Clinical Schools
Information Handbook
2016
Background

The Tasmanian University Medical Students Society (TUMSS) believes that students have the right to make an informed decision regarding which clinical school they attend for the fourth and fifth years of the Bachelor of Medicine and Bachelor of Surgery (MBBS) course. It should be noted that all students possess unique attributes and therefore unique reasons for favouring one clinical school over another. The information presented here is a synthesis of that information provided by the Tasmanian School of Medicine (TSoM) and of representative student views. It should be noted that TUMSS believes that all clinical schools will provide a superlative medical education, and that, on balance, all clinical schools will provide an equal standard of education. The current TUMSS Clinical School Policy is available at [www.tumss.org.au](http://www.tumss.org.au). It should be noted that this differs slightly from the TSoM clinical school allocation policy.

Disclaimer

TUMSS takes all care but no responsibility for the accuracy of the information presented here. Students have a responsibility to ensure that information upon which they rely is verified by TSoM or other agencies. TUMSS intends this document to help guide students to give first preference to the clinical school which best suits their aptitude, career aspirations, personal life and personality.
Hobart Clinical School

Address:
43 Collins Street
Hobart
Tasmania 7000

Head of Clinical School:  Professor Richard Turner

Summary:
The Hobart Clinical School (HCS) is attached to the Royal Hobart Hospital (RHH), the major tertiary referral hospital for Tasmania. The majority of rotations take place within the RHH. External placements are located at Calvary, St Johns, and general practices in the suburbs of Hobart.

Typical rotations include:

a) Fourth year

- **Teaching Blocks**

  Students in the Medicine/Surgery/GP/Psych half of the year (see attached timetable) have 3 week teaching blocks throughout the semester. These teaching blocks consist of lectures and tutorials on Clinical Pharmacology, Cardiology, Psychiatry, General Practice, skills sessions and Urology. A timetable of a typical week is attached (note the inclusion of student interviews; these interviews are undertaken by the heads of the General Practice and Surgery rotations in order to introduce themselves to students, and determine their strengths and weaknesses with a view to supporting students)

- **Medical Specialties**

  Students on their Medicine rotation are allocated to a single medical specialty for a 4 week period. Medical specialties include Endocrinology, Cardiology, Neurology, Respiratory, Haematology/Oncology, Renal, Infectious Diseases and Rheumatology. Students with the support of the unit coordinator have in the past been able to swap with classmates to split their placement across two separate specialties. Ward rounds typically commence at 8am. Students are encouraged to share interesting cases with fellow students on the other specialties.

- **Surgical specialties**

  Students are allocated to Orthopaedic Surgery for 2 week, 1 week on Ophthalmology, and another week divided between ENT and Plastics, where students may choose where to allocate their time. Ward rounds typically commence at 7am and students are expected to attend clinics, participate in theatre and on ward duties. We encourage you to contact a registrar to confirm specific details the week prior.
• **Psychiatry and General Practice**

Students are allocated for 2 weeks to Psychiatry and 2 weeks to General Practice. Those students allocated to Psychiatry may be assigned to a number of different teams, including the Psychiatric Intensive Care Unit (PICU), Department of Psychiatric Medicine (DPM) East, North and South units (these units accept patients based on geographic areas, for example the North unit takes patients from the Northern suburbs of Hobart). Students are expected to complete a 300 word attachment summary and a 500 word patient summary on a single patient. General Practice rotations occur in the surrounding suburbs of Hobart. There opportunities to elect a practice which you would like to attend, otherwise these are randomly allocated.

• **Paediatrics**

Students are allocated to the Paediatric unit for 9 weeks. This rotation is well organized and includes additional teaching organized and provided by the department’s Consultants. The Staff Specialists are extremely approachable and willing to teach students. The rotation involves students rotating between Ward Placement (3 weeks), Outpatients clinics (3 weeks), Paediatric Surgery (1 week), Neonatal Intensive Care Unit (1 week) and Community Paediatrics (1 week). This is a well-structured and enjoyable rotation for those who enjoy a multidisciplinary approach to medicine. Hobart is the only clinical school to offer Paediatric Surgery, which is known to be an excellent teaching rotation with dedicated consultants.

• **Obstetrics and Gynaecology**

This is a 9 week rotation. The current setup includes 5 weeks assigned to a registrar, involving various clinics to which they are assigned (usually with one day a week spent on maternity ward) 2 weeks on labour ward, 1 week on gyne-oncology, and 1 week of “multiple experiences” including placements at Breastscreen Tasmania. There is also a timetabled teaching program consisting of a mix of tutorials and student and Consultant led discussions; there is typically around 2-4 hours of teaching per week. Students need to take an active, self-directed approach to make the most of the learning opportunities presented in this rotation – including development of consulting and practical skills, and scrubbing in for Caesarean sections and Gynaecological surgeries.

b) **Fifth year**

• **Teaching blocks**

A 1 week teaching block occurs at the beginning and end of each semester. These teaching blocks consist of tutorials and applied activities. A timetable of a typical week is attached for both groups.

