# Insider's Guide to the Top Medical Schools in the UK

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Foreword

(Will Kenyon)

The Insiders Guide is designed for Medical School applicants to work out which school is best for them. Written by current students, it answers questions under three main headings:

- Information on the Medical School
- Teaching and Exams
- Lifestyle and Expense

It is designed to allow applicants make an informed decision about what is best for them.

Going to the right medical school is a massive decision, potentially enabling you to start off on the road towards becoming the best doctor you can be. Therefore, it has got to be the right one for you.

Students highlight the advantages of their school – and everyone believes they are at the best school! – and also the potential pitfalls. Teaching methods employed at one institution may not suit your particular style of learning, for example.

I think that all the students who have helped put together this online guide will agree that the journey through medical school is a long and hard one. Becoming a doctor is massive achievement. Just getting to Medical School is a daunting task. No-one forgets the day when they got their offer letter. At the end of this guide is one student’s description of their journey into medicine. It highlights the determination required to succeed in this field.

Good luck!

Will Kenyon

September 2008
MEDICAL SCHOOL - INFORMATION OVERVIEW

Background:

The Cambridge medical course is traditional in that it comprises of 3 years pre-clinical study, and 3 years clinically. The first 3 years are heavily lecture based, and include one year’s mandatory intercalated BSC and then the last 3 years are spent in the hospital. It is very appealing if you are academical as research is actively encouraged. It is a very good course, taught by world-renowned scientists and doctors and life in Cambridge is great fun. The course is taught in the faculty, but you have supervisions (tutorials) in colleges, where you also live and associate with. The colleges are the main point of living and socialising and give you the opportunity to mix and make friends with people who don’t study medicine. This is a great advantage in contrast to other medical schools and very important to have a variety of friends for later on as you will be seeing doctors only for most of your life! If you would like to study in an intellectual, academic environment, with very well resourced libraries and facilities, and can work and party hard, but don’t mind little patient contact in the beginning, then apply!

What is the intake number of students to your medical school?

270 students, segregated into colleges. All except medical students except for Homerton and Hughes Hall. You have to apply to a college, the number of medical students they take varies from college to college.

Course length and the requirements of Intercalation.

6 years including intercalated BSC in the 3rd year (mandatory)

Faculty tutors – who are they, what they do and what value do they bring to the medical school.

Each college provides supervisors in the main subjects where you have supervisions once a week. Supervisions are the opportunity where you can go through the subject in detail and ask questions. They are very much in depth and academically challenging. They are
also what makes Cambridge (and Oxford) so unique. These are usually professors, research associates, post-doctorate students or PHD students. The subjects taught in the faculty are by various tutors, specialised in their fields. Because there are so many tutors and college supervisors differ, it is impossible to give names.

Principal teaching methods employed in subject delivery: advantages disadvantages.

Pre-clinical: As explained before, the lectures are taught in the faculty and then the college provides supervisions. There are also many practicals. The advantages are the opportunities to study the subjects in depth and you are much encouraged to pursue your academic interests further. The disadvantages are the intensity of the course and sometimes it can get very challenging. Also very little contact with patients then so you almost forget why you are studying medicine!

Clinical: Mostly clinical work with some lectures interdispersed throughout the year, including pathology lectures. Advantages are to see the patients which is nice and prepares you for your future job as a doctor and it is much easier to learn things when you have seen them in real life. You also have a weekly supervision with a clinical doctor who takes you to see patients and watches and critiques your examinations. This is an excellent learning opportunity. Disadvantages: Less structured so you are on your own to push yourself to work.

TEACHING AND EXAMS

Assessments taken in and the relative importance of each.

Preclinical exams: Written and practical exams for each subject at the end of the year. These determine whether you pass or fail and hence whether you can go to clinical school. They also determine your degree for the first 2 years. At the end of the year you get your BSc, so assessment depends on your subject. Some have exams, some dissertations and some research projects etc.
How difficult are exams in the preclinical years?

They are not easy but you have almost a whole term to revise for them. If you work you will pass them but you need to study very hard to get a first.

The number of students who fail each year in preclinical exams.

Probably less than 10 students per subject but you can re-sit them.

LIFESTYLE AND EXPENSE

Medic Social events.

There is a MedSoc garden party at the end of the year which is lovely. Each College’s MedSoc also organizes dinners and parties. But you can also socialise within your college with friends who study different subjects so there are a lot of opportunities to party!

Difficulty/ease of getting Halls and their good and bad features of each. Tips on how to get the Halls of your choice.

You have to be affiliated with a college in order to study in Cambridge therefore in the majority of the cases the first 3 years of accommodation are guaranteed. Each College has their own separate interview but you are likely to get at least 2 interviews- one academic, one normal so prepare accordingly. There are lots of guidelines, good books and other sources you can look at to help you get into Cambridge.

Common nights out – a guide to a good night on the town!

Major Clubs: Ballare (a.k.a. Cindies) which plays cheese and hugely popular, Soul Tree-R&B, Hip-Hop, also very popular, Fez- excellent for Hip Hop, DnB, R&B, also Indie, Life-all sorts, also LBG nights. Everyone goes to these clubs and they are really fun. Colleges have their own Ents and parties so the social scene is great- there are lots of things going on all the time.
Web link to relevant prospectus.

http://www.cam.ac.uk/admissions/undergraduate/courses/medicine/index.html

(also see the websites for different colleges)

**Freshers week unmissable, okay or definitely missable?**

You get 4 days as terms start on Thursday. Don’t miss it! It’s important to get all your admin work sorted and obviously to socialise and meet people and party!

**Average cost of living at your university campus per week**

Rent is around £80-100 per week, plus expenses. £150-200/ week approximately.

**Advice that you wish you had been told before applying to your medical school or advice you wish you had been given once you arrived at medical school.**

Don’t be put off by other people who appear super smart. Have confidence in yourself, take a deep breath and throw yourself into the life at uni. Make friends, go out, and study. Make the most of uni as time does go really fast! Good luck!
MEDICAL SCHOOL – INFORMATION OVERVIEW

Background

The medical school has 3 main campuses, i.e. Bloomsbury, Hampstead and Archway. The most notable new development in recent years is the new 16 storey high hospital on the Bloomsbury campus that combines healthcare facilities with clinical teaching and research.

What is the intake number of students to your medical school?

Around 340 people a year.

Course length and the requirements of Intercalation.

The medical course lasts 6 years for undergraduates and 5 years for postgraduates. Intercalation is required for undergraduates only, hence the extra year. Usually, students undertake their intercalation in year 3 or rarely in year 4, depending on the chosen intercalation.

Faculty tutors – who are they, what they do and what value do they bring to the medical school.

Dr Brenda Cross is the Faculty Tutor for the Life-Science and Medical Department and Sub-Dean for Student Support and Welfare. One of her roles is that of the Admissions
Tutor, thus having the final say on who is allowed to enter medical school at UCL. She also acts as a lecturer, teaching the pre-clinical years.

Dr Brenda Cross is of great value to both the medical school and especially students as she is the first port of call for admissions.

Principal teaching methods employed in subject delivery: advantages disadvantages.

Usually our professors deliver their lectures as power point presentations, explaining the fine details and answering questions. Depending on the subject taught, the lecturer may stick more or less to the presentation given, however making sure that the core knowledge is delivered. We also have CAL sessions, tutorials, PBL and full body cadaveric dissection.

The medical curriculum itself is divided up into separate modules that can logically be linked together after each module. In order to enable students to ask questions beyond the usual university hours, UCL medical school is equipped with an Internet forum where students can ask each other for help or chat to lecturers about their curricular difficulties.

Apart from the main lectures that are held in front of the entire year, there are also regular seminars for smaller group work, e.g. PDS (Professional Development Spine) sessions once a week in pre-clinical years, or tutorials. These small group sessions are especially important and helpful as they focus more on the individual student and his or her questions. Since there are around 340 students and there is a lot of pre-clinical knowledge to be learned, tutorials do not occur as often as many may wish they did.
PDS sessions however are very advantageous since they really prepare the student for real life encounters with patients. In a group of around 15 students, PDS sessions teach communication skills and how to interact best with all kinds of patients by either welcoming real patients into the sessions and interviewing them, or by means of case studies.

TEACHING AND EXAMS

Assessments taken in and the relative importance of each.

There are regular mock tests after every module that do not count towards the end of year exams and therefore do not affect the results. They just give the student an idea where he/she stands in relation to the rest of the year. However, the end of year exams are the important ones.

How difficult are exams in the preclinical years?

Since medical students at UCL need to maintain a high standard of scientific knowledge, the exams need to be of equal high standard to ensure premedical students are well prepared for the clinical years.

The number of students who fail each year in preclinical exams.

Around 15 people per year-

LIFESTYLE AND EXPENSE
Medic Social events.

Medics have their own Fresher’s Week, Christmas Ball, Summer Ball, Comedy Club, student bar, student union. There are RUMS teams for all types of sport, including rowing, football, badminton, hockey, tennis and many more. There are also social events hosted by the RAG charity organisation.

Difficulty/ease of getting Halls and their good and bad features of each. Tips on how to get the Halls of your choice.

As a first year student you’re guaranteed a place at a UCL Hall of Residence. These come in a wide variety, choosing between intercollegiate (living with students from other London universities such as Kings, LSE, RVC, etc), self catered and catered, shared or single. Catered ones means that you don’t have to worry about cooking and shopping for meals, but the quality of food varies! Self-catering is hard work and sometimes you will feel too tired to cook, but you learn a vital life skill in the process, and also it’s a great way of socialising with your other housemates. Some halls are huge with over 300 students, whilst some are small for only 66 students. You can’t specify on your accommodation form which Halls you want, but there are certain criteria (such as putting proximity or self-catered as most important to you) that will let the office know which types of accommodation you would prefer.

Common nights out – a guide to a good night on the town!

Studying in London means that the nightlife is endless, there is such a diverse range of
nightclubs and bars (including Ministry of Sound, Koko, Tiger Tiger) that it will be very hard to go to all of them! Drinks aren’t that expensive either; quite often there are student nights where you get discounted prices. But don’t be fooled into thinking clubbing is all there is to do in London in the evenings; there’s so much more. As a student, you get discounts on tickets to West End shows and musicals, concerts by the London Philharmonic Orchestra, political debates, museums, festivals and much more. One of the most difficult things about studying at UCL is that it’s so close to everything exciting about London – sometimes you will have to tape your feet to your room in order to restrain yourself from going out too much!

Web link to relevant prospectus.

http://www.ucl.ac.uk/medicalschool/prospective-students/prospectus/index.htm

Freshers week unmissable, okay or definitely missable?

Freshers’ Week is definitely unmissable. Firstly, you get the Fresher’s Fayre where you not only get lots of freebies and sign up with a medical defence union, but you also find out about the RUMS societies and can join up with them. The events are unmissable too – more than anything else, this is your chance to meet the people you will be studying with for the next 6 years. Most of my friends now I met during Fresher’s Week, and this is quite common. Since everyone will be new, you will find yourself repeating your name and where you come from about a million times. But the events for medics are designed so that you are actively encouraged to stay together and get to know each other (such as a party on a boat on the Thames so you can’t really wander off, a three-legged pub crawl,
scavenger hunt around London in teams of 10, etc). These events are incredibly fun, you meet so many new people and make new friends, and you’ll remember this week for the rest of your life. After the Fresher’s Week comes the traditional “Fresher’s Flu” where after drinking and partying solidly for a week you find yourself sporting the worst hangover in history, but it’s all worth it.

**Average cost of living at your university campus per week**

It would depend on your accommodation but accommodation and book costs aside, it usually averages to around £40-£60 a week.

**Advice that you wish you had been told before applying to your medical school or advice you wish you had been given once you arrived at medical school.**

- Interviews are there to see what you are like as a person so make sure you take the opportunity to shine.
- Don’t feel scared, most interviewers are really friendly!
- Try to relax, you’ll definitely perform a lot better if you do
- Read the health news and the paths taken after doctors graduate
- Talk to your fellow interviewees on the day
- Get someone else (preferably a doctor) to read over your personal statement
- Organise mock interviews
- Try to contact current medical students (online or otherwise) for information
- Prepare some answers to common questions, but don’t sound over rehearsed
- Practice arguing a lot with your teachers and friends
- Read in detail about the course at UCL
- Talk to as many people once you’ve arrived as you can
- Get to know your PDS group and the people you live with really well
- Smile a lot, don’t be nervous or shy, you’ll seem more approachable
- Join clubs and societies – you can’t study all the time! Plus it’s a great way of meeting new people
- It’s great and perfectly normal to be excited and happy about starting medical school, but remember to pay attention to your first couple of lectures! It’s so easy to not concentrate, only to find when it comes to exams you can remember nothing.
- Go out to events and parties – if you remain cooped up in your room it’s hard to get to know people.
- If you know friends from your old school who are also at UCL, go visit them! Another way of meeting new friends, especially non-medics.
Barts and The London Medical School of Medicine and Dentistry

(Ryan Lee)

MEDICAL SCHOOL - INFORMATION OVERVIEW

Background

Barts and the London school of medicine and dentistry was formed by the merger of St Bartholomew’s Hospital and London Hospital Medical college in 1995. Historically, St Bartholomew’s Hospital remains the oldest hospital in the UK. The London medical college, founded in 1785, remains the oldest medical school in the UK.

Barts remains a specialist UK centre for cardiac and cancer services, with Barts and the London NHS trust being voted as one of the top teaching hospital in the UK with one of the lowest mortality rates in the country.

Notable alumni of Barts and the London include:

- William Harvey, the first doctor to describe circulation,
- James Parkinson—the first to describe Parkinson’s disease
- Sir Robert Winston—politician and Obstetrician gynaecologist

The Barts test (triple test for Down’s syndrome) and administration of folic acid to prevent spinal bifida was implemented by the Wolfson institute, one of the research institutions within the medical school.

What is the intake number of students to your medical school?

An average yearly intake of 270 odd students.

Course length and the requirements of Intercalation. Principal teaching methods employed in subject delivery; advantages disadvantages

The medical curriculum is a 5 year long integrated-systems based approach involving 5 main themes, namely cardiorespiratory, metabolism, brain and behaviour, locomotor and human development. Students have the option of an optional Intercalated Bsc degree
which they take at the end of their 3rd or 4th year. There are 10 current Bsc degrees that the school offers to its students. Alternatively, around 10 students intercalate externally at other institutions and vice versa.

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Principal teaching methods employed in subject delivery; advantages disadvantages.

The existing curriculum is undergoing changes to make way for curriculum 08. Currently, students are taught in an integrated-systems based approach involving a mixture of problem-based learning (PBL) and lectures, tutorials to reinforce taught material in the lectures.

TEACHING AND EXAMS

Assessments taken in and the relative importance of each.

Continuous assessments are present throughout the year which counts towards a certain percentage before students are allowed to sit for the final year exams.

First year students take fundamentals of medicine paper (fumed), and 2 other combined assessments throughout the year before taking written exams for part 1 end of year exams. This compromises of 1 EMQ paper (extended-matching questions), 1 SAQ (short answer questions) and 1 OSCE paper (objective subjective clinical examinations).

2nd year students undergo 6 continuous assessments once every 5-6 weeks throughout the year, based on each system that they are taught. The written exams at the end of year part 2 exams have the same format as the 1st year exams.

3rd year students sit for an ethics and professional exam paper (PPD) before taking the written end of year part 3 exams which compromises 1 EMQ paper, 1 data interpretation paper and 1 OSCE paper.
4th year students have 3 continuous assessments which focus on themes such as human development, brain and behaviour and locomotor before sitting the end of year part 4 exams which has the same format as the 3rd year exams.

5th yr final year students have to complete a personal portfolio throughout the year and sit for their finals early in March, compared to other schools usually in May-June. Finals comprise an EMQ paper and an OSCE paper.

LIFESTYLE AND EXPENSE

Barts and the London is the friendliest medical school in the UK with an amazing social life at the whitechapel union on weekends. Fresher’s events last 2 whole weeks of sheer fun and pandemonium. Notable events include Toga tequila night, mile end pub crawl and the boat party! Extremely memorable for fresher’s to remember. Carpe diem!

Barts and the London is the top RAG (raise and give) medical school in London for the last few years. Our medical students go all out to raise funds for charity. Study hard, play harder!!

Medical students are housed at Dawon hall at Barbican , Floyer hall at Whitechapel, or Mile End village These hostels are all accessible by tube and bus 25. Cost of living in these halls range from £90-£120 per week on average. Alternatively, students can also rent a house together in east London from 70-130 pounds a week on average.

Web link to relevant prospectus.

Refer to www.smd.qmul.ac.uk for more pertinent information.
University of Dundee Medical School

(S Burgess)

MEDICAL SCHOOL – INFORMATION OVERVIEW

Background

Dundee University is renowned for the discovery of the p53 cancer gene by Professor Sir David Lane, FRS, and pioneering research into keyhole surgery by Sir Alfred Cuschieri. The University is recognised as a world leader in the field of diabetes research. Work at the University is being carried out on almost every aspect of the disease from the cell to the community. The £13 million Drug Discovery Unit at the university is involved in the development of new drugs to treat some of the world's most neglected tropical diseases, such as Chagas disease, African sleeping sickness and leishmaniasis. These diseases affect millions of the world's poorest people and attract little or no interest from pharmaceutical companies.

What is the intake number of students to your medical school?

The intake for 2007 was 179 students. This has increased in recent years due to a massive investment by the university and government in a campus upgrade project which has seen many of the lecture theatres refurbished and the halls of residence massively increased in size which all offer en-suite accommodation and the latest in student comforts boasting the fastest broadband connection of any university in Scotland which utilizes fibre optic technology.

Course length and the requirements of Intercalation.

The undergraduate MBchB course at Dundee takes 5 years from start to finish if you choose to study straight through. You are invited to take up a BSC in an allied subject if you so wish which will take you an extra year to complete and is embarked upon at the end of third year. This is however purely optional and is the majority opt not to do the extra year. The university also offers a pre-med year which focuses on the basic sciences and the preparation for the imminent medical course. This lasts one year and is

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traditionally offered to students who have excelled in subjects outside of the scientific world and yet find themselves chasing a career in medicine.

