Medical Practice (Unit 1)

* MDSC1203	Health Care Concepts
MDSC1205	The Respiratory System
MDSC1207	The Cardiovascular System
MDSC1206	Neuroscience in the Peripheral Nervous System

Year 2

MDSC2103	The Cardiovascular System
MDSC2104	Digestive System
* MDSC2105	Health and the Environment
MDSC2201	The Endocrine System and the Skin
MDSC2202	Introduction to Medical Practice (Unit 2)
MDSC2203	Neuroscience II – The Central Nervous System

MDSC2204	Renal/Urinary and Reproductive I
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Year 3

MDSC3101	Clinical Haematology
MDSC3102	Renal/Urinary & Reproductive II
MDSC3103	Human Nutrition
MDSC3104	Health Services Management
MDSC3200	Understanding Research
MDSC3201	Junior Medicine Clerkship
MDSC3202	Junior Surgery Clerkship
MDSC3303	Aspects of Family Medicine

**\* These courses will be rotated in Years 1 and 2, Semester 2.**

**COURSE DESCRIPTIONS**

**Please Note:** In order to provide ongoing improvement of course delivery and curriculum, all courses are subject to change.

**COURSE CODE: MDSC1000**

**TITLE: Fundamentals of Disease and Treatment**

**CREDITS: 6**

**SCHEDULE: Year 1, Semester 1/2**

The aim of this course is to provide a background for the better understanding of the system-based courses that follow it. The multidisciplinary approach used and much of the content is basic to an understanding of disease states and how drugs work and it serves as an important introduction to the integrated approach used in the delivery of the other courses in Phase 1.

The content provides a foundation for understanding important basic disease processes such as infection, inflammation, genetic disorders, tumor pathology and disorders of growth and assists students to appreciate how these affect the different organ systems when these are taught later in the programme. It also introduces the chemical structures and families of drugs commonly used in the treatment of patients and how these work to modulate disease processes.

**COURSE CODE: MDSC1103**

**TITLE: Meiosis to Man -Introduction to Embryology & Histology**

**CREDITS: 2**

**SCHEDULE Year 1, Semester 1**

The aim of this course is to introduce students to the principles of Molecular Biology and to show how these may be used to understand and treat human disease.

It builds on the fundamentals of the structure and functions of nucleic acids and proteins and serves as an important foundation for understanding advances in genetics and developments in modern medical research.

It covers medical aspects of genetics including population genetics. Molecular techniques used in diagnosis and treatment are presented and ethical implications surrounding the application of molecular biology to medicine are discussed.

“...the development and differentiation of cells, tissues and organs and the...” has been removed from the second paragraph, lines 1 & 2.

**COURSE CODE: MDSC1104**  
**TITLE: Introduction to Molecular Medicine**  
**CREDITS: 2**  
**SCHEDULE: Year 1, Semester 2**

The aim of this course is to introduce students to the principles of Molecular Biology and to show how they may be used to understand and treat human disease. It builds on the fundamentals of the structure and functions of nucleic acids and proteins and serves as an important foundation for understanding advances in genetics and developments in modern medical research.

It covers medical aspects of genetics including population genetics. Molecular techniques used in diagnosis and treatment are presented and ethical implications surrounding the application of molecular biology to medicine are discussed.

**COURSE CODE: MDSC1105**  
**TITLE: The Locomotor System**  
**CREDITS: 3**  
**SCHEDULE: Year 1, Semester 1**

The aim of this course is to provide the student with a thorough knowledge base of the functional anatomy of the upper and lower limbs and of the spinal column as these relate to each other in health and disease.

As the first in a series of systems-based courses it provides a comprehensive and integrated approach to learning the structure and function of the human body and introduces the anatomical terminology required to describe relationships of structure. Through the use of illustrative cases and relevant pathophysiology, it also helps students to appreciate the features, diagnosis and management of the common clinical conditions that affect muscles, bones and joints.

**COURSE CODE: MDSC1201**  
**TITLE: Cell Biology**  
**CREDITS: 3**  
**SCHEDULE: Year 1, Semester 1**

Cell biology (MDSC1201) covers the following objectives: 1) The structure and function of biological molecules; 2) The biochemical pathways of intermediary metabolism; 3) The functional significance of biochemical processes and their regulation in normal and aberrant states. The course is organized into 5 units:

Unit 1: Introduction to biological molecules  
This unit covers the structures and cellular roles of amino acids and proteins, enzyme structure and catalysis, enzyme kinetics and bioenergetics.

Unit 2: Structure and function of carbohydrates  
The major metabolic pathways of carbohydrate intermediary metabolism including inborn errors, vitamin deficiencies and their effects on carbohydrate structure and function.

Unit 3: Structure and function of lipids  
Lipid classes structure, biosynthesis and degradation, and clinically relevant correlations.

Unit 4: Structure and function of proteins  
The Metabolism of essential and non-essential amino acids, the urea cycle, heme metabolism, and other specialized products derived from amino acids. Emphasis is given to inborn errors of amino acid metabolism.

Unit 5: Integration of metabolism  
This unit focuses on the fast/feed cycle, hormonal regulation of metabolism and the associated organ-specific metabolic changes.

**COURSE CODE: MDSC1202**  
**TITLE: Introduction to Medical Practice – Unit 1**  
**CREDITS: 3 (Pass/Fail)**  
**SCHEDULE: Year 1, Semesters 1 and 2**

This is the first unit of a multi-faceted introductory course which spans the first two years of the programme and is designed to provide students with the foundation skills necessary for their later clinical and hospital-based clerkships.

Unit 1 aims to inculcate at an early stage the attitudes and behaviours appropriate to the practice of medicine. It emphasizes personal & professional development, an important theme running through the curriculum and encompasses communication skills, professional

conduct, including department, patient confidentiality and includes a parallel course in basic pre-hospital management of common medical emergencies.

**COURSE CODE: MDSC1203**  
**TITLE: Health Care Concepts**  
**CREDITS: 4**  
**SCHEDULE: Year 1 / Year 2, Semester 2**

This comprehensive course introduces students to basic issues related to health and illness and approaches to disease prevention. Relevant concepts are illustrated from an individual and lifecycle approach with an emphasis on sociological and psychological factors.

The course aims to create an awareness of the sociological factors influencing health and the provision of health care in the Caribbean and how personal attitudes and stereotyping may influence relationships with patients and coworkers.