• **General Medicine**

Students are allocated to a single medical unit or APU for a 4 week period. Ward rounds typically commence at 8am. Involvement in all aspects of general medicine is expected with participation as a junior member of the team.
• **General Surgery**

Students are allocated to a general surgery unit for 4 weeks. They are expected to be an active member of the team and turn up for ward rounds (6:30am-8:00am) and learn from the team for the day and go to pre-assessment/outpatient clinic and scrub into theatre where possible.

• **Psychiatry and general practice**

Students are allocated for 2 weeks to Psychiatry and 2 weeks to General Practice. Those students allocated to Psychiatry may be assigned to a number of different units, including the Wilfred Lopez Centre at Risdon Prison, Older Persons Mental Health Unit, Clare House Child and Adolescent Psychiatry, the Hobart Clinic, and Clarence and Eastern District Adult Community Mental Health Service. Students are required to provide 300-word rotation feedback for both their Psychiatry and GP terms, whilst also having to write a 500-word Case Report for submission at the end of their Psychiatry rotation.

• **Selective/Aged Care**

You are asked to provide 3 preferences for an attachment to a unit in the RHH. Assessment is via the Certificate of Performance for Selective. You are also able to arrange your own selective within Hobart but it is recommended organising this early in the year and is subject to approval. Selectives that are available all year are:

- Palliative Care
- Cardiothoracic surgery
- Neurosurgery
- Urology
- Vascular surgery
- Hyperbaric medicine
- Medical imaging (Radiology/Nuclear Med)
- Haematology (lab)
- Clinical chemistry
- Histopathology
- Forensic pathology
- Radiotherapy
- Gastroenterology
- Endocrinology (project)
- Pain
- Global Health
- Primary Care research
- External Primary Care Placements
- Short research opportunities individually arranged

1 week is also spent at Queen Victoria Home, offering students an important chance to learn about Gerontology. Students have to prepare 2 Case Presentations and have daily tutorials with Clinicians and Clinical Pharmacists.

• **Calvary Rotation**

This 4 week rotation offers an opportunity to experience the private healthcare system through placements at Calvary Hospital, St John’s Hospital and private rooms. There is a structured timetable and a dedicated clinical facilitator who coordinates your placement and is a point of contact should you have any problems. There is room for
you to request specific placements in areas of interest, and the number of placements available is increasing.

In 2014 the focus of this rotation has very much been to gain skills and knowledge relevant to students as future interns as well as clinical exposure in a number of specialties. There is an excellent weekly tutorial program which culminates in a student-run Journal Club at the end of the rotation.

Example timetable in 2015

- **Week 1: DEM/General Medicine**
  During this week you have several shifts in Calvary DEM and spend the rest of your time acting as an intern, following your patients on the ward, checking and organising investigations, presenting them on ward rounds and discussing management decisions with the consultant.

- **Week 2: Medicine**
  This week involves placements in private rooms in fields such as General Medicine, Gastroenterology, perioperative medicine, Oncology and Paediatrics. There are also placements in Endoscopy, Radiology and Nuclear Medicine.

- **Week 3: Surgery**
  This week is mainly based in theatre and may include Colorectal Surgery, Urology, Plastics, General Surgery, Neurosurgery, Gynaecology and Anaesthetics. There are often opportunities for students to scrub in and assist.

- **Week 4: Geriatrics and rehabilitation**
  This week gives you time at private rooms and at the Rehabilitation Ward at St John''s hospital, where you follow the registrar and also spend time with the physiotherapists and occupational therapists.

- **Intensive Care and Anaesthetics**
  These placements occur over a 3 week period. Whilst ICU (1 week) is an interesting environment, there are few “hands-on” opportunities for students. The best part of this week is the informal teaching from the Registrars and the chance to brush up on interpreting various investigations. Anaesthetics (2 weeks) is a great time to practice cannulation, airway management and inserting airways. There is also an excellent anaesthetics tutorial program that runs throughout this rotation.

- **Geriatrics and Rehabilitation**
  2 weeks of this rotation is spent in Geriatrics, at one or more of the Older Person''s Unit at the RHH. Experiences include opportunities for developing intern skills on the ward, attending multidisciplinary and family meetings, attending clinics and developing skills in pain management and medication rationalisation.

  The other 2 weeks are spent on the Acute Rehabilitation Unit at the RHH, where the aim of care is to restore independence and function to patients with complex medical and surgical problems or injuries. Patients often have interesting or extreme physical findings, offering students a chance to improve their history and
examination skills and gain an appreciation for positive findings. There are also opportunities to practice intern skills such as admissions, drug charts and discharges.