*Faculty tutors – who are they, what they do and what value do they bring to the medical school.*

Professor C Lang is a lecturer and tutor in cardiovascular medicine and is world renowned for his work into the development of Spironolactone which is a medicine used in the controlling of hypertension and is now a mainstream drug. He is a fantastic tutor who seeks to involve his students right from the off. He provides a clinical slant to all of his tutorials and ensures that the student sees the bigger picture behind the theory.

Shihab Khogali is one of the best cardiovascular lectures at the medical school and qualified in medicine and received doctoral and postdoctoral training (including Senior Research Fellowship and Lectureship positions) in Cardiac Physiology and Cardiology; followed by training in Medical Education. He led the Integrated Teaching Unit from 2003 to 2007; and is now bracing himself to take the lead for Physiology Teaching at Dundee Medical School. He is always approachable and is highly appreciated by the University.

The anatomists: Stella Mitchell and Angela McDonald are always there for the students and provide the hands on anatomy learning which is invaluable to a medical student’s education. Providing a well honed and excellent anatomy programme in the first semester of first year they introduce the students to their first cadaver and provide the support and expertise needed.

All of the clinical skills staff are working consultants, GP’s and nurses and provide an invaluable teaching environment for students allowing them to feed off their years of experience and ultimately communicate and empathise with patients in a much more effective manner.

*Principal teaching methods employed in subject delivery: advantages disadvantages.*

Dundee is a university which believes in early clinical experience and patient contact. Even during the first semester you are required to learn basic emergency care within your tutor groups at Ninewells hospital and medical school. Following the first semester all
lectures are held at Ninewells with regular clinical skills sessions every week with mock patients and focusing on effective doctor patient communication. Dundee also ensures that there is regular ward exposure for its medical students right from the off in first year. While I and many others believe that this is vital in order to produce confident doctors who know how to effectively function in a ward environment it has also been said that Dundee students sometimes miss out on some of the underlying basic science vital to understanding many of the principles taught in lectures.

TEACHING AND EXAMS

Assessments taken in and the relative importance of each.

The exams taken in the preclinical years are in the following format: multiple choice exams which providing the main method of written assessment, an OSCE given in the clinical skills teaching area within the hospital once a year, a short answer progress test which is the same for every year in the medical school and aims to give you a ranking in your year and a record of achievement viva which lasts about half an hour and gives you an opportunity to talk about the patients you see on the wards and your overall clinical experience.
How difficult are exams in the preclinical years?

The pass mark for the written exams is between 60 and 70 percent and is standard set. I found the exams to be fair but tough. Given the excellent tutoring and opportunity to revise the material I think that Dundee have struck a nice balance between asking hard enough questions to test even the most intelligent in the year and not making the exams impossible to pass. I would say I take between 4 and 5 weeks to prepare for the exams with less time spent revising for OSCE stations than written papers.

The number of students who fail each year in preclinical exams.

In my first year 33 students failed the first semester and 19 failed the second semester. This is typical for Dundee with perhaps 10 students re-sitting the year. In later years the numbers are comparable, the bottom line being as long as you do the work and study for the exams failure is not that common.

LIFESTYLE AND EXPENSE

Medic Social events.

The medical school puts on several balls each year with the biggest and best being the half way ball around Christmas time in third year. As medical students events are ran from first year by your cohorts which are all about raising money to give your year the best half way ball yet. It gives a real sense of camaraderie to the year and is excellent fun. With the usual Christmas, Easter, freshers and post exam madness to keep you entertained when not working hard for exams Dundee certainly offers that medical student experience we all desire.

The school runs a review once a year which is essentially a chance to get your own back on all those lecturers that you really thought were beyond wacky or just too boring for your taste. All years are invited and it draws quite a crowd of onlookers as anybody in the medical school can take to the stage one of the lecture theatres in the hospital (usually with a can of lager at hand) to destroy the fine reputations of our fine staff at Dundee.
The many different medical clubs and societies at Dundee are also there to join and offer a huge number of regular events both educational and downright ridiculous. The surgical society to name one has regular suture nights giving you a chance to hone your skills with a needle and thread with guest lecturers from some of the country’s finest surgeons.

Difficulty/ease of getting Halls and their good and bad features of each. Tips on how to get the Halls of your choice.

The halls at Dundee have just been refurbished and are some of the finest in Scotland with a large number being right in the heart of the main university campus. They are easy to get into too as a new student you have first pickings and as long as you get your room booked early you’re almost guaranteed a place. The halls offer mixed and single sex accommodation and are all ensuite, with brand new state of the art kitchens and offering spacious communal areas.
Common nights out – a guide to a good night on the town!

The big night out during the week is Wednesday. This is the afternoon we get off for sports and the clubs descend on the pubs after a hard evening of practice. The pubs in and around the University campus sponsor the clubs and they go to their respective retreats for free food and drink which is always sure to get the night off to a good start. Then it’s off to the clubs; the union is the main haunt with four levels of excellent night life to be had it is one of the biggest and best in Scotland. With constant drink offers, a huge pool hall, internet café, two night clubs, two bars, fast food outlet and even a swimming pool it never fails to deliver after a hard day at the hospital. If that doesn’t float your boat (excuse the pun) then the city itself can match any of the large cities in the UK for night life. The most common club is Fat Sam’s and is affiliated with the med school giving free entry before 11. The music varies here over the four floors to cater for every taste. The club also hosts live bands occasionally and cheap tickets are always available through the university. The weekends are always packed with fun things to do also and you’ll never be short of a drinking buddy at med school if the desire to get a little drunk becomes too overwhelming.

Freshers week unmissable, okay or definitely missable?

During fresher’s week the union has a big event every night for the whole 7 days. It sells fresher’s passes for around 40 pounds which entitles the holder to access for all the events for free with priority queuing. This may seem expensive but when you consider that every night normally involves a big radio 1 DJ, “nearly” free drinks and 10 pounds to get in on the door, the fresher’s pass is a must allowing you to get the most out of your first week at Dundee. Let’s not forget this is the time when you’ll meet many of your future friends and maybe even girlfriend/boyfriend so make the most of fresher’s week and you never know!

The medical school has several introductory lectures during the first week, with a formal welcome and hospital tour to get you out of your beds (or maybe not) you’ll not have too long to worry about feeling sick from the previous nights antics. Don’t worry though nothing is done in the morning and they know that you’ll be spending every evening trying
your hardest to ensure the union has to ring for emergency beer supplies by the end of the week.

**Average cost of living at your university campus per week**

The average cost of living in halls is around 4,000 pounds for the year and this includes all the cleaning, maintenance and bills. It is quite competitive with the surrounding accommodation but most people only live there for the first year and then move in with friends thereafter. The amount spent on food is entirely up to the individual and there is a university kitchen which provides regular cheap meals in exchange for pre-bought vouchers if you can’t or don’t want to cook. I would say the average weekly living cost including rent and food is around £200.

**Advice that you wish you had been told before applying to your medical school or advice you wish you had been given once you arrived at medical school.**

Advice: Going to university can be a daunting experience and a there are a lot of responsibilities which will be thrust in your direction on your arrival. On top of all the new information and upheaval you’re expected to forge new friendships and enjoy yourself. I would say the easiest way of meeting people at uni is to join some of the hundreds of clubs and societies on offer. If you’re not sporty then there are plenty of committees to be part of and if you make an effort here then the friendships work themselves out. I would also suggest living in halls for the first year too so you can meet all the other people in your position; it’s with your flat mates from halls that many people become lifelong friends.
Keele School of Medicine

MEDICAL SCHOOL - INFORMATION OVERVIEW

Background

Keele University was established in 1949. Keele medical school was founded in 2002, initially followed the Manchester curriculum, and on completing the course were awarded a degree from the University of Manchester. However in 2007 students starting a course independent of the University of Manchester, and when they graduate in 2012 will receive a degree from Keele University.

What is the intake number of students to your medical school?

147

Course length and the requirements of Intercalation.

It is a 5 year course with the option of a BSc.

Principal teaching methods employed in subject delivery; advantages disadvantages.

Keele is a PBL medical school. PBL has its advantages, namely the interaction in PBL sessions is a welcome break from lectures and can be quite fun. It also helps you to ensure you understand the knowledge well enough in order to be able to explain it to others. The principal drawback, however is that it is difficult to know the appropriate depth to go into. You will get better at being able to judge how much is necessary but it will never be clearly laid out for you. Lectures are a good guide for depth and PBL tutors are provided with tutor-notes also designed to ensure students cover the material appropriately and adequately.

Anatomy sessions and labs also provide welcome interaction with your fellow students and well as giving you the chance to gain a ‘hands-on’ understanding of the anatomy/physiology/pharmacology being studied.
TEACHING AND EXAMS

Assessments taken in and the relative importance of each.

We have Knowledge (MCQS, KFPS) and practical skills exams. Also there is a SSC (student selected component) which is essentially a written piece of work with a medical theme of particular interest to the student.

How difficult are exams in the preclinical years?

Pre clinical exams are inevitably difficult, and require a student to start revising around a month before the exams, and also stay up to date with the work during the semester.

LIFESTYLE AND EXPENSE

Medic Social events.

If you choose Keele you will soon realise that every social event is a medics social event. Nights out are flurry of hugs and hand-shakes. Essentially medics are like a big family. Events specifically put on by the med-school are always the best nights of the year, sometimes with dress-up themes. Other than nocturnal socialising, there are also sports clubs and charity tournaments put on by the committee. We also arrange annual sports days where medics compete against other courses in numerous sports to prove that we are not only intellectually superior but physically superior as well.

Difficulty/ease of getting Halls and their good and bad features of each. Tips on how to get the Halls of your choice.

As medics spend the first two years on the main Keele campus, they are guaranteed accommodation on campus for those 2 years. The best tip for getting good halls in your first year is to apply early. For the second year, it’s a bit more complicated. Third year students doing any course are also guaranteed accommodation on campus, as well as all first years, both of whom unfortunately get preferential treatment, which means that getting the en-suite halls is an absolute lottery. If, however, sharing toilet and shower facilities is
not a problem, group applications can be made, and friends can share adjacent rooms. For the most part, these applications are usually successful.

**Common nights out – a guide to a good night on the town!**

Monday nights are either spent at the union (cheese music) or at Liquid in Hanley, which plays dance music upstairs and urban music downstairs (take your NHS card, it will get you in free). Wednesday is indie night at the union and also the night the sports clubs choose to go out together, and Friday night is urban night at the union. Tuesdays and Thursdays are usually days that groups or societies plan 1 off nights out, so whichever night you decide to break through the barricade of books against your door and venture out, there is always somewhere to go.

[Web link to relevant prospectus.](http://www.keele.ac.uk/undergraduate/prospectus/2008/)

**Freshers week unmissable, okay or definitely missable?**

Freshers week is actually more like a fortnight, but you'll be a medic so after a few introductory lectures, you'll be right in at the deep end with your first case. That doesn't mean you won't get to experience being a fresher like everyone else, in fact there are a few med-school socials in that first couple of weeks too, just to get you introduced to the family. Which socials take place in that first couple of weeks is up to the committee, but there is always a pyjama bar crawl, and usually a night out with your new PBL group. Freshers is a taster of things to come, late nights, and early starts (while your non-medic drinking buddies try to sleep off a hang-over).

**Average cost of living at your university campus per week**

A room will cost between £60 and £80 including broadband internet, water, electricity, gas and such (it may sound silly but some university halls rent excludes certain amenities, such as water or electric). Home for me is London, so commuting wasn’t even an option (though I know those who have tried). From the surrounding cities (Birmingham, Leicester, Manchester, Derby) commuting is probably cheaper than living in Keele but ill-advised,
especially for a medical student. Traffic tends to be terrible and incredibly demanding on your time and energy. In short, unless you have to, don’t commute.

Advice that you wish you had been told before applying to your medical school or advice you wish you had been given once you arrived at medical school.

Medicine will take up most of your life! If you let it, it will take over all of your life. Try and do things outside of medicine, with people other than medics, it may be hard to find the time, but make the effort; you’ll appreciate it further down the line.

Medicine is hard! Hard for everyone! Regardless of your A-level grades or what degree you did, expect it to be hard. Saying that, it’s not impossible, and the lecturers are there to help, so make the most of the experience and make the most of their help, and advice, pay special attention to the advice they give, they write the papers after all.
Leeds University School of Medicine

(Ben Wetherell)

MEDICAL SCHOOL – INFORMATION OVERVIEW

Background

Leeds Medical School is well known for its excellence. Leeds is also associated with the origins of occupational medicine in Britain and the inventor of the clinical thermometer. Other attributes associated with the medical school include major advances in surgery and the first kidney dialysis in Britain outside London. Probably most importantly for you however, the staff and graduates at Leeds have been pioneers in general practice and accident and emergency medicine for many years.

What is the intake number of students to your medical school?

Leeds is one of the largest and most long-established centres for clinical teaching in the country. The School of Medicine has a rapidly developing curriculum and is linked to the city’s two large teaching hospitals. With the intake number of students to Leeds Medical School being 223 per year (including international students), it is also one with a great social network.

Course length and the requirements of Intercalation.

The duration of the course is five years, but six with an intercalated degree. The intercalated degree is not compulsory and numbers vary yearly, but often around 40-50% of the cohort between years 3 and 4 (i.e. between phases I and II of the course) apply to do a BSc. The options vary from anatomy to ethics. The advantages of doing a BSc may include: professional development, increased depth in a subject area, research, or, like me, personal interest. On the downside it does require an extra year on top of an already long degree. Also, it is argued that you may you miss your cohort of students. However, with such a large percentage of the year doing a BSc, this is less of an issue. The medical profession is highly competitive and the addition of a BSc/BA to your curriculum vitae will greatly enhance your prospects in your future medical career.
Faculty tutors – who are they, what they do and what value do they bring to the medical school.

In terms of support on the course, there are a variety of tutors available. Each student is assigned a Personal Tutor whom they share with students of the years above. Personal Tutors are assigned to you at the beginning of the course; they are all NHS doctors in the local area. They are there for advice and occasionally free food. The advantage of having students in the years above (and below) with the same tutor is that they can also offer you help and advice. The scheme is a way of helping newer students understand how the course progresses from the more senior students in the group, and most importantly what it means to be a doctor. Students nearer graduation may use their tutors as sources of advice about careers and jobs, CV writing or even as a reference.

Other tutors are more like teachers and you often have more formal contact with them. They often take the small groups involved with work sessions, anatomy, and other areas of the course. They are a good source of information and are easy to contact. You will have a lot of contact with these tutors. They are specialists for particular subject areas, and as a result the tutors change as the year progresses. As well as this, lecturers are also a good source of information and are easily contactable, either by e-mail or in person after the lecture or in the medical school. Leeds, like some other medical schools, uses the MUMs system which involves setting up families within the medical school. In essence a pair of students in the year above will be your parents and you will be paired with others in your year who become your brothers and sisters. Of course this leads to great support and great social nights (but also in-breeding). Having students in the year above can be great for many reasons and tutoring may be one, as well as advice etc.

**Principal teaching methods employed in subject delivery; advantages disadvantages.**

Leeds uses an integrated style of teaching. As a preclinical student I am timetabled for roughly 35-40 hours of contact time (including time for my Student Selected Components) with supposedly another 10-20 hours of self-directed learning each week. Self-directed learning can include essays, work sessions, preparation for anatomy, working on lectures and community visits. Emphasis is put on self-directed learning. A variety of teaching methods are used. Clinical teaching is primarily in small groups at the bedside and in out-
patient clinics. As you progress, you will become less of a student and more of a doctor. After first term you start anatomy using full body cadavers and prosections as well the more clinical side of x-rays and others forms of medical imaging.

The course is divided into three key phases:
Phase I - Preparing for clinical practice (years 1 - 3).
Phase II - Clinical Practice in context (year 4).
Phase III - Becoming a doctor - enhancing professional competence (year 5).
Throughout the course students also choose a range of topics outside the core curriculum, and these are known as Student Selected Components. Three major themes run throughout the course: communication with patients and other professionals; medicine in the community; ethics and law. Information technology, handling and management are concentrated in the first three years.

TEACHING AND EXAMS

Assessments taken in and the relative importance of each.

Each assessment is designed to match the learning objectives of the unit and to test your understanding and skills. During each year, some assessments are formative (feedback on how you are doing), while others are summative (which count towards your final degree). A range of assessments is used, these include:

- Multiple choice question papers
- Extended matching question papers
- Essays
- Presentations and posters
- Observed and video interviews
- Use of a log book and reflective portfolio
Assessment of practical skills, in the form of an Objective Structured Clinical Examination (OSCE)

A practical skills portfolio

SSCs (Student Selected Components) where you will be assessed on your approach to the project and the skills you develop as well as the final piece of work

At the end of each term there is an exam to test the core material, which is either multiple choice or short answer questions. (Anatomy is also tested at the end of the term when studied, and uses short answer questions). At the end of the year there is a re-cap of everything in the form of an integrated examination which uses a series of multiple choice exams (MCQ’s and EMQ’s). Smaller units are tested thought the year, with some larger topics tested in the end of year integrated exam.

_How difficult are exams in the preclinical years?

The exams are difficult, especially the first few because you have very little idea of what sort of grades you should be looking at or how much work should be done. After a few exams you begin to know where to aim. My advice would be to talk to second years and your tutors when you first arrive to get some advice from them. In this respect the MUMs system is really good for finding out about how much work should be done.

For all the end of term exams I would spend 2-3 weeks revising for them (baring in mind you are still having lectures up until a day or so before the exam), while the end of year exam took a bit more time. Other exams (dare I say it, “Personal and Professional Development”) required much less revision and occasionally none. If you are to be successful you need to make sure you work hard throughout the term to ensure that when you start revision you are fully prepared, i.e. all the work sessions up to date and completed, essays well underway etc.
Be warned…you will find some people never stop working; don’t fall into that trap. Medical school is great fun providing you use your time wisely, so remember it is important to keep a balance.