By familiarizing students with the importance and levels of preventive measures it aims to foster an appreciation for health and illness issues from a sociological perspective.

It emphasizes the place of health education and health promotion in the practice of medicine and aims to create an awareness of the factors influencing approaches to the promotion and maintenance of health and wellbeing. The importance of health seeking and risk-taking behaviours and the physical, emotional and social stressors affecting the individual are explained.

It introduces the factors leading to normal physical, cognitive, social and emotional development in children and adolescents and emphasizes the importance of caring for the elderly with their special needs, health and disease patterns.

It aims to foster an understanding of the factors influencing human development, thinking and behaviour, to promote insight into personal attitudes and reactions and illustrate that psychiatric disorders may represent the culmination of a complex interaction of biological, psychological and social factors. The student is introduced to the principles of medical and research ethics and bioethics and is exposed to ethical dilemmas that arise in clinical encounters. Basic epidemiological principles and research methods are introduced.

**COURSE CODE: MDSC1205**

**TITLE: The Respiratory System**

**CREDITS: 3**

**SCHEDULE: Year 1, Semester2**

The main aim of this system-based course is to provide students with an understanding of the normal anatomy and physiology of the respiratory system and how it is affected by common disease conditions.

This course addresses the normal and the abnormal structure and function of the human respiratory system, the mechanics of breathing and factors influencing breathing. Gaseous exchange in the lungs in health a disease is covered as well as important drugs used in the treatment of common respiratory illnesses. Aspects of the investigation and care of patients with respiratory disease are introduced to reinforce basic knowledge of the normal state and to highlight the importance of this knowledge to medical practice.

**COURSE CODE: MDSC1206**

**TITLE: Neuroscience 1 – The Peripheral Nervous system**

**CREDITS: 3**

**SCHEUDLE: Year 1, Semester 2**

The main aim of this course is to explain the role of the peripheral nervous system in controlling visceral and skeletal muscle functions and how it can be modulated for therapeutic benefits to the patient. It is the first of two encounters with the Neurosciences in Phase I of the MBBS programme.

Neuroscience is concerned with the study of the human nervous system which consists of two major divisions, the central nervous system (CNS) and the peripheral nervous system (PNS).

In this course, the anatomical organization, functions and regulatory mechanisms of the peripheral nervous system are presented. The content provides the foundation for understanding the neural regulation of the functions of peripheral organs, glands and tissues that are dealt with in later courses.

**YEAR 2**

**COURSE CODE MDSC 2103**

**TITLE: The Cardiovascular System 1 & 2**

**CREDITS: 6**

**SCHEDULE: Year 2, Semester 1**

The aim of this course is to provide an overview of the normal and abnormal structure and function of the cardiovascular system. It covers the essential core of information that students are required to know about



the cardiovascular system in order to begin their hospital based clinical training.

The course is integrated, so that whilst the teaching of Anatomy, Physiology, Pharmacology, Pathology and Microbiology of the cardiovascular system is emphasized, there is also exposure to introductory clinical knowledge which permits an appreciation of the clinical relevance of the disciplines mentioned.

**COURSE CODE: MDSC2104**

**TITLE: The Digestive System**

**CREDITS: 6**

**SCHEDULE: Year 2, Semester 1**

This course aims to provide students with a fundamental understanding of the gastrointestinal tract and its importance in the processes of digestion, absorption and excretion as well as the role it plays in homeostasis.

It covers the gross anatomy, embryology, histology and functional aspects of the gastrointestinal tract and its accessory organs including morphological concepts related to the processes of mastication, deglutition, motility and secretions, digestion, absorption and defaecation. It provides students with an appreciation of the important pathophysiology of the digestive system and highlights the basic scientific knowledge behind the principles governing the management of common disorders.

**COURSE CODE: MDSC2105**

**TITLE: Health and the Environment**

**CREDITS: 3**

**SCHEDULE: Year 1 / Year 2, Semester 2**

Building on the material introduced in the Year 1 Health Care Concepts Course concerning wellness and disease prevention, this course aims to provide students with an overview of the interrelationship between man and his environment, and of the environment as a major determinant of health.

It introduces students to disaster management in the Caribbean, including both natural and technological disasters. Emphasis is placed on credible disasters, the role of the physician in the overall management of disasters generally and specifically in the hospital setting.

In addition, a spectrum of important viral, bacterial and parasitic infections is included with emphasis on sources, routes of transmission, prevention and control.

**COURSE CODE: MDSC2201**

**TITLE: The Endocrine System & Skin**

**CREDITS: 3**

**SCHEDULE: Year 2, Semester 1**

In both development and delivery, this course utilizes a multidisciplinary approach to the teaching of applied anatomy and physiology of the endocrine system and the skin. By combining clinical and pathological aspects, it provides relevance and a critical link between understanding the basic medical sciences in the normal state and applying this knowledge to diseases that affect patients.

The chemical structure, synthesis, mechanisms of action, and functions of hormones are illustrated along with the various regulatory mechanisms that affect their production. In addition, the content includes the structure and function of the skin and the medically important conditions affecting it.

**COURSE CODE: MDSC2202**

**TITLE: Introduction to Medical Practice – Unit 2**

**CREDITS: 3 (Pass/Fail)**

**SCHEDULE: Year 2, Semester 2**

The main aim of this course is to prepare students for the junior clerkships in Year 3 by training them in the art and practice of clinical history-taking, writing case histories and carrying out a simple physical examination.

During a four week, full-time block, students receive a series of lectures/demonstrations which are followed by opportunities to interact individually and in small groups under supervision with patients on the general medical, surgical and paediatric wards. Students are expected to apply the principles of communication learned in Unit 1 in taking histories and to present their cases orally, one-on-one to senior teaching staff.

Where performance, attendance and/or participation is considered unsatisfactory or unsafe, students may be required to attend remedial sessions before being permitted to commence the junior clerkships in year 3.

**COURSE CODE: MDSC2203**

**TITLE: The Central Nervous System**

**CREDITS: 9**

**SCHEDULE: Year 2, Semester 2**

The aim of this course is to equip students with comprehensive knowledge about the normal structure and functioning of the central nervous system and the important pathological conditions that affect it.

It takes an in-depth look at the structure and function of the central nervous system (the brain and spinal cord), and introduces students to important diseases affecting the central nervous system, the methods used in investigating patients, and the treatment modalities employed, including pharmacotherapy. Additionally, it covers important drugs acting on the central nervous system, the investigations used to aid clinical diagnosis and outlines the principles behind medical and surgical treatments of central nervous system disorders.