*The number of students who fail each year in preclinical exams.*

Failing exams is a taboo subject really as none of us like to be in the minority that fail, especially since most the people that get into medical school are not accustomed to failure. However, although at Leeds between 5-10 percent fail each exam, there is an option to re-sit the exams in the summer. To be honest, the exams, however daunting they may seem are not too bad providing you work all the way through the term – leaving everything to last minute is not wise as there is just too much to prepare. Despite gossip, there is not a set number of people who pass or fail each exam, it is based on a standard; therefore theoretically everyone could pass the exam (or fail).

**LIFESTYLE AND EXPENSE**

*Medic Social events.*

The medical school is well known for its social events and so it should be! The medic social events appear to be the biggest and most extravagant in the university, partly due to the work of the medical society, aka MedSoc, which organises many nights out throughout the year, and especially at the beginning of the year and after exams, when everyone is up for some fun. Generally the medics are very sociable anyway, and as a result there are many smaller events running continuously throughout the year, but don’t worry its not all about getting drunk.

I can’t stress how many other societies there are that are part of the medical school, for example, a very popular society is Cutting Edge for those interested in surgery. This society has a very practical side as well as organising lectures from pioneers in surgical development. There are many social events for the sporty individuals, medics and dentists have grouped together to form football, rugby, hockey and netball teams as well as many more. For those who are competing at a high level there is also the university teams to
keep you entertained. Also at the other end, if you want to start a new sport there are many to chose from, and you wont be alone. There are masses of information about this during freshers week. As part of these team events there are always plenty of social events mixed in, with regular tours also available. These social events are great at keeping you sane on such a demanding course.

MSRC (medical student's representative council) is highly active, which is a student body whose aim is to look after you throughout your time at medical school. They organise the personal tutors and MUMs schemes. They also fund the sports teams and the student run Medical School magazine.

**Difficulty/ease of getting Halls and their good and bad features of each. Tips on how to get the Halls of your choice.**

Leeds University say they can guarantee to offer you a place in their accommodation for the year if you are:

- a first year undergraduate
- an international undergraduate (i.e. you pay fees at the international rate). You are guaranteed a place in accommodation until you finish your course, provided you apply by the stated deadlines (usually March).
- an undergraduate exchange student
- an international postgraduate student (i.e. you pay fees at the international rate) and you are new to Leeds

For me and my friends there was no problem getting into halls. I got into my first choice as did many of my friends, and others got placed in similar halls Every student fills in a form informing the university of what they want from their halls when they apply, and so most were well suited to the halls in which they were placed.
Halls are a great way of meeting people especially since most people at university are away from their friends. Halls offer a large group of people with which you are able to socialise with even before you meet people on your course. However, as much as the university tries to match people, there are clashes with certain people. Mostly halls are big enough to meet like minded people, however the fact is that you don’t know who you may be living with and so that can be a little nerve racking.

**University accommodation costs 2008/09**

<table>
<thead>
<tr>
<th>Type of accommodation</th>
<th>Rent per academic year</th>
<th>Rent per week</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cheapest</td>
<td>Most expensive</td>
<td>Cheapest</td>
</tr>
<tr>
<td>Self-catering</td>
<td>£2 646</td>
<td>£63</td>
</tr>
<tr>
<td>Catered</td>
<td>£3 510</td>
<td>£90</td>
</tr>
</tbody>
</table>

The deposit for University accommodation is £200. Most contracts are for 42 weeks, though catered accommodation is for 39 weeks.

The rent in University accommodation includes utilities (gas, water and electricity).

As a result some people chose to rent a house with friends, but this is much less common in the first year and few nice houses are left by the time you find out whether you have got the grades for medical school. Also you miss the social side of halls, which is huge, especially during the first few weeks. Many halls have sports teams as well as some with regular formal dinners or balls, and as a result a great socialising network.

**Private rented accommodations costs for 2008/2009**

<table>
<thead>
<tr>
<th>Type of Accommodation</th>
<th>Rent per Year</th>
<th>Rent per Week</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shared House</td>
<td>£3151.20</td>
<td>£60.60</td>
</tr>
</tbody>
</table>

Deposits in private accommodation vary from around £200 - £400 and are often one months rent. Contracts are usually for 12 months, running from 1 July to 30 June.

Utilities (gas, water and electricity) are not usually included in the rent in private accommodation.
I would definitely suggest looking around the halls before you apply, and try to speak to people who have stayed there previously to see what they think about them. Usually there are facebook groups for halls and so you can read up on some of the comments there. However, it is worth mentioning just to warn you that its quite common to apply for something specific for some halls e.g. en-suite and then not to get it (but most of the new halls contain all en-suite rooms). As with all universities, there is catered and self-catered accommodation, and some accommodation includes both.

Even if you get into halls that are quite a trek from the university, don’t worry. Leeds has an excellent public transport system, with buses running from the city centre until 3am. There are also cycle routes along the main roads, and cycle storage facilities at most residences and in the university.

For more on accommodation you can visit the following website: http://www.leeds.ac.uk/accommodation/prospective_students.html

*Common nights out – a guide to a good night on the town!*

When looking around at different medical courses, it is very easy to forget about the city itself. Leeds is a great city and the night life is amazing, both on campus and in town itself. Nearby is Headingly (which is where most the students live), this renowned for great pubs with loads going on (usually nightly). Often you'll see people in their fancy dress crawling down the street, on what is well known as the Otley run, which incorporates 15 or so pubs (depending on who you talk to). T-shirts are available and certain drinks at certain pubs compulsory.

The Union is also very good for nights out with gigs from top bands playing in the refectory regularly. Also there are several pubs and night clubs in the Union itself, with different themed nights throughout the week.
As you may have heard Leeds city itself is brilliant for a night out, meeting all tastes from swanky bars along the river, to night clubs scattered all over the city. During the week there is usually a special student night somewhere.

Entrance is usually about £5 in the larger night clubs and on student nights you can easily find beers for a “pound a pint”, or double vodka redbulls for about £1.50, so student nights tend to be very cheap. Even on non-student nights drinks are still reasonable. At the Union prices are very reasonable. Many places tempt you in with free drinks and when you go out with the medical society sometimes there is already money behind the bar – sometimes up to 10,000 pounds. The bus system runs until about 3 in the morning and there are always plenty of taxis available.

With pubs along the Otley Road called things like the Library, it means that if your parents ring when your out then you can feel comfortable being completely honest about where you are. My parents couldn’t believe how much time I was spending at the “Library”!

Web link to relevant prospectus.

http://www.leeds.ac.uk/students/order_prospectus.htm

Freshers week unmissable, okay or definitely missable?

- Introductions to societies
- Opportunity to sign up for clubs
- Lots of socialising with people on your course and halls
- Many activities, including lots of free pens, condoms and much more
- Enrolling on your course
- Meeting your medic parents (second years), your brothers and sisters (other first years)
- And best of all, is two weeks long!

Ace the Medical School Interview

- Intensive weekend course to secure a place at Medical school
- Covers ALL major interview topics
- Held at UCL on 1st-2nd Nov 08
- Limited places, book now at...
Average cost of living at your university campus per week

- Most students I know try to keep a budget of roughly the following amounts:
  - Food - £25
  - Drinks/going out - £35
  - Other (e.g. clothing, books, course materials, mobile phones)- £20

Travel expenses - these vary hugely

Advice that you wish you had been told before applying to your medical school or advice you wish you had been given once you arrived at medical school.

Many medical students (including myself) buy hundreds of books as soon as they get their reading list. My main piece of advice is to sit tight and find out what you really need. Usually the libraries have all the books you need in large quantities so don’t waste your money on books you may only need to use once or twice. However do make sure to budget for some books that you use regularly or that are in high demand.

Also, come with an open mind!
Newcastle University Medical School

(Martyn Stott & Lucy Frost)

MEDICAL SCHOOL - INFORMATION OVERVIEW

Background

Newcastle University began as the School of Medicine and Surgery in 1834, and Armstrong College, founded in 1871 for the physical sciences. Along with the Durham Colleges, these formed the federal University of Durham. King's College replaced this in 1937, which became Newcastle University in 1963. The link with Durham University still exists within the Medical Schools; the two schools combine after preclinical studies.

The Medical and Dental Schools, the Robinson Library and the £5.5million Centre for Sport are all additions to the campus, from the last 30 years.

What is the intake number of students to your medical school?

352 per year of which:

- 206 places on five-year MB BS at Newcastle University
- 95 places on five-year MB BS at Durham University
- 19 places for International students (i.e. non-home/EU applicants) at Newcastle University
- 7 places for International students (i.e. non-home/EU applicants) at Durham University
- 25 places on accelerated four-year MB BS at Newcastle University

NB: A small number of very competitive places are available each year for students enrolled on Stage 1 of a BSc Bioscience degree within the Faculty of Medical Sciences at Newcastle University, following UKCAT and interview.

Course length and the requirements of Intercalation.

There is a five-year traditional course and a four-year accelerated course. Intercalation is not compulsory, however students can apply to do a BSc after Stage 2, or a MSc, MA,
MRes, MPhil or MClinEd after Stage 4. If you are interested in an academic career, there is also a MB BS-PhD programme.

**Advantages of Intercalation:**
- Provides an opportunity for gaining research experience which are necessarily limited in the mainstream programme
- Opportunity to study an area of interest in-depth
- Provides a pathway for those interested in an academic career via the MB BS-PhD programme.
- May be of an advantage later in career.

**Disadvantages of Intercalation:**
- An added year of student debt and a further year without income
- Decision to leave friends in academic year
- Problems with returning back to medical degree (for example, a reduction in clinical competencies)

*Faculty tutors – who are they, what they do and what value do they bring to the medical school.*

**Dr. Philip Bradley: Director of Medical Studies**
Dr Bradley is in charge of the medical degree. He is the first person you will meet from the degree course when you arrive in Newcastle and he likes to think he is a bit scary but he is a sound man. He’s also a Curriculum Officer so you can go to him if you need help. He mainly does the microbiology and some of the anatomy teaching in Phase I. He also authorises your proposal for SSC1 in Stage 2. Bradley tells you all the important information related to the degree.

**Prof. Suzanne Cholerton: Dean of Undergraduate Studies**
Prof. Cholerton is the Dean of Undergraduate Studies for the whole Faculty of Medical Sciences, so that includes Bioscience undergraduates and dentists! In terms of teaching,
Cholerton leads the Clinical Science and Investigative Medicine strand, and mainly delivers the pharmacology teaching in Phase I.

**Dr Francis Kanu: Senior Instructor in Clinical Skills**

Dr Kanu teaches us all how to be competent in clinical skills. Very enthusiastic – he likes you to have a good grasp of sound technique in Phase I and for you to understand the pitfalls and nuances!

**Dr Roger Searle: Director of Anatomy and Clinical Skills**

Many would describe him as a legend! He directs the Anatomy and Clinical Skills Centre in the Medical School, but you will be more aware of him delivering the Life Cycle strand of the curriculum. His memorable lectures include the anatomy of the pelvis and perineum where he dresses up as a uterus.

**Prof. John Spencer: Professor in Medical Education in Primary Health Care and Sub Dean for Primary and Community Care**

His title sounds very impressive, but you’ll come to think of him as the deliverer of PPD. Spencer makes this strand come to life and will never let you forget to ask a patient their ideas, concerns and expectations (informally known as ICE!) during history taking. Other additions include bringing his dog to lectures and tales of his climbing holidays. Top Bloke!

*Principal teaching methods employed in subject delivery; advantages disadvantages.*

Newcastle has an outcomes-based, case-led integrated curriculum, split into two Phases. The curriculum is based mainly around the body systems. Phase I provides the essential knowledge base for Medicine in a clinical context, based at either Newcastle or Durham. Phase II provides clinical experience in a wide range of hospital and community settings across the region. These placements can be quite spread out, so it is important to remember that you might not be based near Newcastle during your third or fifth years.

The case-led approach ensures that we start to everything we learn into a clinical setting. Much of Phase I is learning how things should work, so it helps prepare us for our clinical years. Similarly, the integrated approach helps us to develop our clinical and
communication skills as we go, so we make the smoothest adjustment into clinical work in Stage 3.

During Phase I (Stage 1 and 2) the majority of teaching takes place in lectures. This ensures that an expert in the field gives everyone the information, which is really helpful when the content gets a bit complex. It also eases the transition from structured classroom learning to independent study. It can get a bit tricky when the lecturers speak quicker than you feel comfortable with, but most lecturers are happy to answer questions personally at the end of the lecture, and all are available by email.

Lectures are uploaded onto the Learning Support Environment and sometimes handouts are provided. Lecture styles depend on the lecturer. The majority are PowerPoint led, some are “chalk and talk”, some are clinical demonstrations where a doctor interviews a patient, and some involve audience participation.

Other methods include:

- **Small group tutorials and seminars** provide opportunities for interaction, discussion, ethical debating, exploration and clarification. Anatomy teaching is via small group prosection by an Anatomy Demonstrator (normally a FY2 doctor)
- **Computer-based learning (CAL)** promotes interactive and evidence-based learning
- **Small-group clinical teaching**, for experiential learning in hospital and community care settings. (3 Hospital Visits and 2 GP visits in the first year)
- **Guided self-study** to expand knowledge and understanding. The Medical School recommend that 60% of your time (48 hours) is spent on independent study, including weekends. Apart from clarification, most information can be learnt adequately from lectures and this amount of time is unnecessary for self-guided study. The comprehensive Learning Support Environment is one of the best resources for self-study, as it has many interactive resources, including uploaded lectures, additional tutorials, Case Books and Study Guides and some example examination-style questions

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**Ace the Medical School Interview**

- Intensive weekend course to secure a place at Medical school
- Covers ALL major interview topics
- Held at UCL on 15-16th Nov 08
- Limited places, book now at...
• Communication and clinical skills are delivered in small group teaching and use simulation, role play and video to practise these skills in a realistic manner which can be reflected upon.

• Drama productions are used to present some issues for the Personal and Professional Development Strand, often to think about ethical issues and to provide a point for serious reflection.

A typical week consists of around 25 hours of timetabled teaching.

Phase II (Stage 3, 4 and 5) are largely clinical attachments. The focus here is on independent learning to develop intuition and self-reliance. However, it requires self-motivation, dedication and commitment.

• Stage 3 takes place in one of the Clinical Base Units (Tyneside, Wearside, Northumbria or Teesside) and the focus here is on investigation and diagnosis. The year starts with a Foundations of Clinical Practice course and then continues with a series of Essential Junior Rotations related to medical specialities, including General Practice.

• Stage 4 begins back at the Medical School with a combination of lectures and small group work. The focus here is on independent study to reinforce the knowledge of clinical sciences learnt in Phase I (e.g. pathology and pharmacology). The rest of the year is spent on Student Selected Components, where you select what you want to learn from clinical and non-clinical subjects related to Medicine and Surgery or not. An 8-week elective then follows where you can study Medicine anywhere in the world.

• Stage 5 is back in a Base Unit (but not the same one as Stage 3) for the Essential Senior Rotations. This year focuses on care and management and an integration of all knowledge thus far. For ultimate clinical experience, Stage 5 often includes working weekends and evenings. After Finals, there is a final course to allow you to make a smooth transition to FY1 doctor.
Assessments taken in and the relative importance of each.

Throughout the course, you are working towards set Learning Outcomes described in the course Handbook. They fall into at least one of three different strands that you are then assessed on:

- Clinical and Communication Skills (Skills)
- Knowledge and Critical Thought (Knowledge)
- Professional Behaviour (Professionalism)

A student is required to satisfactorily pass each strand to progress to the next Stage. In Phase I, a student can pass each strand as unsatisfactory (U), borderline (B), satisfactory (S) or with merit (M). If a student gets two merits out of the three strands they pass the year with merit. If they get a merit in all three strands they pass with distinction. Any candidate finishing with a B or a U in any strand must go to re-sits.

In Stage 1, there are 3 exams and 4 assignments. The weight of each assessment is usually more than the last. The assignments assess your abilities in areas such as reflection, clinical reasoning, critical appraisal, ICT and communication. The final assignment is a project run throughout the year, in which you and a partner visit a woman through the end of her pregnancy, and through the early development of her child. This is worth quite a bit, but is a lot of fun as well. Assignments are set throughout the year.

There are exams in November, January and May. All of these are split into two exams: Data Interpretation (DIT) and Extended Matching Items (EMI). DIT questions involve more working out and maths, whereas EMI questions mostly just test knowledge. Both are in multiple choice format. The November exams are worth very little, but are helpful as markers of whether your doing enough work (usually not after Fresher’s Week!) and so you can see the structure of the exams. In January you have a mock OSCE (practical exam) and in May you have a real one- these test your clinical skills.

In Stage 2, the strands are assessed through two exams and two assignments. The exams are in January and May, and both include DIT, EMI and OSCE, like in Stage 1.
The assignments include the Patient Study, which is a lot like the Family Study in Stage 1. However, this time you are visiting a patient with a chronic illness. The second assignment is SSC1, which tests your ability to answer a question written yourself by finding information from critically appraised articles. The end product is a literature review, answering the question.

NB: Professionalism is also monitored using multi-source feedback. Behaviour during seminars, attendance at compulsory classes and adherence to deadlines are used as indicators of a professional approach to your own learning. A display of consistent lack of professionalism may lead to lack of progress to the next stage at the discretion of the Director of Medical Studies.

How difficult are exams in the preclinical years?

The difficulty of exams depends on the amount of work you put in, both throughout the year and during revision. For example, someone who prepares well for dissection sessions and gets the most from the Demonstrators and therefore learns their anatomy as they go along finds it much easier than trying to learn it all come exam time. Exams seem a lot harder than A Levels and indeed other degree courses, however, because they are not in a modular fashion and can test aspects of a whole year's work. The vast amount of knowledge and material also makes it impossible to remember everything. The quicker you realise this, the more content you will be with your results.

In terms of written exams, a pass is usually just below 60% and a merit just above 70%. For OCSEs, a merit increases to above 80%.

An average, exams take about 4 weeks to prepare for. Use Christmas and Easter vacations as a break, but it's also vital to get started on the revision! For the summer exams, teaching leads right up to the exam period and you typically get less than a week's study leave before they begin.

The number of students who fail each year in preclinical exams.

On first sitting, about 30 people per year fail the year. This may be for either their assignments or exams. Depending on the nature of failure to progress depends on the
nature of re-sit. Some people are only required to re-sit an assignment, other the exams. After re-sits, only about 5 of these people fail the year. They are permitted to re-sit the exams the following year as an external candidate after a year of private study and then progress to the next stage.

LIFESTYLE AND EXPENSE

Newcastle MedSoc is the main organiser of social events in the Medical School. For a £75 (£80 if you join after Freshers’ week) life-time membership fee, there is free ‘Diesel’ (cider, lager and blackcurrant) every Friday night during term time. MedSoc Friday nights are a great way to wind-down after working hard all week and a great way to socialise with other medics outside the lecture theatre. They also provide a great place to meet medics in other years that are invaluable sources of information about the course, as well as a great way to make different friends. Some are allocated a theme and inter-year boat races and competitions take place, such as the “MedSoc Olympics” which includes various drinking-related ‘sporting’ events, others are a just a nice social gathering. Your MedSoc card also gets you various deals across the city arranged each year by the MedSoc committee.

MedSoc also organises numerous pub crawls during the year, including the freshers’ pub crawl which takes place after freshers’ week to introduce those in the first year to Newcastle medic life. The infamous ‘Metroline’ pub crawl takes place before the Easter vacation each year. This endurance event involves medics in all year dressing up as doctors and nurses and taking to the light-railway system in Newcastle (the Metro) and stopping off at various pubs along the way. The day begins at 1pm (straight after Wednesday lectures) and travels to the coast for a fish and chip supper by the sea before returning back to the city centre at about 11pm to start clubbing until the early hours. Quite possibly the best pub crawl in the world – students of all courses hitchhike and become medics for a day!

The MedSoc Christmas Ball takes place each year before the Christmas vacation (usually the last weekend in November). This again is a very popular event and tickets sell out fast. Usually present is an anatomical ice sculpture from whose genitalia one can do shots!
The Newcastle Medical and Dental Students’ Council (NMDSC) also organise various events during the year. The Cheese and Wine Evening takes place in October and acts as a way for Peer Parents to incorporate first years into their families, as well as sampling wines and cheeses from around the world. Every student in second year is allocated to a first year and acts as their parent providing information on all aspects of curriculum, welfare and social events, or just to become good friends with. NMDSC also organises the Halfway Ball for 3rd years, and also the Summer Ball to celebrate the end of exams!

Medic Social events.

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Difficulty/ease of getting Halls and their good and bad features of each. Tips on how to get the Halls of your choice.

All first years are guaranteed University accommodation if they meet various criteria outlined by the University. Most students get the halls they want; however some of the more popular halls like Marris House and Windsor Terrace are more competitive. The following accommodation is on offer, all of which include a broadband connection:

**Catered Accommodation:**

- **Castle Leazes Halls:** Castle Leazes is weirdly located in a cow field next to Leazes Park, directly opposite the Medical School and next to St James’s Park. Breakfast and evening meals during the week are the obvious advantage, but you also have to cook meals at the weekend so they aren’t exactly fully catered.

- **Henderson Hall:** provides catered and non-catered accommodation. These halls are located 3 miles away from the city centre which means a bus journey in to the Medical School everyday. On the plus side, they are located with the University sports grounds and tennis courts.
Self-Catered Accommodation:

- **Bowsden Court**: located in South Gosforth, 2 miles north of the city centre, but the accommodation is within walking distance of the South Gosforth Metro stop, so regular transport to the centre is available. For those with a car, ample free parking is also available. All rooms are en suite and have a freeview connection in all rooms.

- **Marris House**: located next to the brand new Centre for Physical Recreation and Sport and about a 3 minute walk for the Medical School, you can roll out of bed at 8.55am and still make it to the 9am lecture! Marris House is located on a larger site as part of Richardson Road. All flats have a freeview connection in the lounge area and all rooms are equipped with a washbasin. Competition for Marris House is fierce and therefore more abundant are gappers, since their accommodation is processed first.

- **Richardson Road**: again located next to the Sports Centre and even closer to the Medical School; if you are 18, fresh from school and are looking for the ultimate student experience, Ricky Road is for you! There is never a dull moment here! Legend has it that the flats once won an architecture award for looking like the British Isles from a birds-eye view. Some might say the accommodation is lacking but it is adequate and the flats have recently been updated.

- **St Mary’s College**: located in Fenham, about a mile from Richardson Road, it is served by several buses and is within cycling distance of the University. Has free parking if you are a car owner. A large communal hall offers full-size snooker and pool tables, table tennis and table football, as well as a large-screen TV where you can meet friends for a bit of relaxation and recreation.

- **Victoria Hall**: new for 2008, Victoria Hall is a purpose-built modern complex within easy walking distance of the University and city centre. With a mix of single and deluxe en suite rooms, Victoria Hall is bound to be popular.

- **Windsor Terrace**: located close to Robinson Library and the city centre, Windsor terrace is close to the Union Society and about a 10 minute walk to the Medical School. Offering a mixture of washbasin and en suite rooms, Windsor Terrace is popular with many undergraduates for its central location to town and the University.
Common nights out – a guide to a good night on the town!

Newcastle has a reputation as one of the world’s greatest party cities, and there’s somewhere good to go every night, even on a student budget!

MONDAYS

Vodka Island at Tiger Tiger
Music: RnB, HipHop, Chart, Cheese
Drink Deals: Double Vodka and Mixer: £1.99, Becks £2, Selected Shots: £1.00, Cocktail Jugs: £8

Born In The 80s at Digital
Music: 80s/90s/00s Pop and Electro
Drink Deals: 80p selected drinks

TUESDAYS

Rub a Dub Dub at Cosmic Ballroom
Music: D&B, Electro
Drink Deals: Double Vodka and Energy: £2, VK: £1, Fosters Bottles: £1, Fosters Pints: £2.50, Cocktail Jugs: £8

WEDNESDAYS

Deluge at Legends
Music: RnB, Electro, Pop, Student Anthems
Drink Deals: Tequila/Sambucca shots: £1, Bottles: £1.50, Doubles and Mixer: £2, Glass of Wine: £2, Trebles and Mixer: £2.80
THURSDAYS

*Skint at Liquid & Envy*
Music: RnB & Dance
Drink Deals: All drinks £1

*Ying Yang at Perdu*
Music: Funky Vocal House
Drink Deals: Various bottles: £2, Bottle of Magners Cider: £3, Single and Mixer: £2, Double and Mixer: £2.60, Glass of Wine: £2.50

*Lovedough at Tup Tup Palace*
Music: RnB, HipHop, Soul, Garage

*Stone Love at Digital*
Music: Indie, Rock, Soul
Drink Deals: Selected Drinks: £1.50

FRIDAYS

*Union Society, Newcastle University*
(New night for 08/09, see website for details: http://www.unionsociety.co.uk)

07/08:
*Solution at the Union Society, Newcastle University*
Drinks: Treble and Mixer: £2.50, Pint: £1.90, Shots: £1.

*Debauchery at Venue*
Music: Cheese & Party
Drink Deals: Double and Mixer: £2.50, Bottles: £1, Pig ‘in bottles: £1.50 or 4 for £5, Shots: £1, Jugs: £7, Jagerbomb: £2.50

**Revolution at Carling Academy**
Music: Rock, Metal, Emo, Punk.
Drink Deals: Carling: £1.70, Double and Mixer: £2.50

**Vice City at Baja Beach Club**
Music: Commercial, Cheese, Dance, RnB, Indie, Electro
Drink Deals: Sambucca, Tequila & Corky’s Shots: £1, Bottles: £1.50, Double and Mixer: £2
(Red Bull +£1)

SATURDAYS

**Mish:Mash at Attic Nightclub**
Music: RnB, HipHop
Drink Deals: Vodka and Mixer: £2, Double Vodka and Mixer: £2.50, Bottles: £1.75

**Wiggle at Northumbria Student Union**
Music: Cheese, Party
Drink Deals: Double and Mixer: £2, Shots: £1, Bottles: £1.50

**Shindig at Digital**
Music: House
Drink Deals: None.

**Bulletproof at Carling Academy**
Music: Indie, Electro
Drink Deals: Carling: £1.80
SUNDAYS

Stupid Little Disco at Cosmic Ballroom
Music: Electro, Minimal Tech, Indie, NuRave
Drink Deals: Double Vodka and Mixer: £2

Web link to relevant prospectus.

University Prospectus: http://www.ncl.ac.uk/undergraduate
Prospectus for Medicine: http://www.ncl.ac.uk/undergraduate/subjects/medicine

Freshers week unmissable, okay or definitely missable?

"Newcastle University thoroughly deserves its reputation for having the best Freshers’ Week in the country and other Universities should follow suit" The Guardian, 2003

Indeed, Freshers’ Week is undoubtedly one of the best weeks of your life! In Newcastle, Freshers’ Week is at the end of September, beginning on a Sunday evening and finishing on the Thursday evening. Each year, 4 elected Organisers head a team of around 200 ‘Crew’ members, 24 Supervisors, 10 Chief Supervisors and an army of Drivers to make it a week to remember! Both days and nights are jammed with activity, such as paint-balling, climbing and surfing and organised pub crawls and events. Crew members will help you move into halls then get you ready for the action. Each evening usually has a big event, including a big named band on one of the nights. Alternative events are also available, particularly suitable for international and mature students. If you aren’t big on drinking, there are plenty of events that are alcohol free too. Freshers’ Week costs about £40 and you normally get issued with a wristband which you need to get into all the events!

Unfortunately, for medics, Freshers’ Week is not entirely lecture free, however the Medical School do try and keep lectures to a minimum. You will probably have 9am lectures each morning, and then maybe one at 12 as well as some introductions to the Library and computing system and maybe a meeting with your tutor. The most important thing is to try and do as much as you can during Freshers’ Week and get to know people. Day events
usually need signing up for so get stuck in! You get from the week what you put in – but
the Crew will make it very easy to have a great time!

*Average cost of living at your university campus per week*

Depends on accommodation, but taking cheapest:

**Living on campus:**

- St Mary’s College single room with washbasin: £65.45
- Food: £30 (Granger Market has good quality local produce for low prices)
- Socialising: £50 (invest in MedSoc and you can drink every Friday for free)
- Taxis home from nights out: £10
- Miscellaneous: £30

Total: £185.45

**Newcastle student living at home:**

- Metro Student card: £4.81 a week
- Rent to parents: £35
- Socialising: £50
- Taxis home from nights out: £50
- Miscellaneous: £30

Total: £169.81

*Advice that you wish you had been told before applying to your medical school or advice you wish
you had been given once you arrived at medical school.*

When you arrive at Newcastle, as with any Medical School, things will seem very different
from school or college. Concepts move at a very fast pace and whilst you may have found
things moved too slowly before, now they may be moving too fast. Don’t panic, this is more
than likely happening to everyone. You’ll find that you get used to the environment and the
speed and you’ll find you can quickly find information in textbooks without it taking hours.
Biology is not a definite requirement for entry to Newcastle. Although it is very helpful, and the course expects you to have knowledge up to A Level Biology standard, you are no means left alone if you don’t have this qualification. The Medical School will give you information about recommended textbooks and even a guide written by students who started without Biology for other students. The Medical School also run a series of lectures aimed at these students near the beginning of first year to get you up to speed.

If you find you are struggling, there is a massive amount of help available. NMDSC organise peer parents who can be great sources of informal help and support. Formally, you have a pastoral tutor who can help you with any matter relating to you personally and academically. There is also a team of Curriculum Support Officers who can give advice on organising your study and help with learning techniques suitable for the MB BS course.

However, also remember that university is a time to have fun. As long as you’re sensible, there is plenty of time to go out, join loads of societies and hang out with friends, whilst still keeping up with the course! First year is the best year for it, so make the most of it.
MEDICAL SCHOOL - INFORMATION OVERVIEW

Background

Founded in 1965 Warwick University is a uniquely successful British University. Located on the outskirts of Coventry in the west midlands, its campus straddles the south west border of Coventry and the Warwickshire county border. The campus itself is 400 acre site and was voted “Best University Campus” in a national student poll published by the Times Higher Education Supplement in 2006. The medical school opened in 2000 as part of a national expansion program and was joined with Leicester. It gained independent status in 2006 and is still the only graduate-entry school in the UK.

What is the intake number of students to your medical school?

For 2009 the Warwick MB ChB course will be offering 164 home/EU and 14 overseas places.

Course length and the requirements of Intercalation.

The course is a graduate entry, 4 year course, and requires at least an upper second class (2:1) degree (or overseas equivalent) in biological, health, natural or physical sciences (for a full list of acceptable degrees see the Warwick Medical School Website).

Faculty tutors – who are they, what they do and what value do they bring to the medical school.

- Dr Wolf Markham (research area the relationships between socio-economic circumstances, human functioning, health and health related behaviours and factors that influence these relationships). He is the joint module leader of the Human Lifespan module.

- Dr Jane Kidd (research area Communication) is the director of undergraduate medical education, as well as an associate professor in clinical communication. Dr Kidd is probably one of the first people you will meet at the medical school at...
the open days and during the selection centre process, and you'll be seeing her again for all sorts of reasons as her role as director of undergraduate medical education. She is also the module leader for Developing Interview Skills for the Consultation (DISC) where every aspect you could ever think of (and some you couldn’t) in ways of communication are discussed and practiced.

- Wendy Robertson (lecturer in public health) is joint module leader for Health and Disease in Populations (HaDPop). Her areas of research include a parenting intervention for childhood obesity and investigating the respiratory effects of occupational exposure to oil.

- Dr Chris Bridle (Chartered Health Psychologist) Dr Bridle’s research centres on the design and evaluation of health behaviour interventions. Dr Bridle is the module leader for the health psychology module and uniquely presents all of the lectures. Each deals with a separate concept, which is then explained with multiple examples to illustrate the point.

- Dr Alan Morris (research area Molecular Medicine) is the module leader for the Infection and the Immune System module. He also runs a special study module (SSM) in Cancer Biology and obviously lectures on both modules. A member of the Department of Biological Sciences and associate member of the Medical School, Dr Morris has been involved with WMS since its inception, and pops up in all sorts of areas. He’s an admissions tutor so you may well see him at selection centre.

- Professor Peter Stanfield (research area Molecular Physiology of Ion Channels). Prof. Stanfield is the module leader for the Cardiovascular system module, which provides all the essential lectures on the heart electrical activity and cardiovascular flow.
• Professor Peter Abrahams (specialty Clinical Anatomy) – One of Warwick’s newest members of staff, ‘The Prof’ teaches you clinical anatomy in most of the modules. He’s also there during your anatomy model teaching, and writes one of the recommended text books for the course.

• Dr Vinod Patel (specialty Endocrinology and Diabetes) – you’ll be seeing quite a bit of this man. He’s the module leader for the Clinical Skills portion of the course in phase I, as well as making all sorts of appearances in the induction week and during OSCE’s. He also helps with the teaching at George Elliot, if you are placed there for semesters 2 and 3 clinical skills teaching.

Overall the medical school uses a good mix of clinical staff and academics. The clinical modules are taught by clinicians, whilst the sociology is taught for the most part by academics although if an area in a subject is best taught by a specialist it usually is. Warwick also has a wide variety of guest lectures in to speak on their relevant area of expertise as part of the course. Warwick’s research covers a variety of fields with particular focus on important areas of medicine and health, including obesity and diabetes, cardiovascular disease, orthopaedics, neuroscience and reproduction.

Principal teaching methods employed in subject delivery: advantages disadvantages.

In Phase 1 (the first 18 months) the course is delivered by modular lectures, with the addition of small group learning, facilitated by clinicians or by Warwick’s academic staff. The group work has a large emphasis in phase 1 with almost every 45min to 1hr lecture being accompanied with a similar amount of group work. Group work usually consists of working through questions as a group with the guidance and help of the facilitators. There are often also questions to be completed before and after lectures to help guide your learning out of the lecture theatre.
Whilst the group work ethos may suit some, others find it quite difficult to settle with a group of people, which they are reliant on for a considerable amount of their study, and who are allocated to them without consultation. Each group will typically consist of a wide variety of ages, backgrounds and previous degrees, to give a diverse knowledge base with which to work. Therefore a willingness to work in a team and to ‘get along’ is crucial to success on the Warwick course, and so the argument goes, with a career as a Doctor.

Once into phase 2 (remaining two and a half years), teaching is done on a one to one basis with consultants in the hospitals (a ratio Warwick prides itself on). Students are paired into clinical partners with whom you will spend your time and be allocated your 8 week teaching blocks.

TEACHING AND EXAMS

Assessments taken and the relative importance of each.

After each semester there is an end of semester assessment (ESA) as well as Observed Structured Clinical Examinations (OSCE’s). The ESA’s consist of a series of questions, (8 in semester 1, 12 in semester 2 and 20 in semester 3). Each with a reducing amount of time to complete the questions. Each set of questions is equally split between 2 papers.

To pass the ESA’s you have to pass 70% of the questions with an overall pass rate of over 40%.

The OSCE’s are based on the clinical skills taught so far. The first semester there are six 10 minute stations, whilst in semesters 2 and 3 there are twelve 5 minute stations.

To pass the OSCE’s you have to pass 70% of the stations.
How difficult are exams in the preclinical years?

The exams in themselves aren’t that difficult, its knowing to keep your learning clinical at all times and not to get bogged down in detail at this level. In the later years you will need to know everything in more depth, but for the first 18 months, breadth not depth is the key. For each assessment I did approximately 2 weeks of revision, however you are continually going over information through out the year in group work sessions in different modules so it is difficult to put an actual number on it. If you work consistently through the semesters you should have no problem.