**YEAR 3**

**COURSE CODE: MDSC3101**

**TITLE: Clinical Haematology**

**CREDITS: 4**

**SCHEDULE: Year 3, Semester 1**

This course builds on the Fundamentals Course in Year 1 and reviews the normal structure and function of the haematological and lymphoreticular systems including the spleen, thymus and lymph nodes and provides an important basis for moving on to the applied pathology clerkship component in Year 4.

Important disorders of the blood and lymphoreticular system are introduced along with methods of diagnosis

and the principles of management. The causes and classification of common or important inflammatory and neoplastic conditions are highlighted and made relevant by means of illustrative cases.

**COURSE CODE: MDSC2204 and MDSC3102**

**TITLE: Renal / Urinary & Reproductive 1 and 2**

**CREDITS: 9**

**SCHEDULE: Year 2, Semester 2 / Year 3, Semester 1**

This course aims to provide students with sufficient knowledge of the macroscopic and microscopic structure of the genitourinary system to enable them to understand both normal human excretory and reproductive function and the effects of common clinical abnormalities on these systems.

Structurally, the course is delivered in two units over two semesters. The content required by students at the beginning of basic clinical skills training in the latter part Year 2 is covered first with the second unit delivered in the first semester of Year 3. It employs an integrated approach and provides a basis for students' understanding of the relevant anatomy of the excretory and reproductive systems and how these function in health and disease. By inclusion of relevant pathophysiology and case-based problems, it provides a foundation for appreciation of the features, diagnosis and management of common clinical conditions affecting these systems.

**COURSE CODE: MDSC3103**

**TITLE: Human Nutrition**

**CREDITS: 3**

**SCHEDULE: Year 3; Semester 1**

This course is designed to acquaint medical students with the basic and essential concepts of nutrition in medicine. It aims to explain the role of nutrition in determining patients' wellbeing, its interaction with their medical/ surgical conditions(s), and how to apply simple therapeutic principles to improve their nutritional state.

It does not seek to create clinical nutritionists, but rather to instill in students the idea that nutrition is a theme with which they need to be concerned in every aspect of health and disease in patients with whom they come into contact.

**COURSE CODE: MDSC3104**

**TITLE: Health Services Management**

**CREDITS: 3**

**SCHEDULE: Year 3, Semester 1**

This is a web-enhanced course designed to equip medical students with the basic skills, attitudes and competencies to be effective team members, leaders and managers. While integrating the theme of personal and professional development, it covers aspects of health services organization, management in the public and private sectors, with particular reference to management principles, policy formulation, planning and evaluation.

The management of resources of people, money and supplies, will include manpower planning,

utilization and retention, financing and health care, accounting and management in health. Leadership and communication skills will be emphasized. The knowledge and skills gained in this course are designed to benefit students as they later assume managerial roles at all levels in the health sector.

**COURSE CODE: MDSC3200**

**TITLE: Understanding Research**

**CREDITS: 3**

**SCHEDULE: Year 3, Semester 1**

Regardless of whether or not graduates become involved in health research, as practicing physicians, they will be faced with the difficulty of keeping up-to-date in their chosen field. In the face of a huge and expanding amount of new information, they will be required to locate current and reliable information from a variety of sources. The ability to interpret data and to separate what is reliable from what is not is a skill that they must acquire.

This course aims to introduce students to the role of research in the practice of medicine, to encourage the judicious use of research information and to kindle an interest in knowledge creation (research). Students are expected to develop an enquiring attitude to the acquisition and use of the available evidence to inform health care delivery. It includes an introduction to basic epidemiology, the use and interpretation of biostatistics and an exploration of the tools used in carrying out health-related research.

**COURSE CODE: MDSC3201**

**TITLE: Junior Medicine Clerkship**

**CREDITS: 9**

**SCHEDULE: Year 3, Semester 2**

This full-time clerkship is one of three junior rotations which represent the students' first clinical 'apprenticeship' with the healthcare team. It builds on the skills taught in the Introduction to Medical Practice course in years 1 and 2, and is the first opportunity for the student to be fully assigned to medical patients as part of a team. It is intended to reinforce previous teaching and to provide the practical experiences necessary to enhance the students' basic clinical knowledge.

The clerkship is conducted at the Queen Elizabeth Hospital. Students are assigned to patients admitted to their service and are given responsibility under supervision for aspects of their care. They keep written records, assist with day to day management and learn to interpret laboratory results. They attend ward rounds, participate in the discussion of management and spend time with the emergency duty team, participating in post call ward rounds where they are required to present cases they have clerked for admission.

**COURSE CODE: MDSC3202**

**TITLE: Junior Surgery Clerkship**

**CREDITS: 9**

**SCHEDULE: Year 3, Semester 2**

This full-time clerkship is designed to provide students with their first practical opportunity to participate in the care of surgical patients and to provide hands-on, supervised experience in history-taking and physical examination. Students are assigned in small groups to surgical firms at the Queen Elizabeth Hospital.

Bedside teaching takes place in the wards, in the out-patient clinics and in the Accident & Emergency Unit where students practice the regular keeping of accurate records. They are shown how to use the information obtained from the history and physical examination to arrive at a working diagnosis and how laboratory investigations are used for confirmation and to assist in managing patients.

They are taught how to perform and assist in simple surgical procedures including venipuncture and the suturing of simple wounds and, as they begin to assume limited clinical responsibility for the care of surgical patients, they participate increasingly in the day-to-day responsibilities of patient care under the supervision of resident and senior teaching staff.

**COURSE CODE: MDSC3203**

**TITLE: Aspects of Family Medicine**

**CREDITS: 9**

**SCHEDULE: Year 3, Semester 2**

This clerkship, using a mix of community, hospital and ambulatory care experiences, brings together three key disciplines (community health, psychiatry and child health), all of which are important to the practice of family medicine. This clerkship is delivered in two 4 week units – Community Health and Psychiatry in one block and Child Health in the other.

**Unit 1: Community Health and Psychiatry**

This unit provides students with an understanding of the major factors affecting the delivery of health care to patients in the primary care setting and helps them appreciate the role and function of the health team in delivery of community mental health services. They participate in a family study, observe ambulatory care in a polyclinic and visit the Family Court, and other

institutions in the community. These activities help integrate their interviewing skills, and apply health promotion principles to individuals, families and communities.