The number of students who fail each year in preclinical exams.

The figures are unpublished but in the region of 10 per year.

LIFESTYLE AND EXPENSE

Medic Social events.

The majority of the social events are organised by the Medical Society (MedSoc). Although separate clubs, society’s and sports teams obviously all hold there own events and fund raisers aswell.

There are several MedSoc events each semester, usually in Coventry or Leamington Spa, although some have been in Birmingham, and sports teams will be out and about at pretty much any opportunity, anywhere they happen to find themselves.

Whilst the medical school is the largest graduate entry intake in the country, it is still a relatively small community and there is far more inter year socialising, than I ever found in my previous degree, which makes for a good mix of people and socials! Socials vary from nights out with cut rate drinks, to non drinking socials such as bowling. Either way there
are always more socials than you can manage, which lets you pick and choose the ones you most want to go on.

**Difficulty/ease of getting Halls and their good and bad features of each. Tips on how to get the Halls of your choice.**

Whilst the Warwick course is an undergraduate course, as all students will be graduates the University treats you as postgraduates when it comes to accommodation. That means there are limited places available within halls. The only halls available are Tocil, and you need to be quick to be in with a chance of getting a room. If you do you, will be with a flat of 6, 9 or 12, sharing with other postgraduate students. It is highly likely you will be sharing with at least one other medical student (some flats with up to 5) however it is possible you will be the only one. The rest of the students will likely, be mostly international, which makes for a diverse international experience.

If your not in flats you'll be placed in one of the many university owned houses. Usually 3 or 4 bed, where typically there will be 2 medical students together often with at least one PGCE student.

**Common nights out – a guide to a good night on the town!**

Coventry has all the usual clubs you would expect of a city, however most of the Warwick students will usually be found either in the one of the Students Union organized events which covers everything from Cheese to R&B, or in one of the two main clubs in Leamington Spa, Smack and Evolve, each of which have there own charm which you'll have to experience for yourself! Bar prices vary, depending which night it is and on the club/bar. There are offers of £1 for vodka redbulls (produced on mass in white plastic cups – very classy) whilst other bars will charge over £3 a pint. Thankfully there’s always plenty of other students (and often medics) around to show you the best places to go.
Web link to relevant prospectus.

http://www2.warwick.ac.uk/fac/med/study/ugr/download/pdf/warwick_mb_chb_prospectus.pdf

Freshers week unmissable, okay or definitely missable?

The University of Warwick hosts it’s freshers fortnight in October each year. However you will be starting at the medical school in early September, so MedSoc organize there own specially for you. Each day of induction week, the medical school will have you in lectures near enough 9 til 5, however once there finished there are social events every night to let you meet everyone in your cohort and in the years above.

Sunday- induction BBQ where you can grab a bite to eat and meet your year for the first time since interview (or acceptance day if you came).

Monday- Sports day, various sports are organised where no previous experience is required. They change every year, but previous years have seen dodge ball, volley ball, and football, usually with several on at the same time. Then on for a drink on campus for those that want to.

Tuesday- Teddy Bear Hospital quiz, teddy bear hospital is a national charity, so every year they host a fundraiser, a pub quiz style evening in the local campus Varsity.

Wednesday- Revue, no medical school would be complete without the medics revue, poking fun at the medical school, the NHS and the medical profession in general. Usually 1st years attend the first night on the Wednesday, and everyone else goes to the 2nd evening on the Thursday. A mainstay of the WMS freshers week, and here to stay.

Thursday- Doctors& Nurses, a proper night out in Coventry, where cross dressing is not only encouraged, it’s practically insisted upon. A highlight of the induction week, and one that people will be talking about for years to come. So buy those miniskirts and dodgy old ties early (as you probably won’t have time once you’re here in lectures 9 till 5). Don’t forget you’ve still got to make it in for nine o’clock Friday morning.
Friday - Get to know your local, a more laid back evening, where you spend a couple of hours in your local area getting acquainted with the local pubs and bars with a few kind and keen students from the upper years.

Saturday - Induction week ball, the final day of the induction week before the hard work really begins, and what better way than by a ball. Again always well attended, it’s advisable to get your tickets early.

**Average cost of living at your university campus per week**

Tocil costs £82.00 per week (which seems quite expensive but does include all bills and full internet access) and it has the added advantage of being 10 minutes walk from the medical school. Think of all that extra sleep and missing all that 5pm traffic! Off campus rent varies, depending on the house and number of occupants but usually ranges from £59 to £65 a week including water. Contract lengths vary but all are designed for the medical school term, which is longer than the standard undergraduate term.

Whilst it is not essential to have a car whilst at Warwick Medical School, it will be very difficult if you find yourself living in Leamington spa and none of your house (or nearby houses with medics in) drive. So whilst you don’t all need to drive, certain modules require a certain number of drivers. Health in the Community (where you go into the community and interview patients from week 3 or 4 of the course) has bus’ put on for the main areas. But if you end up in small country villages then it often requires students to lift share to get there and back. Cost is shared between students as there is no funding available from the medical school to help with costs.

*Advice that you wish you had been told before applying to your medical school or advice you wish you had been given once you arrived at medical school.*

Don’t worry about doing any work before you arrive, enjoy your freedom whilst you have it. Don’t by lots of expensive text books until you’ve had a look at them. The BioMed Grid is the best place for this. Everything else is much the same as starting any other degree.
Ace the Medical School Interview

- Intensive weekend course to secure a place at Medical school
- Covers ALL major interview topics
- Held at UCL on 15-16th Nov 08
- Limited places, book now at...

AceMedicine.com
MEDICAL SCHOOL - INFORMATION OVERVIEW

**What is the intake number of students to your medical school?**

450 students are accepted into Birmingham per year, the largest of any medical school in the UK.

**Course length and the requirements of Intercalation.**

There are 2 medicine courses on offer:

1. 5 year MBChB (with the option of taking a year out to intercalate - It is not compulsory).
2. Graduate entry 4 year MBChB

An intercalated Bsc is not compulsory, and only a limited number of students are allowed to enrol. You can do it after the 2nd, 3rd or 4th years, but generally you need to be getting good grades to be considered.

Advantages:

- It will greatly improve your employability when you leave medical school (this might not seem so important at the moment, but when you leave medical school, the quality of your application will determine if you get the post you want or not).
- You can take your intercalated degree in a wide variety of subjects, from cell and molecular pathology to Psychological Medicine.
- They teach you early on about research technique.
Disadvantages:

- Taking a year out means that you will effectively be on a different course from your friends who don’t intercalate. This means not seeing them as much as you would do otherwise.
- When you finish you intercalated year and are placed back on the MBCHB course, you will be a year behind, and effectively be a new member of the year group. Again this means losing regular contact with a lot of the friends you make in first and second years.
- It will cost a lot of money, as you will have to fork out for another years tuition fees and living costs.

Faculty tutors – who are they, what they do and what value do they bring to the medical school.

Because of the size of the medical school, you have less regular contact with tutors than other courses and medical schools. Unless you have an important position yourself, for example, academic rep, you will not generally get to know faculty tutors very well.

Fortunately this is recognised and each student is assigned a personal mentor; someone to turn to if you have any problems. They are the most important member of staff for each student in the first two years, and they are normally a researcher or have some other role in the medical school, for example a lecturer.

Principal teaching methods employed in subject delivery; advantages disadvantages.

The bulk of the course is taught through lectures, supplemented with small group tutorials/student led classes. This means you are not spoon fed the information, you have to put some work in, but in the long run it is supposed to make you a better doctor as you need to be able to learn for yourself throughout your career.
We are taught anatomy in small group sessions, supplemented by lectures and 4 prosections (viewing previously dissected cadavers) throughout the year. In the first two years, we are given a workbook to go through and finish. This is the bulk of the work that needs to be done in your spare time, and it does require a lot of time.

We have a GP placement day every fortnight. This is a great way to build your confidence around patients, as you have the opportunity to learn to take simple histories and perform basic examinations. It is the most rewarding day, but again it is hard work, and often the quality of your teaching varies depending on the GP surgery you are sent to.

TEACHING AND EXAMS

Assessments taken in and the relative importance of each.

The course consists of 10 modules, and each one must be passed in order to progress to the next year. You need to get at least 50% in each module (although you can dip slightly under for a couple of modules if you do well in others). There are:

- 6 bioscience modules
- 2 medicine in society modules (sociology, research etc)
- Community based medicine module (GP placement)
- Integrated problems module (a relatively small module).

Each module is assessed using a variety of examination methods. The bulk of the course, the 6 bioscience modules, are marked with multiple choice papers, short answer questions and in-course assessments (essays, presentations, group discussions, etc). Other modules are marked with a variety of weird and wonderful exams and in course assessments, but they are generally easier, with almost everyone who fails falling short in the bioscience modules.
We have several exam periods through the year, supplemented by in course assessments (kind of like coursework at A-levels and GCSE’s). Approximately 25% of the course is assessed just after the Christmas holidays. These are less important, but if you do well, it takes the pressure off for the Easter exams. The most important period is during May, when all modules are assessed.

How difficult are exams in the preclinical years?

It is hard to say how difficult the exams are. Some people find them very, very difficult, and spend most of their holidays hunched over their desks in a whirlwind of paper and stress! But there are many other people who seem more relaxed. But whoever you are, there is a very real danger of failing, and no matter how clever you are, at this level if you don’t put in a decent amount of work, you will come unstuck. They are certainly a level up from A-levels!

We are expected to perform to a higher level than other courses, pass marks for subjects like history and chemistry are 40%, whereas in medicine, you need 50% in EVERY MODULE to proceed, and our exams are definitely harder than other courses (though I am a little biased here).

Personally, I took about 3 weeks to prepare for the Christmas exams, and about 7 weeks for the big exams in May though this varies a lot, and it all depends on the individual. Most people seem to spend a large proportion of their Christmas and Easter holidays revising (as unfortunately the main exam periods are just after these holidays!)

LIFESTYLE AND EXPENSE

Medic Social events.

Freshers week passes for most people in a blur of drink and hangovers, though there are variations on the theme, and through the rest of the year, the social events will depend
largely on the social rep YOU elect. Generally though, because of the size of each year, there is a massive amount going on.

The main reason they are so enjoyable is that you see hundreds of people that you know, and as a group the medics are a pretty friendly bunch. The medic socials are often different from the average night out; you have to be very good at fancy dress! And they are really well organised so the evenings are usually very cheap.

There are a few special events through the year, the highlight being medball. This is a ball for the entire medical school, and it is huge, over 2000 people attend. You get a 3 course meal, free wine, and great DJ's in a several rooms with lots of different music.

There are hundreds of societies you can get involved in; groups run by medical students for medical students, including sports teams, religious groups, charities, volunteer groups etc. Again, because of the size of the medical school, there is a massive variety on offer, and there is something for everyone. If there isn’t, you can set one up yourself!

**Difficulty/ease of getting Halls and their good and bad features of each. Tips on how to get the Halls of your choice.**

There are many different halls at Birmingham, and you should be guaranteed a place as a first year, but it can be difficult to get your hall of choice if it is a popular one, so it is best to apply as early as possible. There is a wide choice of halls, and they are all different, so it is worth spending a bit of time researching the different halls and it is a good idea going to see them.

There are 2 main areas: The Vale Village and Pritchatts Park, with other accommodation spread elsewhere.
The Vale Village

The Vale is the main area for first year student accommodation. It has pretty much everything you need, and has a great student atmosphere. It's not far from the medical school, about a 15 minute walk, so you should never be too late for lectures! And it is about 10 minutes from the main campus.

The vale has 5 different halls: Tennis Courts, Shackleton, Maple Bank, Aitkin Wing, and a new one in 2008

Tennis courts is a very popular place to live, it has good quality flats and is relatively cheap. It is the closest to the campus and the medical school.

Shackleton is the centre of the Vale village, and it is the most expensive. It has all the services that other halls in the vale must come and use, the cantine, laundry, costcutters, a bar and the vale reception.

Maple Bank is very similar to tennis courts in quality and layout, and has a similar community feel, but it is a bit further from the medical school.

Aitkin wing, though small and in need of a bit of redecoration, has one of the best community feel of any hall of residence. Because it is relatively small (150 students) you get to know almost everyone else who lives there.

Pritchatts Park

Pritchatts park is a lot closer to the medical school than the vale, being only 10 minutes walk away. It’s also a lot closer to the station, meaning you can get to the city centre much more easily. It is a lot smaller than the Vale, housing only 700 students, and many of those are postgraduates.
Common nights out – a guide to a good night on the town!

This is one of the great things about being in Birmingham - the variety of nightlife is huge!
For the bog standard nights out, we have:

Monday—Oceana
Wednesday---RISA
Thursday---Mechu (for a “classier” night out) or Vodbull

These are the clubs which play standard music (dance, cheese, r&b etc) that you would find in your local, they are a lot of fun as whenever you go, you ALWAYS bump into hundreds of other people you know. They are the first stop for a good night out.

Other good nights out include:

Snobs- for ‘alternative’ music i.e indie, rock etc.
Custard factory- renowned for raves, drum ‘n’ bass and top notch dance music.
Jamhouse- a more chilled out live music venue whose music director is Jools Holland
Carling Academy- for gigs of all shapes and sizes.

Remember this: There is no shortage of nights out and there is something for everybody.

Web link to relevant prospectus.
http://www.undergraduate.bham.ac.uk/

Freshers week unmissable, okay or definitely missable?

Freshers for medics is slightly different than for everyone else. There are 2 weeks: In the first, you do everything the standard student does, which is pretty much a whirlwind tour of all the major clubs in Birmingham, one each night.
But the second week is filled with Medic organised nights out/activities for all the medical students and other Courses run from the medical school (physios, BmedSci and nurses). All these events are organised by students, and there are a friendly bunch of people called “Fresher CO’s” around to help, but whose main job is to get you drunk, so watch out!

**Average cost of living at your university campus per week**

Living at the university campus as opposed to home means many more expenses for yourself personally. The main expenses are your rent, and food. You will have to pay around £30 a week for food, so around £1000 for the university year, and you will be charged anywhere from £3200 to £5500 for rent depending on the hall of residence you choose.

**Advice that you wish you had been told before applying to your medical school or advice you wish you had been given once you arrived at medical school.**

If you don’t get in the first time, or even the second time, reapply. If it really is all you want to do, and you are fully prepared for the amount of work, then it is worth delaying your student life a couple of years for.
**Imperial College School of Medicine**

*(Obadah Ghannam & Sam Mason)*

**MEDICAL SCHOOL - INFORMATION OVERVIEW**

**Background**

Based in South Kensington, London, Imperial College is one of the most prestigious universities in the world. Sir Alexander Fleming discovered penicillin in his basement laboratory at St. Marys Hospital. Current research includes work to grow artificial human valves from stem cells, methods of suppressing food cravings amongst obese people, and ideas on how to more rapidly detect the signs of cancer.

**What is the intake number of students to your medical school?**

Imperial College has around 5060 postgraduate students and 8350 undergraduate students overall. Its medical school was established in 1997, when all the major West-London medical schools were brought together under the umbrella name of Imperial College. Its annual research income is around £100 million, which it spends on initiatives in imaging technology, tissue engineering, bioinformatics and structural biology. Every year, the university accepts around 300 medical undergraduate students.

**Course length and the requirements of Intercalation.**

The medical course at Imperial College comprises of six years. One of those years involves a compulsory BSc course. This is done in the 4th year. The advantage of doing this BSc is that it gives you a clearer focus on the area of research you may want to pursue in the future. It also helps you explore your interests in the medical field. Imperial College offers the following BSc courses: Cardiovascular Sciences, Endocrinology, Gastroenterology and Hepatology, Haematology, Imaging, Immunobiology and Pathology, Management, Molecular Basis of Disease, Neuroscience, Obstetrics and Gynaecology, Paediatrics, Pharmacology and Toxicology, Physiology, Psychology and Psychiatry, Respiratory Science, Social Medicine, and Surgery and Anaesthesia. The disadvantage of this BSc is that it is compulsory. There is generally no open way to get out of it!
Principal teaching methods employed in subject delivery; advantages disadvantages.

The teaching methods at Imperial College vary quite a lot. As expected, there are lectures, tutorials, practical sessions, demonstrations and group sessions in the anatomy lab, with cadavers. However, more recently, the university has introduced an initiative based on a web-interface, called Web-CT. Basically, this involves access to online material and peer-to-peer help. Any question you have can be posted online, and answered by fellow students / lecturers. Students have found this extremely useful.

In the pre-clinical years, the most common teaching methodology employed is PBL sessions (Problem Based Learning). Tutors provide support to student led sessions. Feedback from students is commonly positive. One thing however you must bear in mind is that tutors don’t know if you are in trouble. You have to make the initial move, before they can help.

TEACHING AND EXAMS

Assessments taken in and the relative importance of each.