These activities are augmented with seminars on social issues in health, human sexuality, complementary medicine, doctor patient relationships, ethics, mental illness and family and familial factors in psychiatric epidemiology.

**Unit 2: Child Health**

In this Unit, students assume limited clinical responsibility for the care of children. They are assigned in small groups, to patients admitted to the pediatric services at the Queen Elizabeth Hospital and practice accurate medical record keeping.

Practical ‘bedside’ teaching takes place at the Queen Elizabeth Hospital and the Government’s polyclinics. Student performance is assessed by the Academic staff to whom students are assigned as they participate in the day to day responsibilities of patient care, under the supervisor of resident and senior teaching staff.

This provides the opportunity to practice history taking and physical examination techniques especially those more specific to children and to make clinical case presentations. Students are taught to use clinical data to arrive at a working or differential diagnosis and how laboratory investigations are used for confirmation and to assist in patient care.

**Years 4 and 5**

Students who successfully complete the three-year programme will commence the final two years of undergraduate training. These consist primarily of hospital based clerkships although rotations will include

at least one clerkship in a community setting and possibly an elective.

In year 4, you are exposed in small groups to a variety of specialty and sub-specialty disciplines in a series of short rotating clerkships. The emphasis is on special techniques of examination and modes of investigation. In support of this, students also spend some structured time in the laboratory disciplines under supervision of the Departments of Pathology and Microbiology.

The final year of training is designed to prepare you for your internship. A series of clerkships in five major disciplines provide you with experiences in the overall care and follow-up of patients with common and important conditions. You are expected to participate in all the activities of the clinical service to which you are attached and are supervised by the consultant and resident staff. Most of your learning takes place during informal bedside teaching. Clinical competence must be certified by each of your tutors as a pre-requisite for proceeding.

The final year concludes with the sitting of the written and practical/clinical components of the final MBBS (Phase 2) examination.

### ***A note on your internship***

At present, award of the MBBS Degree from the University of the West Indies entitles the graduate to provisional registration in the health services of some Caribbean countries. Provisional registration is a limited license to practice under supervision and lasts for 12 months and practice can only be undertaken in posts recognized for this purpose.

Satisfactory completion of the internship entitles you to full registration and a license to practice medicine

independently within the English speaking Caribbean or to pursue further graduate training.

The Diploma in Family Medicine is designed for those planning to go to primary care, and is expected to become a requirement for independent primary care practice.

Up until 2003, the General Medical Council (GMC) in the United Kingdom was the accrediting body for the University of the West Indies. In that year, a decision was made by the GMC that it would no longer act as the accreditation authority for the University of the West Indies. As a result, graduates of the UWI (and several other 'commonwealth' universities) are no longer entitled to automatic GMC registration.

In July 2004, The Caribbean Accreditation Authority for Education in Medicine (CAAM) and Other Health Professions was established by the Governments of the Region (CARICOM). With representatives of both the GMC and the Canadian Licensing Authority on its executive, replaces the GMC for the purpose of accreditation of medical programmes in the region, and is analogous to other national and regional accreditation authorities, e.g. the GMC and the Australian Board.

## **ASSESSMENT AND EXAMINATIONS**

### **An overview**

Assessment of students in the medical undergraduate programme takes the form of written, practical/clinical, and in some cases, oral examinations. Coursework, projects and other in-course assessments may contribute to overall course grades where appropriate and, in keeping with the multidisciplinary approach to teaching, your assessments will become more integrated and case-based as you proceed.

## **Years 1 and 2**

Students are required where appropriate to complete coursework, to write end-of-course assessments, and to sit examinations at the end of each year. Grades are calculated for each year using the results of all of these. In-course assessments contribute 40%-60% of the final grade.

You should attain a pass on your overall end-of-year assessments in order to proceed normally. Students who fail end-of-year assessments in the first two years may be required to undertake remedial programmes of study.

## **Year 3**

At the end of the third year, successful students are awarded the Bachelors Degree in the Medical Sciences.

Please note that failure in resit examinations will constitute 'failure to progress' and may require you to repeat the entire year, or withdraw from the programme.

## **Years 4 and 5**

In the final two years, students are assessed by a combination of on-going assessment and written and oral/clinical examinations at the end of each clerkship. These are designed to evaluate a range of professional skills including attitude to work and interpersonal skills.

In the final year, clinical competence is assessed formally in each of your five senior clerkships. Satisfactory competency must be certified by your supervisors in each of the senior clerkships in order for you to write

the final Phase 2 (MBBS) examination at the end of the fifth year.

Because this year is a preparation for internship and future practice, your supervisors will also be looking at how you approach your work, your enthusiasm, punctuality, commitment and use of initiative as well as your relationships with patients, students, teachers and other members of the health team. Although often difficult to quantify, demonstration of these characteristics in a caring manner is the hallmark of the medical profession. The society and your patients expect it and your medical school is committed to promoting it.

## **Electives**

You are not normally assigned grades for an elective but a report indicating satisfactory attendance and performance from your supervisor must be submitted along with your own written report. As a minimum, your report should outline the programme of study that was undertaken, your aims and how well these were achieved. In the case of research projects undertaken, your report should include the methods, data collected, results and a discussion. If the project was 'written up' or presented at a conference, this should be indicated. Elective reports may be considered in the determination of Honours and Distinctions.

## **Study Guides**

Each module has its own Learning Guide. These are produced to assist you in managing your learning. The Learning Guides tell you what you're going to be taught, why and how, and also list resources you can use to aid your learning. Most will contain examples of questions to help with your self-assessment and a list of names with contact information for lecturers

and Course Co-ordinators who can help you if you're having problems. Do not hesitate to do this if things go wrong.

Recommended texts are listed but are only suggestions from your tutors. If you find that you can work better with another book that isn't listed, check with colleagues and with the learning outcomes in the Learning Guide to ensure that you will still cover the required material.

### **Is there life after lectures?**

By now you must be wondering if getting into the MBBS programme was really a good idea. It's true that there are only so many hours in a week so how do you fit in all the teaching and self-study, and still have a life?

It all boils down to proper time management. This is a delicate area for all university students, and is probably more so for medical students with their heavier than average workload.

### **Managing your time effectively**

The key to effective time management is to determine what works best for you as an individual, and to accept that this may well differ from what works for others around you. It is important that you take responsibility for your own time management. Start working on it now. It is good training for life as a doctor.

The MBBS is undoubtedly stressful at some points, and it is essential that you learn to minimize your stress, and face what cannot be avoided. Ineffective management of time is one of the most common causes of stress, and is largely avoidable. Effective time management depends on organization and self discipline – both important ingredients of a physician's life.

One system of time management that you might consider is based on splitting each week of the semester into 21 sessions - mornings, afternoons and evenings. Of these 21 sessions, not more than 8 or 9 are usually occupied by timetabled activities, leaving you with 12 other potential slots. It is strongly suggested that you devote 6 of these to self-study, leaving the other 6 open to fit in time for scheduled recreation and other activities. Each session is about 3 or 4 hours long, and can be split into shorter periods for studying as suggested previously.

A system such as this can be a useful guide in the early days of the course but with time, you are likely to develop your own way of doing things. For example, if you know that the period just after lectures is an unproductive time for you, then plan something other than study for that time. If another system works for you, go with it, but remember to plan study sessions to take advantage of the advice we gave you about concentration and recall.

Set yourself deadlines, and stick to them. Don't spend lots of time planning and thinking about work - just do it! Even the short breaks in the daily timetable can and should be filled with discussion and other useful activities.

## **STUDY SKILLS**

Tips on getting the most out of the course

### **How to learn from lectures**

Unfortunately, there are limited opportunities for individual staff-student contact during lectures because in many cases a large amount of information has to be delivered in a relatively short time. We already know that even 50 minutes is a bit too long for us to maintain



concentration. It is easy to fall asleep, daydream, or simply copy down notes without engaging your brain. The important thing is to keep paying attention and not to switch off. But how can you make sure you get the most out of lectures?

The key is to actively engage yourself with the material being presented.

Before the lecture, find out the topic from the schedule. Write down everything you know about it and what you think the lecturer will be covering so that you can listen for the main points.

During the lecture, write down your own thoughts and ideas about the topic. Ask questions if you have an opportunity and try to answer for yourself any questions posed to others. Highlight anything you're unsure about to remind yourself to check it out later.

After the lecture, review your notes as soon as possible and try to highlight key points. Clarify misunderstandings and fill in gaps by comparing notes with a colleague. Write a summary if you have time and do the associated reading as soon as possible. **ACTIVELY RECALL** the content **BEFORE** reviewing your notes or reading further. This approach of "Active recall" is key to consolidating information, and is well worth the effort.

### **Making Notes**

Lecture notes are something you need to think about and create, not something you passively receive. The key to successful note-making is to develop a style that suits you. There is no 'correct' way, and most people find they need to be flexible and to adopt methods according to the situation and the material presented.

In general, writing single key words or phrases is more likely to trigger recall by allowing the brain to form links between ideas.

Transcribing lecture notes in a tidy form is a waste of your time. Instead, spend that time summarizing the main points.

But changing old habits is difficult. It takes time and perseverance but stick with it and it will pay off in the end.

### **Seminars and group work**

In your curriculum, you will spend a lot of your time working in groups.

These groups will vary in size, and are sometimes, but not always, led or facilitated usually in a problem oriented or case base small group session by a tutor. One of the objectives of medical training is to assist you to work effectively as a member of a team - a critical skill for your future in the profession.

There are many benefits to be derived from working in a group. Among other things, it helps you develop good communication skills and some of the 'higher order' thinking skills, such as reasoning and analyzing. It also promotes collective thinking and teaches you to value the views of others.

Group discussion can be stimulating and challenging, but a group session will only work if people are able and willing to contribute. Effective group work is most likely to occur when members are well prepared, share a common purpose and are willing to interact openly with one another.

People often feel inhibited about contributing to a group discussion because they feel that everyone else is smarter and more articulate than they are. However, the others are probably far less concerned about what you say than what they say because they are worrying about what you'll think of them. Remember it is a joint discussion.

Don't seat yourself outside the group - you need to be able to see everyone's face and to hear what they're saying. Be prepared to listen and if you don't understand what's going on, say so. The chances are that everyone else is thinking the same thing.

Being able to work well in groups is an important skill and it will help if you can gain an understanding of what makes them work effectively. Establishing a smaller study group of 2-4 is also of great value.

### **Labs and Practicals**

A lot of your timetabled teaching in the first two years will include practical and laboratory sessions. Although this is often more interesting than just 'beating the books', it can be difficult to be sure whether you are really learning what you need to know in the most effective manner.

In fact practicals and laboratory sessions involve 'learning by doing.' They should complement your reading and help you to understand and apply the theory. Try as much as possible to decide ahead of time what you need to get out of each session, and to know what you're doing and why.

A lot of your time will be spent in the Anatomy lab and much of the scheduled Anatomy teaching will be multi modal. To get the most out of these sessions you must be well prepared. It is not enough just to 'show up'.

You will need to do quite a lot of self-study to learn what you need to know, as the lectures are mainly introductory

Try to work systematically, from lecture notes or dissecting guides. By working in a group and asking your tutors and demonstrators to point out things or to clarify anything that is confusing, you should be able to cover your learning objectives, through the application of many modalities - models, cadaver demonstration, live anatomy, imaging methods, etc.

### **Studying on your own**

As a medical student in the new curriculum self-study will be an important part of your learning. To get the most out of this, you need to do some preparation. Decide how long you can devote to each study period, and what amount of material to cover. Set limits for yourself and break large areas down into several smaller ones that can be covered in your available time slots. Initially, browse through the written material rapidly getting a general feel for the topic. Always take a few minutes to note down what you already know about the subject and define specific learning goals or questions to be answered during the study session.

### **Getting the most from your reading**

A lot of time will be devoted to reading — books and articles and, increasingly, material from the Internet. To make sure your reading is efficient, you must know why you are reading a particular piece. Quickly skim through the paragraphs to decide whether it's really worth reading in depth. Make notes in your own words and jot down the source of new information for later use. Stick to what is relevant based on your purpose and the learning outcomes you have set for yourself.

## **Oral presentations**

There will be times during the curriculum when you will be called upon to make a formal oral presentation and in some cases, these will form a part of your assessment. Presentation skills are an important area of communication, and have assumed an increasingly significant place in the new curriculum.