Medicine at Imperial College is almost entirely focused around summer exams; there is very little assessment throughout term time in the pre-clinical years. The structure is as follows:

<table>
<thead>
<tr>
<th>Month</th>
<th>Year 1</th>
<th>Year 2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Year 1</td>
<td>Year 2</td>
</tr>
<tr>
<td>January</td>
<td>Formative (mock) exam</td>
<td>-</td>
</tr>
<tr>
<td>March</td>
<td>Formative exam</td>
<td>-</td>
</tr>
<tr>
<td>April</td>
<td>1 summative (real) PBL exam</td>
<td>3 summative exams in late April</td>
</tr>
<tr>
<td>June</td>
<td>Final summative exams</td>
<td>1 summative exams in early May</td>
</tr>
<tr>
<td>July</td>
<td>Summative exam results</td>
<td>1 final summative exam</td>
</tr>
<tr>
<td>August</td>
<td>All re-sits</td>
<td>All re-sits</td>
</tr>
<tr>
<td>Study leave</td>
<td>1 week</td>
<td>6 weeks</td>
</tr>
<tr>
<td>Average days per week</td>
<td>3.5</td>
<td>4</td>
</tr>
<tr>
<td>Amount of lectures</td>
<td>220 (excluding practical, tutorials and small group teaching)</td>
<td>270 (excluding practical, tutorials and small group teaching)</td>
</tr>
<tr>
<td>--------------------</td>
<td>-------------------------------------------------------------</td>
<td>-------------------------------------------------------------</td>
</tr>
<tr>
<td>Clinical experience</td>
<td>Attachments in a GP surgery, to a patients' family and seeing patients at Imperial College</td>
<td>A 4 week attachment in an Imperial College hospital</td>
</tr>
<tr>
<td>Brief academic content of the year</td>
<td>Sociology, patient contact course, epidemiology, communication skills, Problem Based Learning (PBL), basic sciences of the different anatomical systems and the most loved exam covering basic cell biology</td>
<td>This takes more of a clinical approach, specializing more on how the body systems go wrong and therefore the basis of disease. Hence you will cover areas such as cancer, sepsis, pharmacology as well as more detailed anatomy and basic science</td>
</tr>
</tbody>
</table>

**How difficult are exams in the preclinical years?**

In order to progress to the next year, every summative exam must be passed first time or after one re-sit, where the pass mark for each is 50%. The objective of formative exams is to provide the student with information on their progress and examples of exam questions; it does not affect the final grade of the year. When submitting your choices for the fourth year (BSc), your grades in years one and two will be assessed to determine who gets their first choice. In this respect these exams are more important than a simple gateway into the following year and for this purpose second year exams are held with a slightly greater weighting.

As you would expect, medicine is quite a step up from A-levels and consequently the detail and quantity of the workload is significantly increased, with a peak in second year. The reason second year is so much more of a challenge is that the content is far more detailed with less free time to learn it. The increased study leave is much needed and is often still not enough!
Every student differs in their approach to exams and their workload, but I will try to give you an idea of the workload required for both years. In first year I would advise that the student works from the Christmas holidays and revises most days from the beginning of the Easter holiday until the exams to ensure a good pass. However in second year it is essential that the student works throughout the year and to ensure a good pass and to get a merit (top 20% of the year) you must not see the outside of the library for the 6 weeks study period! An estimation of the amount of revision it takes in second year to achieve a merit is approximately 500 hours of revision excluding lectures (!) throughout the year. This is a gruelling schedule of work and it needs to be considered before applying for medicine at Imperial College.

*The number of students who fail each year in preclinical exams.*

There are always some students who fail exams and unfortunately the exams are standardized so the bottom 30% or so will fail at least one exam in each pre-clinical year. Of those, about a fifth will fail the re-sits and consequently they will not be asked back for the following year.

**LIFESTYLE AND EXPENSE**

*Medic Social events.*

As soon as you arrive at Imperial, freshers’ fortnight kicks off to set the tone for the rest of the year. You will be spoilt for choice because our student’s union organizes events alongside those planned by Imperial so you have the most fun in two weeks. There is such a wide variety of events including boat parties on the Thames, black tie balls, BBQs, fancy dress pub crawls, band night, sports night, Paramount comedy, themed parties including bar FTSE, beach and salsa & cocktails, and that is just from the medics union! Therefore fresher’s fortnight consists of meeting too many people to remember their names, hard partying and very few lectures. My advice would be to go to every event possible and meet
as many people as possible, because these are going to be your friends for at least the next 6 years!

The events planned by students and the student's union continue throughout the year with those such as sports nights, bops, pub crawls, black tie balls, hitch-hiking, travelling and partying around Europe for charity, shows and plays, band nights and much more. The reason these are such good fun is that they are so well attended and the medics really know how to have a good time. These events provide the perfect opportunity to get away from your studies and enjoy the brighter side of medical school.

Most themed parties and sports nights are situated at the medic's bar at Charing Cross hospital – the Reynolds, where we spend much of our spare time. Because the medic's student union own and run the bar there are often special prices on drinks but normally expect to pay £2 for a pint and £1.50 for a spirit + mixer; not bad for London, I assure you. As the DJs at the Reynolds are students there is a mixture of music but it is very much designed to suit everyone, varying from hip-hop to rock. In the Imperial student's union at South Kensington there are often musically themed nights varying from heavy rock to drum and bass, with occasionally pints for £1!

**Difficulty/ease of getting Halls and their good and bad features of each. Tips on how to get the Halls of your choice.**

Students at Imperial College are probably more fortunate than any other student in London based on the quality and location of halls, plus every undergraduate is guaranteed a room. There are 16 different halls of residence, 10 of which are in the exclusive SW7 postcode of South Kensington and one which is literally next door to the Royal Albert Hall! Some halls have beds that are the size 1.5, all have free broadband connection and if you want an en suite then it is very likely you will get one. The price varies from £70-180/week for a twin room to a single en suite room. The application system is different at Imperial than other universities, in that you do not apply to the hall you desire but you apply for which type of room you would like. A hall is then assigned to you with such a room e.g. a single en suite.
Web link to relevant prospectus.

The school of medicine prospectus can be found at:
http://www3.imperial.ac.uk/ugprospectus/facultiesanddepartments/medicine

The medic’s student’s union also has its own website:
http://www.union.ic.ac.uk/medic/cms/component/opt:on.com_frontpage/Itemid,1/

Average cost of living at your university campus per week

The average cost of living on campus per week varies enormously. As a yardstick, the very lowest you would be looking to pay for student accommodation is no lower than £3500 per annum. Some places can reach up to £5000-£6000. As for takeaways, the food in South Kensington is generally quite expensive. The area is not really designed for students – it’s geared more towards tourists and those who have a lot of money to flash around.

Advice that you wish you had been told before applying to your medical school or advice you wish you had been given once you arrived at medical school.

If you are thinking of applying to medical school, the best advice I can give you is to make sure you choose it for the right reasons. There are a lot of people who apply because their parents want them to become doctors. There is nothing too strange with pleasing your parents, but you’ve got to make sure you choose the course for reasons that are right for you. Make sure you enjoy the biological side of science, and that you half understand the work you are given. Once you do reach medical school, make sure you work hard, before you play hard!
King’s College London School of Medicine

(Dineth Sumathipala & Francesca Eddy)

MEDICAL SCHOOL – INFORMATION OVERVIEW

Background

With a population of almost 20,000 students, 2,500 of these in the medical faculty alone, King’s College London has one of the largest and oldest medical schools in the United Kingdom. As of 2007, it has been ranked in the top 25 universities in the world. It is the largest centre of training for healthcare professionals in Europe (nurses, doctors, physiotherapists etc.) and also has a fantastic reputation for its research as well as teaching. The most notable achievement of King’s is relatively unknown and unacknowledged – two scientists’ (Rosalind Franklin and Maurice Wilkins) vital work that proved essential to the eventual discovery of the structure of DNA by Watson and Crick. Another fantastic feature of King’s College is the Gordon Museum of Pathology at Guy’s Campus, housing several specimens, which have been carefully preserved for the benefit of education.

The medical school itself is consists of three different universities in their own right, amalgamated together to form one large faculty spreading over three campuses. These are the Guy’s, King’s and St. Thomas’ schools (all previously separate medical schools). Based in London Bridge, Denmark Hill and Westminster respectively, London is very much on the student’s doorstep!

What is the intake number of students to your medical school?

The current intake for the medical school is 410 students – about 10% of these spaces are for graduates, so an undergraduate has a 1 in 370 chance of getting a place. King’s makes about 600-700 offers every year, ensuring that all places will be filled. Last year there were roughly 6000 applicants for a medical place at King’s, making it the most popular in the UK.
Course length and the requirements of Intercalation.

Whilst the standard 5-year MBBS and 4-year GPEP (Graduate-Professional Entry Programme) are the main courses offered by the medical faculty, King’s also caters for students who do not have a scientific background and also those who have higher academic potential than realised whilst living in inner London boroughs. These programmes (Medicine conversion entry programme and the Extended Medical Degree Programme – EMDP respectively) both emphasise more time being spent on basic sciences; the conversion course aims to cover aspects of A-Level physics, biology and chemistry in considerable depth within one year, whilst the EMDP course splits the first year of the normal MBBS course into two years to allow more time spent on this. Students on the conversion programme will join the first year of MBBS upon successful completion of their foundation year; EMDP students will enter year 2 of the MBBS course after completing their first two years.

An increasingly popular choice by medical students across the country is to undertake an intercalated BSc; indeed, many institutions are now making this a compulsory part of their medical course. At present, however, King’s gives the students the choice to take or forego a BSc course, depending on their academic achievement status.

The intercalated BSc entails taking a year out of the medical course after the second, third or fourth year and pursuing a (potentially) different route of education. The advantages of the intercalated BSc are many – in particular, it allows a student to gain knowledge of research protocol and writing a dissertation, the obtaining of a degree of knowledge in another area of interest and, on a somewhat more pragmatic level, the gain of credits for the forthcoming applications for jobs! Disadvantages are dependent on circumstances – an extra year of teaching means another year of finance, and it also means another year’s delay before graduating and getting a job (and salary). Many students choose a BSc for different reasons, but a large proportion will do it for the status and how it affects their CV. Whilst this is an obvious advantage, a BSc should not be looked upon as such a commodity; more an opportunity to gain something further out of education and pursue one’s interests in depth.
King’s College offers many different BSc opportunities; being a multi-faculty institution, it provides a student with numerous choices both within and outside the scientific realm. The Strand campus deals largely with humanities and can cater for students who may have a thirst for the arts; programmes such as languages and philosophy can be undertaken. King’s also allows its students to leave the university if a programme is not already available at the College and pursue a degree elsewhere before returning for the clinical years. Imperial and University College London are popular choices although it can be particularly competitive as there are limited places for external students.

Faculty tutors – who are they, what they do and what value do they bring to the medical school.

The main faculty tutors known to the pre-clinical students are the heads of years 1 and 2 of MBBS. The “big cheese”, as one may refer to her, is Dr. Despo Papachristodoulou. A biochemist by trade and head of MBBS 1 and 2, Dr. Papachristodoulou may seem scary at first but is regarded (a true quote) as the “guardian angel” of all pre-clinical students and a legend amongst all. Organisation and keeping everything running smoothly seems to be Dr. Papachristadoulou’s job, though we can’t be absolutely certain...

Dr. John Halliday’s is another face which one will be accustomed to seeing after attending King’s College Medical School. Resembling Gandalf in stature and looks, Dr.Halliday is just like Dr. Papachristodoulou in that he will do all in his power to keep us happy and thriving!

Principal teaching methods employed in subject delivery; advantages disadvantages.

Problem-based learning (PBL) is not a commonly used method at King’s – perhaps 5% of the course in total is taught via this method. The rest of the course is taught mainly via lectures (1 hour in length) but also supplemented by practical work, tutorials, and seminars.

Practical work is not just scientific practical sessions in their purest sense, but also the essential dissection sessions in which one has the opportunity to dissect a cadaver and observe the anatomy inside. The opportunity here provided by King’s is priceless and should be taken up unless an adverse reaction is encountered...e.g. if you’re excessively...
squeamish, or can’t stand the formaldehyde! The teaching in these sessions provided by
demonstrators (surgical trainees) and the professors is also essential to understanding
and remembering all the intricacies that come up in the exams! It is also worth noting that
King’s Anatomy department is one of the largest in the country, with a low student:
cadaver ratio.
The other sessions such as tutorials and seminars are also essential if you want to ask
any questions and/or consolidate your understanding of the concepts presented in lectures.
Many students choose not to go to these, but the truth is that key facts will stick in your
head if you go along and participate! They’re there for a reason and are a fantastic
advantage.
The main disadvantage of the King’s approach to teaching is the susceptibility of the
student to lapse into a cycle of memorising and regurgitating. This should be avoided at all
costs, though because not much emphasis is placed on understanding, it can be a
problem. However, understanding in depth is the key to doing well in an exam and reading
around the subject will always help this.

TEACHING AND EXAMS

Assessments taken in and the relative importance of each.

Teaching at Kings is mainly lecture based for the first two years, although dissection, and
histology practical sessions also take place. Several communication skills sessions also
run throughout the year where you get a chance to interview actors with various conditions.
The first term, also know as “phase 1”, covers basic science, some anatomy, physiology
and histology and is their way of easing you in. It can be a rather bitty and is probably the
hardest part of first year although it’s worth persevering, as the scenario teaching is much
better. Each week you deal with a fictional patient usually aptly named something like
“Vera’s vomiting”. From this you then cover the anatomy, pathology, pharmacology,
sociology and other aspects of the condition. Sounds rather complicated but I have to say
it does piece it all together and makes it easier to learn. Second year is more of the same
although the content is harder - especially neuroscience (brain stuff!). The exam weighting
is covered below but as you will see end of year exams make up most of the marks.
These are multiple choice papers lasting no longer than 3 hours each. In year 2 there is also an OSCE (Objective Structured Clinical Exam) which has sixteen 6-minute stations that test your communication and practical skills. The OSCE can be a bit daunting although a lot of the stations are relatively easy. It’s also good to know that you can fail some stations and still pass! The in-course assessment is made up of lots of smaller exams worth no more than 6% each. In both years a wide range of examining techniques are used however year 2 is more essay based. A summary of the breakdown of assessments for years 1 and 2 is given below:

### Year 1

<table>
<thead>
<tr>
<th>Content</th>
<th>When examined</th>
<th>Percentage of final mark</th>
</tr>
</thead>
<tbody>
<tr>
<td>In-course</td>
<td>Throughout the year</td>
<td>20</td>
</tr>
<tr>
<td>Phase 1</td>
<td>May</td>
<td>34</td>
</tr>
<tr>
<td>Cardio-respiratory</td>
<td>May</td>
<td>23</td>
</tr>
<tr>
<td>Gastrointestinal, renal and nutrition</td>
<td>May</td>
<td>23</td>
</tr>
</tbody>
</table>

### Year 2

<table>
<thead>
<tr>
<th>Content</th>
<th>When examined</th>
<th>Percentage of final mark</th>
</tr>
</thead>
<tbody>
<tr>
<td>In-course</td>
<td>Throughout the year</td>
<td>18</td>
</tr>
<tr>
<td>OSCE-practical skills exam</td>
<td>May</td>
<td>12</td>
</tr>
<tr>
<td>Limb anatomy, reproductive physiology, cancer biology and endocrinology</td>
<td>May</td>
<td>28</td>
</tr>
<tr>
<td>Anatomy of the head and neck and neuroscience</td>
<td>May</td>
<td>28</td>
</tr>
<tr>
<td>Genetics, Infectious disease and</td>
<td>May</td>
<td>14</td>
</tr>
</tbody>
</table>
In addition to the core curriculum, three SSMs (student selected modules) are completed. The pass mark for these is 40% and you must pass at least two to enter the clinical years. In year 1, a short project comprising of a 2,000 word essay and a group poster project is completed after exams. In year 2 things are a little more taxing and Tuesdays are allocated to completing two SSMs. One of these is a 6,000 word library project and the other is a taught course, which can be a language (taught at another campus) or a science module. For all SSMs there are a wide range of options allowing you to explore areas in more depth than the normal MBBS course would allow.

**How difficult are exams in the preclinical years?**

Although multiple choice is often seen as the easy option, the papers can be and often are deceptively hard. There is no negative marking, however you have to be confident in what you know to do well. There are very limited amount of past papers available so learning the lectures thoroughly is the key, aided by reading around in textbooks. Fortunately with the lecture-based teaching the majority of the questions are in the lecture handouts and notes. It is however definitely worth learning the detail and specific figures as these often come up. In year 1 you only get roughly a week off between finishing teaching and exams, so you need to start quite early. In year 2 you have 2 weeks although OSCEs take place in the second week. It is therefore little time to cram in all the information and it is really important to use the Easter break wisely. The main challenge with the exams is the sheer volume of information, not so much the depth. I’d say trying to keep on top of things as you go along as it helps a lot.

**The number of students who fail each year in preclinical exams.**

Around 10% fail each year at the first sitting. Although you only have to gain 40% of in-course assessment to sit the exams, nearly all of the content of these exams is reassessed so it’s worth putting the effort it along the way. In the summer exams you must get over 50% in each exam to pass. If you fail one you fail the year. You get two attempts at exams and re-sits for the paper(s) you failed are in August. If a problem outside university caused you to not do as well as you should have, you can apply for
extenuating circumstances although this is stringently controlled and should not be relied upon! In any case, at the very best you will be allowed to take the august exams as a first attempt (i.e. they disregard your May attempt) so it’s worth working hard so that you can have a free summer!

**LIFESTYLE AND EXPENSE**

*Medic Social events.*

The main place where medics go after teaching is Guy’s bar at Guy’s campus. Situated in the basement of Boland House, it was re fitted last year and it a lot nicer than you may expect. Unlike other medical schools where the bar is strictly medics only, Guy’s bar is very much there to serve Guy’s campus and is popular with both dentists and biomeds alike. Also situated in the basement is Inverse our rather infamous club. It is real need of renovation and hasn’t really opened much in the last year or so. Either way I have to admit despite its dingy appearance and very slippery floor I’ve never had a bad time so please give it a chance. Thankfully the Strand campus has in my opinion the best student union in London with the Waterfront bar and Tutu’s club. Both have stunning views over the river and Tutu’s in particular hosts well known bands such as The View, and Ash.

When it comes to medic social events there isn’t really as much as you’d expect. Although we have Medsoc there are few organised events with the exception of RAG, and the Christmas Show. The Christmas Show is a sketch show put on every year just before Christmas. Its very funny although be warned some may find it a little distasteful. The first and last night also include an after party at Inverse. RAG (which stands for Raising and Giving) happens in February and is 2 weeks dedicated to fundraising and fun events. Although the university is working hard to include all students it is mainly medics that don scrubs to take the streets and raise money for the hospital charities. Ragging (as its affectionately known) can be a lot of fun although be warned warm clothes under scrubs are a must. In the evening there are loads of themed events that also raise money and usually involve lots of fancy dress.
**Difficulty/ease of getting Halls and their good and bad features of each. Tips on how to get the Halls of your choice.**

When you apply for halls you rank your preferences, which then gets put into an electronic system that allocates places. There is no way to beat the system as it were although if you do get your bottom choice there are usually lots of students wanting to swap when you arrive so check the boards in reception if you keen to move.