### **Planning the presentation**

Be clear about your purpose, and how much time you will have. You should plan your presentation to include:

- A brief introduction of the topic (and yourself if relevant)
- An outline of the points you will cover
- The development of each of these points
- A summary and brief discussion
- Time for questions

In other words, tell your audience what you are going to tell them, tell them, then tell them what you told them!

Try not to include too many points – (maybe about 3 or 4 main headings.) The most common mistake is to overestimate how much material you can cover in the available time. Rehearse your talk with friends or colleagues, asking them to time you and to pay attention to your voice and speed of delivery. Remember that things often take longer in the formal setting and you do not want to have to rush your presentation.

### **Using notes**

Try not to read from notes. If you need a crutch for your memory, list your main points on index cards and

number the cards to avoid ‘getting lost’ in the middle of your presentation.

### **Visual aids**

Visual aids may help your audience to follow and retain information more easily but be careful because over-use of visuals can distract the audience from the content of your presentation. The key principle when designing visual aids is to keep them simple and uncluttered. A good rule is not to have more than 5 lines of text on each visual.

### **Speaking**

Try to make eye contact with your audience from time to time. This keeps you ‘with’ your audience and keeps your audience with you. Don’t stare down at your notes all the time. Instead try to make occasional ‘sweeps’ of the audience with your eyes.

Avoid jargon as far as possible. If technical language is required, define the terms you use.

Plan time for taking questions and try to anticipate what questions might be asked, so you can prepare your answers.

### **Examinations**

Although there will be more emphasis on continuing assessment in the new curriculum, than before, you will still be required to sit important university examinations at the end of the third and fifth years. These examinations are aimed at ensuring that your level of knowledge and your competency in the skills required for the practice of medicine are adequate.

Although the new examinations may contain questions about medical ethics and professional conduct, most of the important 'testing' of attitudes and behaviour takes place during your courses. Much of the detail about these will be provided to you later, but there is some general information about examinations in the Faculty that you should be aware of from now.

The Faculty carries out a meticulous process of marking aimed at ensuring fairness to all candidates. In addition to internal examiners approved and appointed by the University, all university examinations require the appointment of an external examiner from another university outside of the region. The purpose of this examiner is not only to ensure fairness to the candidates, but to provide an external review of the standards of teaching and the process of assessment in the Faculty. This examiner is involved in the setting and marking of written papers and may participate in the process of oral, practical or clinical examination of some candidates.

All written papers in University examinations in the Faculty are marked by more than one examiner (often two or three). Where there is disagreement, a more senior examiner from another campus may be asked to review the scripts. In addition, the external examiner reviews the papers of all students who, in the opinion of the internal examiners, have not achieved a satisfactory standard and also those who have attained honours or distinction grades.

In the same way, in your oral, practical and clinical examinations, you will always be examined by more than one internal examiner and the external examiner may also participate in your examination as an examiner or as an observer.

Here is some general advice to help you to cope with the pressure of examinations.

### **For all examinations**

- Arrive in good time
- Make sure you have all necessary equipment
- Read the question or listen to the instructions carefully and answer what is asked •  
In written exams, budget your time between questions
- Write legibly and grammatically
- Allow enough time to read through your answers
- If you feel yourself getting 'spaced out', take a minute's break to clear your head.
- Relax!

### **A note on oral examinations**

The word "viva" often produces feelings of panic in medical students but this really needn't be so. It is true that the 'viva voce' (oral) examination is sometimes used for borderline candidates to allow them another chance to avoid resits but it may also be used for candidates with high grades to decide on the award of Honours or Distinctions, although it is being used much less than in the past.

In some university oral examinations the candidate faces a panel of 2 or 3 examiners which may include an external examiner from another institution. Each examiner has a fixed time (usually between 5 and 10 minutes) to question you on a particular subject. If you appear to know the subject asked, examiners may quickly move to another area to test your breadth of knowledge. A buzzer sounds to indicate when 'time is up'.

Vivas are your chance to show what you know and improve on your existing grade. Believe it or not, the examiners want you to pass, and certainly aren't 'out to get you.' Use the viva where it is still a feature of an exam as an opportunity to prove yourself and what you know.

### Some advice about sitting orals

- Listen carefully, and wait until the examiner has finished before starting your answer.
- If you don't understand the question, say so. The examiner will usually re-word it, so that it will become clear.
- Pause for a moment before answering so that you can give your best response.
- If you realize you've made a mistake, say so and correct yourself.
- If you don't know, admit it and don't 'brimble.' If you decide to 'guess', begin by admitting that you're not sure. (A doctor who doesn't know something but admits it and does something about it, is still safer than one who guesses about things that affect their patients' lives!)
- Speak confidently: sounding confident is important in medicine - your patients need to have faith in you.
- Look confident: body language says something. Sit back, place your hands in your lap, and look the examiners in the eye!
- Relax! They haven't killed anyone yet.

### Coping with Stress

You will not be able to learn effectively if you are not functioning well physically and mentally. Although a little bit of circulating adrenaline can help you concentrate, getting stressed out will affect your performance. Try to

make sure that you allow yourself some free time each day. Some form of regular physical activity will aid your learning and make you more mentally alert. **THIS IS KEY – EXERCISE IMPROVES YOUR MENTAL FUNCTION, MAKES YOU FEEL BETTER AND LOOK BETTER, IMPROVES YOUR RESISTANCE TO INFECTION AND IS AN INVESTMENT FOR LIFE!**

At this stage, avoid working until the early hours of the morning. Getting a good night's sleep is crucial to keeping your mind functioning well. Trying to study when short of sleep is a total waste of time! Eating regularly is not always easy but aim for a balanced diet. Try to avoid stimulants and if you need a snack, go for healthy options.

Work steadily and avoid the last minute stress of cramming for examinations. This means planning your study and review in advance. Try to cover all the material at least once and avoid learning some things in depth while not covering others at all. Find out as much about the exam as possible, so you know what to expect and practice answering past papers. Think positive! Being accepted into medical school may be seen as a great privilege, but this is a tough course and there will be times when you wonder why you're here.

The workload, the stress and the uncertainty don't get any less with time. They are in some ways almost characteristic of a career in Medicine. What's important is that you learn from now how to manage the heavy workload, deal with stress, cope with uncertainty, and still achieve a balance between work and relaxation.

One of the biggest mistakes you can make is to think that you're the only one with difficulties, and that everyone else 'has it covered.' There are a hundred others in your year going through the same thing. It's

not until you really start talking honestly with people that you begin to realize that they're having problems too.