**Great Dover Street Apartments**
This is probably the nicest hall at King’s however I would warn that the en suite has an interesting feature which allows you to shower with your toilet. It’s only 10 minutes from campus which is great and there are usually lots of medics. There are certainly a lot of students around with over 700 rooms however the flats which usually have 7 people have a front door meaning that you can become isolated if you don’t have very social flat mates. I’d say it’s great for ease and facilities although with so many students it can feel a bit daunting.

**Stamford Street Apartments**
With a similar layout to Great Dover street Stamford Street is another popular choice. It takes about 30 mins to walk in to campus or you can get the bus from outside. Probably a more vibrant place with a more law and humanities students, there aren’t usually very many medics here. This be a good thing but bare in mind that first year medics have a much heavier schedule than other courses so you may find it distracting that many of your flat mates never seem to start before 2 o’clock. Either way it’s really central and easier to get back to after a late night, which can be a big plus.

**Wolfson House**
This hall is literally on campus located above Greenwood lecture theatre where nearly all the first and second year lectures are held. It’s a bit older than Great Dover street and
doesn’t have en suite so don’t expect the most modern of facilities. Floors of 14 or so students share one small kitchen which can get a bit cramped. Its location on campus and next to London Bridge does however mean its easy to get back to after a late night and means you can literally fall out of bed and into lectures.

King’s College Hall
Located in Camberwell this hall is a bit out of central London. Its also important to realise that Camberwell isn’t the nicest of areas so you will have to be more careful coming back on our own at night. This is however King’s only Catered hall and from what I’ve heard the most social. The communal dining hall is a great place to make friends and the on site bar is a definite plus. Transport links into central London can be a bit patchy with no nearby tube. There is however Denmark hill station from where you can get a 12 minute train to London Bridge and as of this year a hospital shuttle bus from the nearby Kings Hospital up to Guy’s.

Brian Creamer House
This is king’s smallest hall of residence with only 69 students. Its located near Lambeth North which is roughly a 25 minute walk in to Campus. With such a small place it is nice that everyone knows everyone and it can be a lot less daunting than other halls. It is however probably a little more sedate.

Hamstead Hall
Located in Hampstead in north London it takes a good 45 minutes on a bus and then tube to get into campus in the morning, which can be a pain in rush hour. The halls themselves are however quite nice, situated in a nice area which is relatively easy to get back to late a night from central London. Not very many medics live here although it’s a social place and unlike other halls you can easily go into other kitchens on other floors.

Intercollegiate
The majority of intercollegiate accommodation is near King’s Cross and Russell Square (although Nutford house is near Marble arch, and Lillian Penson is in Paddington). All bar Lillian Penson are catered and most people I know who lived in Intercollegiate halls had a great time. There are very few King’s medics but most people enjoy the chance the mix with students from other universities and with so many people around its very social. Although its more convenient to get back to from central London you must bear in mind that the Northern line is packed at rush hour and although its only 11 minutes on the tube it can be a bit of a stressful start to the day.

*Common nights out – a guide to a good night on the town!*

**Its London!**

**Monday**

Vodka Island at Tiger Tiger, which several rooms playing different types of music so you should find something you like. This is usually popular among preclinical students.

Entrance £5 before 10 £6 after

Beer £2 (becks)

Single £1.70 (vodka plus mixer)

**Tuesday**

Ministry (milkshake). Again this super club offers an indie room, cheese room and R’n’B. Usually its mainly freshers that go.

Entrance free before 11 £5 after

Promotions vary on drinks i.e Corona DJ Competition where it’s £2 for a Corona

**Wednesday**

Guy’s bar and on to walkabout at Temple. Most medics who do sport and even those that don’t head to Guy’s and either stay on or move on to walkabout. Music is standard cheesy pop.

Entrance free

Beer 1.90-2.10
Single and mixer 1.50

Temple Walkabout
Music is cheesy pop.
Entrance free with a survival card which costs £5 and lasts all year
Beer- £1.50 (Carlsburg)
Single and mixer £1.50 (vodka red bull)

Thursday
Aside from band nights Tutu’s hosts Fuse and Truffle Shuffle

Truffle Shuffle is where King’s goes mad for the 80’s. 80’s dress is a must but make sure you get your ticket early. Popular among all years
Entrance-£5
Drinks-as Guy’s bar

Fuse plays UK garage, hip hop, R’n’B, Swing and Bhangra. Usually sold out it’s a big night with Asian network broadcasting from one of last years nights. This one generally appeals to mainly Asians.
Entrance-£6
Drinks-as before

Friday
Phase at Tutu’s. Cheesy pop with lots of classic tunes. All ages go for this although it is usually only first years that go regularly.
Entrance-£6
Drinks-as before

Saturday
Saturday tends to be a quieter night where students often head home, chill out or go out in London.

Web link to relevant prospectus.

http://www.kcl.ac.uk/ugp09/programme/85

Freshers week unmissable, okay or definitely missable?

Freshers week at King’s lasts 2 weeks but aside from the freshers fair there aren’t any daytime events so it’s worth making the effort to get to know people at halls. Most people move into halls on the Saturday before freshers week begins and the senior students usually organise a bar crawl or trip to the pub so everyone can mix and get to know everyone. Don’t worry though if you do commute from home because most courses start during freshers week and the first event held on the Monday known as the “the badge party” (design and wear your name) is usually an easy way to chat and meet lots of new people. The freshers fairs held at Guy’s and the Strand are also a great place to get involved with what’s going on at Kings. There are so many sports teams and societies that there really is something for everyone. Volunteering is also pretty big at King’s so if you’re up for giving up some time there are loads of really worthwhile projects to get involved with.

The other evening events tend to focus around fancy dress and usually include a school disco, beach party, boat party and the freshers ball. Although a lot of events are at Inverse and Tutu’s tickets do sell out quickly so it’s worth getting sorted early. I’d say that the themed nights are usually really good fun although I’ve heard mixed reviews from the boat party-just because if you’re not really enjoying it you can’t leave! Freshers ball has in the past been a bit of a let down although it’s a good chance to dress up.

Average cost of living at your university campus per week

Living in London is expensive with rent being more than anywhere else in the UK. Travelling in from home obviously saves this cost although travel is expensive. Students
get 1/3 off travel cards although a monthly zone 1-2 travel card for the tube still works out at £64.90. You can however register your student rail card with oyster and cap your daily fare at £3.10 at off peak times and monthly bus passes are cheaper (£35). In terms of general living cost, costs are probably similar to rest of the UK with going out probably more expensive. Below is a typical breakdown of typical weekly expenditures for a student able to walk into campus.

Rent-£90-£130 
Travel-£15 
Food-£25 
Going out-£20
Not forgetting other expenses (bills, books, sports kit, trips, presents etc)

Advice that you wish you had been told before applying to your medical school or advice you wish you had been given once you arrived at medical school.

Firstly living and studying in South London is fun and the clinical experience is excellent however it’s not for everyone and if you are after a campus type university this probably isn’t for you. Secondly don’t be put off by the year size, everyone is the same boat and it’s nice too have such a diverse year. Finally (this probably applies to all universities) it really pays to keep on top of the work from day one, doing well is down to lots of hard work.
Liverpool Medical School

MEDICAL SCHOOL – INFORMATION OVERVIEW

Background

The University of Liverpool is one of the UK’s leading universities- renowned for its teaching and research excellence. Awarded as the European Capital of Culture 2008, Liverpool is the place to be - a thriving, vibrant city- and the University is at the heart of it all.

Liverpool is the original “redbrick” university – originates from the distinctive appearance of the Victoria Building, built in 1892. It has

- One of the largest life sciences communities in the country, with schools of medicine, dentistry, biological sciences, tropical medicine and veterinary science.
- The 1st in the world to establish a School of Tropical Medicine.
- A £4 million Medical Educational Centre which includes lecture theatres and seminar rooms.
- A £4.5 million Centre for Excellence in Developing Professionalism in Medical Students developed.
- The Human Anatomy Resource Centre (HARC)

The resource centre provides anatomy-teaching facilities which are at the cutting edge. Furthermore, there are specimens, anatomical models and histological material together with audiovisual resources- available for learning purposes. HARC is a national and international model of best practice and many medical schools in the UK and overseas are moving towards the creation of similar resources.

What is the intake number of students to your medical school?

Each year there is an intake of 276 home students + 24 overseas students into A100 course. Also, an addition of 32 graduate entry (A101)
Course length and the requirements of Intercalation.

It is a 5-year MbChB medical course. Studying an intercalated degree is optional at the University of Liverpool. This is brilliant!- as it gives flexibility for those who are currently indecisive if they should venture into it. Students may take a year out from the medical programme to study a topic related to medicine at BSc, MSc or MPhil degree level. In addition to the usual subjects such as Anatomy, Biochemistry and Psychology, students can also undertake intercalated degrees in International Health, Health Care Ethics and Public Health. This can be done at the University of Liverpool or students can even opt to study at another university. Undertaking an intercalated degree may be seemed time-consuming for some, whereas some may find it knowledge-fulfilling. The fact that BSc may also add further credits in future job applications, have been a great temptation for many.

Faculty tutors – who are they, what they do and what value do they bring to the medical school.

There are 2 types of Tutors.

- Each student is allocated a Personal Tutor. One-to-one meetings are held at regular basis depending on request/need. Tutors are responsible for the welfare of students, and will endeavour their very best to aid in any matters – personal counseling, education, financial matters- you name it!
- PBL tutors (approximately a hundred members of the Faculty) – They function as a facilitator in the PBL tutorial and encourage learning opportunities.

Principal teaching methods employed in subject delivery; advantages disadvantages.

- Integrated problem-based learning (PBL) curriculum
- Reduction of factual overloading
- Extensive early clinical skills training (begins from 1st year)
- Early introduction of communication skills training (begins from 1st year)
- Greater emphasis on community-based learning
- (General Practitioners, Community organisations)
- Early patient contact (begins from 1\textsuperscript{st} year GP placements)
- Optional studies (Special Study Modules)
- Regular constructive feedback on progress
- Final year shadowing of a Foundation Year Doctor
- Pastoral care available across all years

One of the key features of the medical programme is Problem-Based Learning (PBL).

What is PBL?
An educational process that encourages students (working in small groups) to learn through curiosity and to seek out information for themselves. If you’re as curious as a cat, PBL is for you!

Features of PBL
- Modules are linked and progress logically
- Students build upon prior knowledge
- Students identify their own learning needs
- Students take responsibility for their own learning with support from PBL group members and tutors
- ‘Student-centred’ learning,
  - This contradicts the usual ‘spoon-feeding’ culture during school education where students are normally told which topics will be taught and how they should learn them.
  - Students will identify areas that they are not wholly familiar with and take greater responsibility for the way in which they learn.

Structure of a typical PBL module
Presentation of the problem
- Small groups of students meet with their tutors where a relevant clinical scenario, ‘the problem’, is presented
• The group explores the problem by applying their prior knowledge and identifying areas about which they need to learn more
• Tutors facilitate the tutorial
• Students leave the meeting with group learning objectives which are used as the framework for study

Students achieve their learning objectives by using a variety of learning resources including:
• Plenaries (lectures):
• The Human Anatomy Resource Centre (HARC)
• Libraries
• Computer-based learning facilities
• Other parts of the programme that support learning, eg seeing relevant patients

Checking progress
• Groups meet half-way through the module to discuss what they have learned so far
• Students have the opportunity to raise any surprises or problems they may have encountered
• New learning objectives may emerge
• Further independent study follows

Reflection on the problem
• Groups reconvene toward the end of the module and the problem is reviewed in the light of what has been learnt.

Why use PBL?

Traditional lecture-based medical programmes have been criticised for encouraging students to acquire knowledge without understanding how it is applied in clinical practice. PBL increases students’ understanding by integrating the learning of basic medical science with clinical practice early in the programme (from 1st year onwards).
This is superb as it stimulates and maintains student’s interest instead of overwhelming them with facts.

Furthermore, PBL develops lifelong learning skills. In order to keep pace with the rapid rate of change in science and medicine, doctors need to update their knowledge continuously and know how to apply their knowledge to patient care throughout their careers.

Year One
An introduction to the science and practice of medicine through a series of PBL clinical cases

Biomedical sciences such as Biochemistry, Physiology and Anatomy will also be explored. Introduction to clinical and communication skills training throughout the year prepares students for the clinical placements which start towards the end of the year. There will be a greater emphasis on learning medicine in the community and early patient contact.

Years Two, Three and Four
Diagnosis and management of illness.

Students progress through four stages:
- Understanding how healthy bodies normally develop and function
- Learning to recognise health problems
- Developing skills needed to diagnose illness and disease
- Knowing how to manage patients

Hospital and community-based clinical experience provides support for students’ learning and opportunities to interact with patients. Patient contact also enables students to understand the psychological and social aspects of health care.

Students complete their final written assessments at the end of Year Four.
Year five
Intensive clinical experience

The final year is spent gaining intensive clinical experience in hospitals and the community to prepare students for their careers as doctors.

Other features of the programme

Community Studies Unit
The Community Studies Unit teaches the Community Course in each year of the 5 years of the MBChB course. Their educational model integrates clinical placements in community GP practices which are supported by small group learning supervised by practising clinicians.

Opportunities to study medicine abroad:
Clinical elective
All students undergo a five-week clinical elective in which they explore a branch of medicine in greater depth. Most choose to undertake their electives outside the UK, to observe how medicine is practiced in another country and to experience a different social, cultural and physical environment.

Student exchange programme
Opportunities also exist for students to spend three months or more studying at another European Medical School. The University of Liverpool has strong links with universities in Sweden, France, Germany and the Netherlands.

TEACHING AND EXAMS

Assessments taken in and the relative importance of each.
Assessments are based on the programme content for each year. This includes a combination of EMQs, MCQs, and short structured questions. Summative assessment
takes place each year. In addition, students must satisfactorily complete the Special Study Modules (SSMs).

1st year assessments will be have a stronger emphasis on a more detailed A-levels standard. This is because it aims to bridge the education level of college and the university. Assessments will later then appear to be more challenging with years. Therefore, it will definitely be worthwhile to have a consistent studying regime. As aforementioned, the final written papers will be in Year 4 – the most hectic years of all!

*The number of students who fail each year in preclinical exams.*

Failure rate is variable as exams are criterion referenced. However, an average of 20 students would fail first year (about half of whom would be allowed to re-sit the year). The following 2nd year fail rate is generally lower - 10 per year on average.

**LIFESTYLE AND EXPENSE**

*Medic Social events.*

The existence of Liverpool Medical Students Society (LMSS) will always add spice to any life of a mundane medic. Being a member will throw you into endless events- from medical education, sports, socials, formal balls, down to pub-crawling! (No, it’s not always about drinking!) Our ice-breaking freshers’ outings will kick off each new year. Come and discover what amazing events are laid out for you!

*Difficulty/ease of getting Halls and their good and bad features of each. Tips on how to get the Halls of your choice.*

**Catered Residences**

The Greenbank Halls and Carnatic Halls are located at Mossley Hill which is off campus. Both Greenbank and Carnatic halls are catered halls i.e. your mains meals are provided in your accommodation package! For those who cannot be bothered to cook can opt to stay here. The halls may be a wee bit far away but there is now a 24-hour bus service that runs between these halls, the University and Town which costs less than a pound for each trip. (It costs even less with a semester-ly bus pass which allows you unlimited rides on the
bus). And if you’re looking to meet people from all over the world, then this is the place you’d want to be! Many international students would choose to stay here in their first year, because of the opportunity to gather and meet people of all cultures and walks of life during organised events such as Christmas parties and sports activities.

Negatives: The only problem you may encounter if you stayed at Greenbank/Carnatic is to having to move out of your rooms during Christmas and Easter break. Oh – and also the early morning bus queue!

Self-Catered Residences
Mulberry Court / Tudor Close, Philharmonic Hall and Melville Grove (for postgraduates) are located on campus and takes about 10-15 minutes by foot to get to lectures and about 20 minutes to get to town. Each flat/house has six to eight fair-sized single rooms, 2 bathrooms / toilet, kitchen and a common area. Laundrette services are available on site except for Tudor Close residents who have to use the laundrette in Mulberry Court which is located opposite the road. The common area which includes the kitchen, bathroom and toilets are cleaned and the kitchen bin is cleared weekly.

The cleaners will not enter your rooms, so your room is your personal responsibility. The maintenance people will only enter your room upon permission should you find anything in your room broken or needs fixing.

Advice: Your personal belongings are insured; but to avoid being the target of thieving and burglary, do remember to lock up your door and windows and draw the curtains when you leave the room! Computer locks can be useful in preventing your laptops from being stolen.

Negatives: Although the flat/house is cleaned on a weekly basis, you are still expected to be responsible in keeping the common area clean. There is usually a vacuum cleaner in the hallway cupboard. Dirty dishes, cutleries, pots and pans which are piled up on the sink may sometimes be thrown away by irritated cleaners. Washing up dirty dishes and pans are not in their job description. So be warned!
If all the University accommodations are taken up, fret not! There are still plenty of private halls at affordable prices and accessible locations to choose from.

PRIVATE ACCOMMODATION

Agnes Jones House; is located on Catherine Street, includes all the basic facilities and furniture. There is a choice for Standard or Premium flats. The compound is fenced up and there are security cameras set around the compound. However, word of advice is still to keep windows and doors shut when you are not in; especially for flats on the ground and first floor. The flats are also cleaned on a weekly basis by cleaners, however it is also expected that you be responsible in keeping the flat clean.

Great Newton Hall is located on London Road, opposite TJ Hughes. All rooms at Great Newton have en-suite bathrooms and the basic facilities. Compound area is fenced and pretty secure. It is also in close proximity to the Medical Department, the Royal Liverpool Hospital, the Dental Hospital and the Brownlow Hill Clinic as well as the Civil Engineering Department.