Just remember that it's OK not to be on top of the world all the time -that's normal, it's healthy. But it's not always fun. Yes, the workload's heavy; the hours are long and there are sacrifices but never forget that at the end of the day, this is a special programme, and it takes a special person to do it well.

### **When and where to go for help**

Although the Faculty does provide support systems which you can use, it is important that you keep an eye on your own welfare, and also that of your friends and colleagues. You are not a machine: you will have bad days and even bad weeks; things won't always work out, but whatever happens, your own physical and mental health should come first. Build your own peer support systems. Sometimes it helps just to have someone you can talk to a colleague or a mentor.

The important thing is to seek help as soon as you feel you might need it, and to let someone in the Faculty know as soon as possible. Do not wait until the situation is out of hand. You never know when you might need someone to speak for you, and mitigating circumstances are usually taken into account when 'borderline' grades are being reviewed.

### **Academic Advisors**

As you will learn during orientation week, the Faculty has assigned a member of the teaching staff to each of you to serve as your Academic Advisor or Mentor. Please ensure that you know who that person is and how they can be contacted. It is suggested that you make an appointment to see your academic advisor early on

in your course. You do not need to be experiencing a problem to make that first contact. Some Advisors will make early arrangements to see students assigned to them, either individually or in a small group but you need not wait for an invitation.

The system of Academic Advisors is meant to provide one route for offering personal support and does not exclude other systems of student counseling nor the possibility of students approaching other members of the teaching staff for advice and assistance.

The system is not perfect and your relationship with your advisor will only be as good as the effort you put into making it work. Your advisor is really your first port of call if you're looking for help or advice, or need to share a problem and it need not be on a strictly academic matter. Your advisor won't always be able to offer a solution but they should know where to send you and it's important that someone in the Faculty knows you by name, and knows early on if you're having any kind of personal or academic difficulty.

## **STUDENT RESPONSIBILITIES - HEALTH MATTERS**

### **Immunization**

In addition to the certificate of fitness that you were required to submit with your application, all medical students must have documented up-to-date immunization against common communicable diseases. These include tetanus, poliomyelitis, diphtheria, whooping cough, measles, mumps, German measles, Hepatitis B and tuberculosis. If you have never had chicken pox, you should also inquire about receiving a vaccination against chicken pox.

Arrangements for immunization can be made with the staff clinic at the Queen Elizabeth Hospital.

### **Medical certificates of illness**

We hope that you remain well throughout your programme of studies. However, if you do get ill, we recommend that you seek medical attention early. If you are ill for more than two days and if the illness causes you to miss classes, laboratory sessions or any other compulsory duties, you must submit a medical certificate as proof of illness from the University Health Service or general practitioner to the course supervisor or to a Head of Department under whom you are working at the time. Keep a photocopy of the certificate for your personal records.

If for any reason you are unable to go to a doctor at the University Health Service, another doctor may provide the necessary certificate, but that doctor must inform the Director of the University Health Service that s/he is doing so.

If you are ill during an examination or in the days immediately preceding an examination, you must submit a medical certificate as proof of illness either to the course supervisor or to a Head of Department under whom you are working at the time, preferably on or before the day of the examination. Keep a photocopy of the certificate for your own records. Failure to submit a medical certificate under these circumstances will mean that the illness will not be considered in assessing your performance in the examination.

### **Serious communicable diseases**

If you have any reason to believe that you have been exposed to a serious communicable disease you must

seek and follow professional advice without delay to find out whether you should undergo testing and, if so, which tests are appropriate.

If you know that you have a serious communicable disease you must immediately seek and follow confidential professional advice. The staff at the Health Service is available and suitably qualified to give confidential advice and assistance. Medical practitioners at the Queen Elizabeth Hospital and private practitioners outside of the University are also available to you.

It is important for you to know that:

- University regulations protect students and staff from discrimination on grounds of illness.
- You must not rely on your own assessment of the risks you pose to patients.
- If you have a serious communicable disease, for you to continue your studies and your practical work, you must have appropriate medical supervision.
- When you qualify and apply for a job, you must complete health questionnaires honestly and fully.

### **Identification Cards and Name Tags**

Each student must have a valid personal identification card in order to have access to the facilities of the University.

Nametags are normally issued through the Dean's Office and should be worn when attending classes and ward rounds and when carrying out official duties.

### **Dress Codes**

In our curriculum, you may be in contact with

patients from as early as the first year. The public has expectations of a doctor and, in these circumstances, you will be regarded as a member of the health care team. It is important therefore that you dress (and behave) at all times in a manner which will identify you as a member of the profession and allow patients to feel comfortable in your presence.

An official dress code, which includes the wearing of nametags and IDs, has been developed jointly by the Medical Students' Association (MSA) and the Faculty Administration. The details of this, which includes the wearing of a white shirt-jac or jacket on 'clinical' attachments, can be obtained from the Student Affairs Section of the Dean's Office or from the MSA executive.

You are required to adhere to this code. Whether attending lectures or visiting patients, you should always appear neat and tidy, wearing reasonably smart, appropriate and professional looking clothing. You absolutely must not look as if you are going to a party, night club or to hang out on holiday! Being a medical student should always be a matter of pride to you. You must look, at a glance, like a health professional!

### **Attendance**

Any candidate who has been absent from the University for a period of time during the teaching of a particular course for any reason other than illness or whose attendance at prescribed lectures, classes, practical classes, tutorials or clinical instructions is inadequate, may be debarred by Academic Board, on the recommendation of the Faculty Board, from taking any University examinations. Students falling below the noted percentages will be counseled, attendance noted in student files and recommendations may be made to Examinations for debarment from Examinations.

### **Preclinical Attendance Policy:**

Attendance 80% for each course (to include all course contact hours including lectures, labs, practicals, tutorials).

### **Clinical Attendance Policy:**

Attendance 80% for didactic lectures in each clinical rotation.

It is to your advantage to attend all lectures, laboratory sessions, ward rounds, field trips and other teaching/learning activities. In certain courses and clinical clerkships, it is mandatory for you to attend a fixed proportion of classes as a requirement for passing the course or the clerkship. Remember, lectures and tutorials are about addressing the important elements most relevant to our clinical scene, and often not found in the books, and clinical work on the wards, at the bedside and on call provide the REAL medicine that you MUST have to become a capable and safe doctor.