St. Andrews is located off London Road (right next to Great Newton Hall) and is in walking distance to Lime Street Station itself. The residence offer 2-6 bedroom flats, including kitchen and bathroom. The smaller flats which house less people offer more privacy and bigger rooms.

Grand Central is located right next to Lime Street Station and the city centre itself. It is about 10 minutes walk uphill towards campus, however if you don’t mind ‘hiking’ up in the mornings, it makes for a good wake-up call before your morning lectures. (No good if you’re running late though, you’ll be out of breath!) It also offers rooms with en-suite bathrooms, and its huge common room (fully equipped with sofas, pool table and TV) and on-site gym makes it a favourite for many students from all four Universities in Liverpool.
There are several other student accommodation halls in Liverpool i.e. Opal Court on London Road (which is newly built), Prospect Point on Prescot Street, Cambridge Court and Lark House on Mulberry Street.

**General Caution:** All the halls mentioned above are fitted with smoke alarms in bedrooms and hallways. When cooking, it IS advisable to shut the kitchen door and operate the exhaust fans.

There is another alternative to staying in Student Halls. If you’d like to save on rent, get a few friends and rent a house together! A four-bedroom house in Liverpool typically costs £40 per person, per week. However, IF you opt to stay outside, you’d have to account for utility bills such as electricity, water, gas and heating as well as broadband. Insurance is not provided automatically as well. To search for houses to rent, visit [www.lsh.liv.ac.uk](http://www.lsh.liv.ac.uk) for more information.

**Common nights out – a guide to a good night on the town!**

If you’re ‘Nocturnal’…..

You’ll find nightlife in Liverpool so overwhelmingly bustling, diverse, and vibrant that you are *compelled* to give in. Whether what you want is calorie-burning clubbing or the more low-key pubbing, Liverpool is surely students’ paradise.

Every student should go to Double Vision at the Student’s Guild (Mondays) at least once, but especially at the start of the term for cheap drinks and their modern tunes (the main room plays a variety of hip hop, dance, and sometimes with a bit of cheese thrown in too). And if you haven’t had enough of cheese music, then you can always come back on Saturdays when they have Time Tunnel, for hard-core cheese lovers.

Hardman Street is where you’ll find great music, great pubs, and great kebabs. Bumper is a great, relaxed bar with nice surroundings. They play indie music on Wednesday with live performances and on weekends the backroom is opened and the DJs play hip hop and soul music.
Magnet, on the other hand, is a smaller but more intimate place, focusing on soul, hip hop, trance and house, since 1964! The unpretentious, dimly-lit, and velvet-rich place is split into 2 levels, giving a variety of DJs and is popular among students and young urban groovers. Come to Hannah’s Bar for a cozy New York style experience. The cocktail mixes are top notch, the kitchen offers delicious fish, beef, and chicken dishes, and the live music is just awesome – from jazz to rock, funk to soul, you name it. Outdoor seats are also available when weather’s permitting.

Move on to Concert Square where most of the best local clubs and bars are situated, you just can’t miss Modo. Entry is free, food is served during the day and there is outdoors seating day and night, all year round. The rich soul and dance music is popular with the breakdancers who usually come every Friday, be prepared to watch their amazing routines!

Camel Club is by far, objectively speaking, the best hip hop/RnB place in Liverpool. It doesn’t really have a distinctive dance floor, but you’ll find that people don’t need dance floors to dance, when the music is great. Upstairs is a chill-out lounge area- ideal for chatting. This is Liverpool, at its best!
MEDICAL SCHOOL - INFORMATION OVERVIEW

Background

The School of Medicine, Health Policy and Practice was formed in August 2001 through a merger of two previously existing components. The resulting new School has a large number of active NHS secondees and honorary appointees - from a wide range of disciplines. The School is relatively new but is already establishing a reputation for exciting and innovative approaches to education supported by a strong and rapidly developing research programme. As part of the Faculty of Health it has a growing emphasis on interprofessional co-operation in teaching and research.

What is the intake number of students to your medical school?

In September 2007 it was 155

Course length and the requirements of Intercalation.

The course (A100) is an innovative and highly integrated five-year MB/BS programme. It is six years for the A104 programme (Medicine with foundation year). BSc is not compulsory although intercalated degrees are planned for the end of year 4 and will result in the completion of an MSc.

Faculty tutors – who are they, what they do and what value do they bring to the medical school.

The Faculty tutors are lecturers and senior lecturers, mostly clinicians from the hospitals, GPs from surrounding medical practices and research fellows. There are also nurses, microbiologists, epidemiologists, scientists, medical statisticians.
Their jobs are to teach the students in form of lectures, seminars and clinical tutorials, assess and organize exams.

**Principal teaching methods employed in subject delivery; advantages disadvantages.**

The curriculum follows systems based units throughout all the 5 years integrating theory and clinical skills. The main teaching method at UEA is PBL (problem based learning). Students are divided into groups of 10 to discuss weekly case scenarios with the guidance of a tutor and to obtain the answers to solve the scenarios incorporating all aspects of medicine. During the week, lectures and seminars relevant to the learning objectives, are given and one day is spent in General Practice to consolidate the knowledge in a ‘real world’ environment. One third of the teaching time takes place during block placement in Secondary Care where students attend clinics, surgical operations, ward rounds, clinical skills teaching and also have the opportunity to talk and examine patients for themselves.

PBL is based on principles of adult learning theory, including motivating the students, encouraging them to set their own learning goals, and giving them a role in decisions that affect their own learning.

It is an excellent way to integrate students and make them work independently and as a team and spread the workload. It allows active learning, improved understanding, and retention and development of lifelong learning skills. PBL is fun for students as we all learn and teach others in different ways and having the opportunity to learn from your peers is always an enjoyable experience. The process requires all students to be engaged in the learning so even the quiet students will be louder by the end of PBL sessions.

Some disadvantages include that students are reliant on each other for their learning and not everyone puts the same effort so it can be unorganised. Many students need access to the same library and computer resources simultaneously and they may be unsure how much self directed study to do and what information is relevant and useful.

**TEACHING AND EXAMS**

*Assessments taken in and the relative importance of each.*

The assessment is divided into several components.
• End of unit OSCE (Objective structured clinical examination) and End of Year OSCE
• Analytical review (AR)
• Student selected studies (SSS)
• Portfolio

At the end of each unit students undertake:

• End of unit OSCE usually comprising 6 or so stations, examining various skills such as clinical, communication and medical knowledge.
• SSS presentation of a topic of their choice selected from a list of domains (anatomy, biochemistry, epidemiology, ethics, health economics, law, physiology, psychology, sociology). The presentation is exhibited to clinical tutors and peers followed by questions and answers. From year 3, students can choose a topic from a wider range of areas that do not have to relate to medicine such as languages, history, astronomy etc.
• Formal written paper appraisal (AR). The AR is a compulsory piece of work in years 1-3 for each unit which requires the student to critically analyse a medical paper usually taken from the BMJ (and hence the teaching of research and statistical methods). In years 4 and 5, students design and conduct their own research project.

During the year, students must provide a professional portfolio in the format of a maximum 2000 word essay describing their experiences, emotions and what they have learnt from them.

At the end of the year, there is an additional Integrative Period (IP) OSCE consisting of between 18-24 stations testing the clinical skills learnt throughout the whole year. The written paper is also at the end of the year and it is divided into two parts:

1. EMQ (Extended Matching Questions). 100 questions are presented to the students in the style of multiple choice questions.
2. SAQ (Short Answer Questions). One week before the written exam, the students are given six PBL-like scenarios to read and brainstorm in a PBL manner. In the
exam, only three of them appear and each scenario is accompanied by five questions on a broad range of topics such as law, biochemistry, genetics, physiology etc so that all the domains and concepts from the whole year are covered.

All assessed work during the units is awarded marks of a pass/fail nature. The IP assessment and the portfolio are awarded distinction/pass/fail. All forms of assessment are of equal importance and students must pass each one to progress through the course.

The difficulty of exams is a very individual concept depending on the student’s previous experience, motivation, time devoted to studying and chosen resources to prepare. Different assessments require different duration to prepare, roughly 4 weeks for the end of year written exam would be an appropriate time.

The failure rate varies in each year but fail for the whole year does not mean failure of just the written paper but the other components such as AR and SSS.

LIFESTYLE AND EXPENSE

Medic Social events.

The Medic Social Events are fantastic and filled with fun and enjoyment. There is a broad range of events to suit each taste. The Balls are an amazing experience, fresher’s ball, Christmas ball and Spring ball where all the years enjoy lovely food and drinks, chocolate fountains, casino games and music that gets everyone on the dancefloor. There are also themed nights such as Sport’s Night, Fashion disaster, Doctor’s Mess (held at the Hospital), Boobs and Balls (pink and blue dress code).

There are also events during the day- paintballing, barbeques and many trips. Our famous trip to Barcelona where 20 medics from all five years ran 26 miles in the Barcelona marathon was an unforgettable experience. The next is in Berlin in September and our medics are training hard at the moment.
The events were very enjoyable as it was a chance to meet people from all the years in a relaxed environment and the prices for these events were low so opportunity to attend was given to all.

Difficulty/ease of getting Halls and their good and bad features of each. Tips on how to get the Halls of your choice.

All residences (except Mary Chapman Court) are located within a 10 minute walk of the centre of campus and a wide range of excellent facilities including shops, banks, and places to eat, drink and socialise. All University residences are self-catering and provide around 3500+ fully-furnished centrally-heated study bedrooms(with a fast internet access) grouped around a shared kitchen. Over two thirds of our rooms are en-suite, with own shower, toilet and washbasin. All rooms have a single bed, wardrobe, desk with chair and fitted shelving. Each kitchen is equipped with a refrigerator, freezer, and oven or microwave oven.

The en-suite rooms on campus cost £92.96 per week, but there is also a cheaper En-suite option at £81.27 per week in the University Village 5-10 minutes from campus and a number of rooms in Standard accommodation from £57.75 per week on campus. Rooms are let on a minimum 38 week licence beginning in September. Students do not have to empty rooms for Christmas or Easter periods. If you are living in halls, you will most probably live with other health students (medics, nurses, physics etc).

There is also an excellent provision of privately rented houses, flats and bed sits. The average rent is 250 a month and most are located near the University in the popular student area called ‘Golden Triangle’.

Common nights out – a guide to a good night on the town!

There are many different nights in Norwich city and on campus.

The LCR (lowest common room) is the University’s nightclub and it is famous for its themed night which are on Tuesday where students enjoy dressing up into all kinds of bizarre outfits. Saturday night is also a great night in the LCR, retro, 90s nights, hip-hop and R&B, Pam’s House.
The city boasts an excellent club and bar scene. The famous nightclub Mercy offers student nights almost every night of the week with commercial dance and urban music with free entry to NUS holders before 11 with selected drinks 1.50 and other cheap student deals. Optic nightclub is a popular choice for students too especially on Mondays for funky house, DnB, old skool, and soul with drinks 1.50 all night and Wednesdays for R’n’B and Hip Hop. The ever so popular Brown sugar on Thursday nights is held in Liquid nightclub playing the best of R’n’B, Hip hop and Bhangra for UEA students with free pre drinks in Chicago Rock Café.

Po Na Na nightclub offers more alternatives with alternative rock, garage, indie, reggae, funky house and break.

*Web link to relevant prospectus.*

The web link to the current prospectus is: https://www1.uea.ac.uk/cm/home

*Freshers week unmissable, okay or definitely missable?*

Medic’s freshers’ week starts one week early than the University’s freshers week so double the fun.

Friday: Arrival at UEA and Ice breaker with white T-shirt where everyone wrote some things about themselves

Saturday: Tour of Norwich city during the day and Doctor’s Mess with free drinks all night long

Sunday: Karaoke and disco in the Student union bar

Monday: Horse racing

Tuesday: Pub crawl ending in a nightclub

Wednesday: Cheese and Wine Evening meeting your mentor (your mummy/daddy). Everyone can request a mentor - a medic in a higher year who has been through exactly what you are going through and are there to talk to about anything you like.

Thursday: Fresher’s night at the LCR (The University’s nightclub)

Friday: Fresher’s Ball at Carrol Road Stadium with casino tables and orchestra …start of the University’s freshers week.

Get involved in as many events as possible as that is the best way to meet people and make new friends.
Advice that you wish you had been told before applying to your medical school or advice you wish you had been given once you arrived at medical school.

It is very important to understand that achieving a place at medical school is difficult mainly because there are so many excellent applicants and so little places. Before applying to medical school, it is essential to really find out why you want to do medicine and what begin a doctor is like. Find work experience and voluntary placements not because you think it is part of the criteria and will get you that place but because you want to find out for yourself what career you are letting yourself in for and if you can handle it.

Once I arrived at medical school, useful advice would have been to learn to balance my social and academic life and not let the two interfere. For example beginning a hobby or a new sport is a fun way to relax and keep fit as well as attending all the night parties and club nights. In terms of academics, have an open mind and appreciate and value your peers’ opinion and knowledge as you will be surprised how much you learn from them.

Make the most of fresher’s week is one big piece of advice..just dive head first in to the fun and games of Fresher’s week (organised by MedSoc). No matter what your past; whether you’re a school leaver, already hold three degrees and/or have four kids!
My Journey into medical school
(Amit Chauhan)

I am currently a 3rd year medical student at Imperial College London, School of Medicine. Imperial College London is considered one of the most prestigious academic establishments not only nationally but also internationally, ranked 3rd overall in the UK by the Sunday Times and 5th in the 2007 THES World University Rankings.

Unfortunately, with Imperial College London’s illustrious reputation, comes a negative urban legend: that it does not treat equally candidates from ‘less fortunate backgrounds’. By less fortunate, I refer to those who have come from the working class as well as those from ‘poor’ postcodes or even poorly performing comprehensive schools.

My journey into medical school has been a long and challenging one, starting at one of those aforementioned ‘poor’ schools with performances well below the national average. The pass rate of my year was 23% putting it in the bottom 5% of the country. When I was a pupil there, the majority did not even take up A-levels and from those who did, most did not go on to university.

Being considered clever was met with hostility ranging from being called a ‘geek’ to the more serious problem of physical abuse. However, for the few of us that had the capability to pursue a more academically challenging path, such clashes only urged us on.

My desire was to go to medical school, and so I took the usual A-levels – Biology, Chemistry and Maths. Although the school’s sixth-form advisors were very supportive of my decision and gave me as much help as they could, it was clear to me that they did not share my optimism and goals. Some of the teachers explicitly expressed their scepticism towards my chances of successfully entering subjects demanding AAB/AAA at A-level. This was only the start. The head of Chemistry announced he was to retire before my AS year had even begun, leaving us with only one other teacher capable of leading us to that much coveted acceptable A-level standard. For much of those two years, we were without
a teacher for Chemistry, which meant we had to go away and learn for ourselves. Of course this never happened, I just played a lot of football.

Part way through the course more problems arose when our only Biology teacher suffered health problems and we were without guidance for yet another subject. This left us in a very awkward position as we had never been taught how to ‘self-teach’ and having always been spoon-fed, we felt hopelessly alone without any guidance and advice at such a crucial period of our academic lives.

Along with all these ill-timed hiccups, the unyielding scepticism of my peers and superiors led me to seriously consider another career path. My confidence had taken a serious hit. Not wanting to seek any advice from the school, I sought it from my father; he advised me to pursue a degree related to computer programming as I seemed to know my way around a computer pretty well.

The clearing process was long. Having to decide which other courses were compatible with my abilities and interests as well as deciding which university would be most suitable was heart breaking; my huge hope to become a doctor was still in the back of my mind. Pressure from the pessimists surrounding me led to my decision not to apply to the prestigious universities I had dreamed of attending. However much to my relief, a few of the universities that I had initially rung, told me that my grades were good enough to apply for the more established red brick institutions. I quickly contacted some of the top 20 ranked universities and received offers from the likes of St. Andrews and Newcastle University to study Computing Science.

Throughout my first year at Newcastle I met many medical students and began to realise that my dream to be a doctor had not died. Having spoken to several medical admissions advisors, it became apparent that I would not get into medical school based on my A-level results alone; I was therefore encouraged to switch to a biological sciences degree, which would strengthen my application.
This was a tough decision for me at the time as my parents thought I was chasing a lost cause and refused to fund me until they saw that I was making progress. Nonetheless, I followed my heart and changed at the end of the year to Biomedical Sciences.

Upon the completion of my course, many of my course mates went on to medical school. All the universities that I had applied to, once again, rejected my application without an interview. At this point in time, I had undergone the application process three times but all to no avail. Of course, this was extremely disheartening as I had only changed courses on the premise that it would increase my chance of getting into medical school. Still not wanting to give up, I researched all windows of opportunity available to me; I even considered private medical schools, as well as those in Europe.

Following a year out working and travelling in South East Asia, I resumed my quest to get into medical school and persistence paid off when I applied to a Pre-Medical course, at Thames Valley University. The course was intense but it offered the possibility of six places to Imperial College, School of Medicine. Despite the competition for places, my focus remained upon one thing only – to fulfil my potential and secure an interview. Having sacrificed everything for this quest I achieved the highest grades in my year, secured and succeeded in the interview and received the offer I had been waiting for such a long time.

Here I am today, studying at Imperial College London to become a doctor. As you will be able to tell no doubt, the journey was very challenging emotionally, financially and even physically. It certainly was no easy ride and I made many sacrifices along the way.

If pursuing a medical career is your dream, follow it and believe in yourself. I strongly believe that without failure you cannot understand nor appreciate the little successes that may come your way. Moreover, if you do find yourself from what may be termed a ‘less privileged’ background, then do not shy away from applying to the more elite schools. They admire such an application and are always willing to give you an opportunity,
provided you meet the minimum academic requirements. Financial strength and social standing is of no importance. They seek more than someone who can read a book and regurgitate it. They search for those who take up extra-curricular activities and those that take active measures to bring out the best in themselves. Success comes to those who forge their own path through nothing but dedication, resilience and persistence.