As Sir William Osler said "To study medicine without books is to sail an un-chartered sea, but to study medicine without patients is not to go to sea at all!"

It is very important that students who are doing remedial courses seek and follow all instructions concerning requirements for attending remedial sessions prior to the repeat examinations.

### **LABORATORY REGULATIONS**

1. Always wear a lab coat during the practical sessions; remove the lab coat if you leave the laboratory for any purpose.
2. No eating (includes chewing gum, mints, lozenges, sweets etc.), drinking or application of cosmetics in labs.
3. No open-toed footwear in the laboratory.
4. Ensure you know the locations of the nearest



- fire exit, fire extinguisher, eyewash stations, first aid boxes within the lab.
5. Always wear safety glasses for handling hazardous chemicals as instructed.
  6. Always wear disposable gloves for handling hazardous chemicals or if you have a cut (including paper cuts) or wound on your hand. Cover cuts/wounds with a plaster.
  7. Report immediately any spillage of chemicals or breakages to the person in charge.
  8. Do not put broken glass pipette tips or needles in the normal waste – use the SHARPS disposable bins provided; dispose of chemicals in a safe manner as instructed and place all waste materials in the appropriate assigned containers at the end of the lab sessions.
  9. Switch off all electrical equipment and gas burners when you are finished.
  10. In the case of a fire drill, switch off all electrical and Bunsen burners and exit in an orderly manner.
  11. USE OF CELL PHONES IN THE LABORATORY IS PROHIBITED.

## PROFESSIONAL ETIQUETTE

### General Deportment

Every student in the Faculty of Medical Sciences is expected to carry himself or herself with the dignity and integrity befitting the profession that you represent. This applies both within and outside of the Medical School and the Hospital or clinic environment.

### Confidentiality

In the course of your duties, patients will inevitably share personal information with you. Patients have a right to expect that you will not disclose any such information,

unless the patient gives you explicit permission to do so. Without assurances about confidentiality, patients may be reluctant to give medical students the information they need to understand how to provide good care. Moreover, the reputation of the health profession may be tarnished by un-confidential behaviour of any of its members. For these reasons:

- When you are privy to confidential information, you must make sure that the information is effectively protected against improper disclosure when it is stored, transmitted, received or otherwise disposed of;
- When a patient gives consent to disclosure of information about him or her, you must make sure that the person understands what will be disclosed, the reasons for the disclosure and the likely consequences;
- You must make sure that patients are informed whenever information about them is likely to be disclosed to others involved in their health care, and that they have the opportunity to withhold permission, where appropriate;
- You must respect requests by patients that information should not be disclosed to third parties, save in defined exceptional circumstances (for example, where the health or safety of others would otherwise be at serious risk);
- If you disclose confidential information you should release only as much information as is necessary for the purpose;
- If in doubt about the practice of confidentiality, do not hesitate to discuss the matter with one of your lecturers or with another professional person.

## **THE LIBRARIES**

There are two libraries available for medical students – the Main Library at the Cave Hill Campus, and the Medical Library at the Queen Elizabeth Hospital. The Main Library houses materials chiefly for Phase 1 students and the QEH Medical Library serves both clinical students and other health professionals, but there is some overlap in the stock of books and other materials.

### **QEH MEDICAL LIBRARY**

The Queen Elizabeth Hospital Library is situated next to the chapel and behind the medical students lounge. It is the respository of books and periodicals in the clinical disciplines, coordinates access to a large number of electronic journals, and serves the Faculty of Medical Sciences, the QEH staff and other health professionals of Barbados. Students can use this library on production of ID.

The Library opening hours are 8.30 a. m. – 6 p. m. Monday to Friday.

## APPENDIX I

### The MBBS Graduate

On satisfactory completion of the programme, MBBS graduates should have acquired a core of knowledge, competencies and behaviours which will enable them to:

#### Patient Care

- Apply relevant knowledge from the biomedical and behavioural sciences to the care of individuals, families and groups in community and hospital settings.
- Assess the health status of individuals and groups through observation and data collection from sources including
  - The medical history
    - Clinical examination
    - Laboratory findings
    - Make a clinical diagnosis
    - Prepare a plan of management including appropriate referral
    - Implement a plan of management including referral
    - Involve the patient and family in the care plan
    - Perform simple clinical procedures
    - Prepare clear and concise records, reports, letters of referral and other patient related documents.
    - Distinguish between urgent and non-urgent cases.
    - Demonstrate competence in the initial management of medical emergencies

### Community Awareness

- Plan, and/or engage in health promotion activities aimed at promoting healthy life styles in individuals and communities
- Empower individuals, families and communities to develop self reliance regarding their own health care
- Apply the principles of public health and an awareness of the social impact of illness to the practice of medicine in the community

### Communication & Collaboration

- Communicate effectively with patients, families, and other members of the health team.
- Collaborate with individuals and communities in identifying and achieving defined health goals.
- Function harmoniously and constructively as a member of a multi-disciplinary team within the health sector and between the health sector and other sectors of society.
- Participate willingly in the training of other health care workers.

### Health Services Management

- Participate in planning, organising, directing and evaluating health care
  - Engage in quality assurance initiatives
  - Participate in health care research

### Personal Development

- Demonstrate a sensitivity and respect for the

- rights of individuals and groups.
- Practice medicine within the ambit of professional medical ethics and the law.
- Keep abreast of social, medical and technological advances through participation in continuing medical education
- Critically appraise the published scientific literature
- Be accountable for his/her own actions in the care of patients

Full details of Higher degree programmes in this Faculty are available in the Graduate Information Guide for Medical Sciences, from the Faculty of Medical Sciences or the School for Graduate Studies and Research [www.cavehill.uwi.edu/gradstudies](http://www.cavehill.uwi.edu/gradstudies)

## **APPENDIX II**

### **GRADUATE DEGREES**

Higher degrees offered by the Faculty of Medical Sciences currently are:

MPhil /PhD Epidemiology

MPhil /PhD Medical Microbiology

MPhil /PhD Immunology

DM Anaesthesia & Intensive Care

DM Accident and Emergency Medicine

Diploma, MSC, DM Family Medicine

DM Internal Medicine

DM Obstetrics and Gynaecology

DM Ophthalmology

DM Paediatrics

DM Psychiatry

DM Surgery (General)

Diploma in Health Services Management

Master in Public Health





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