- **Department of Emergency Medicine**

  This is a 5 week rotation that includes various shifts during the day, afternoon and night. Students are treated like interns and are encouraged to see patients on their own and present cases to Registrars/Consultants, with a view to initiate the management plan. Emergency medicine simulation sessions are also held for the students are attached to ED, Anaesthetics, ICU, Geriatrics, Rehab and Calvary. These tutorials are designed to teach students the approach to common situations that an intern may have to deal with and has been described as being a very valuable learning resource in preparation for internship.

**Outside of medicine:**

  **a) Accommodation and cost of living**

  Accommodation costs in Hobart are the highest of any city in Tasmania if you want to stay near the CBD. Expect to pay between $100 and $150 for a room in the vicinity of the hospital. Tasmanian University Union (TUU) properties are more numerous in Hobart compared with other cities, and these can provide good options close to the hospital. Information regarding TUU housing is available at [www.tuu.com.au/housing_and_accommodation/](http://www.tuu.com.au/housing_and_accommodation/) Some other cost of living items are also higher in Hobart, for example parking, although free parking is available at the Domain, a 5 -10 minute walk to the RHH.

  **b) Sporting life**

  There are a large number of sporting clubs in Hobart, including the majority of University sporting clubs. Clubs and teams are available for many skill levels. In addition, relatively inexpensive gym memberships at the RHH and at the UniGym. Sports comps between university faculties and within med are run by TUMSS in Hobart throughout the year.

  **c) Social life**

  There are a greater number of social opportunities at the HCS than at the RCS and LCS. The majority of TUMSS social events are held in Hobart, due to the first three years of the course being based in Hobart. In addition, there are a large number of nightclubs, pubs, restaurants and concert venues located in Hobart. Major events such as Salamanca Market, the Australian Wooden Boat Festival and MONA FOMA/ Dark MOFO are located in Hobart. The Tasmanian Museum and Art Gallery (TMAG) and the Museum of Old and New Art (MONA) are located in Hobart.

**Strengths:**

- The incorporation of tutorials and lectures into dedicated teaching blocks increases uninterrupted time for ward activities

- Wide range of specialties and sub-specialties with large numbers of patients and variety of presentations for students to see
• Hobart also offers some specialty areas that are not available elsewhere including Neurosurgery, Paediatric Surgery and Cardio-thoracics.

• Very well qualified Consultant and Registrar teachers
• Options for involvement in teaching students in younger years
• Relative freedom in ward teaching
• Students can easily practice clinical skills
• Opportunities to get involved with research at the neighbouring Menzies Research Institute

**Weaknesses:**

• The HCS has a smaller amount of lecture based teaching during clinical rotation time which some students find difficult

• Requires students to be organised and self-motivated to get the most out of a placement

• May result in problems with students that are not able to do self-directed learning

• Lack of afterhours facilities.

**This school is for you if:**

You prefer to learn independently from clinical rotations and hands on experience, and are able to follow up your own areas of knowledge gaps.

**You should think twice about this school if:**

You struggle to learn without adequate direction.
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<th>GROUPS</th>
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| GROUPS | Semester 2 |  |  |  |  |  |  |  |  |
|--------|------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|
| 4      |            | Medicine (4wks) | Surgery (4wks) | GP/Psych (2wks each) | Teaching Block (3wks) | Medicine (4wks) | Surgery (4wks) | GP/Psych (2wks each) |
| 5      |            | GP/Psych (2wks each) | Medicine (4wks) | Surgery (4wks) | Medicine (4wks) | Surgery (4wks) | Medicine (4wks) |
| 6      |            | Surgery (4wks) | GP/Psych (2wks each) | Medicine (4wks) | Surgery (4wks) | Medicine (4wks) |

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# CAM435/436 Semester One – Teaching Block Week Two

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<th>Wednesday 9/2/11</th>
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<td>Skills Session</td>
<td>Sean Beggs Clin Pharm</td>
<td>Ian Middleton Urology Tutorial</td>
<td>Outpatient Clinics</td>
<td>Janet Vial Clin Pharm</td>
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<td>Airways/CPR Group 2</td>
<td>Lisa McCrindle G.01</td>
<td>See Timetable</td>
<td>Jennifer Hargrave GP Breastfeeding</td>
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<td>Skills Session</td>
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<td>Jennifer Hargrave GP Breastfeeding</td>
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<td>Lisa McCrindle G.01</td>
<td>See Timetable</td>
<td>Jennifer Hargrave GP Breastfeeding</td>
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*Timetable subject to change.*

For enquiries please contact Jacqui Zoldi at the Year 4/5 Office – jacqui.zoldi@utas.edu.au
Launceston Clinical School

Address:
Launceston General Hospital
Charles Street
South Launceston 7250

Head of Clinical School:  Associate Professor Kim Rooney
Assistant Head:  Associate Professor Jan Radford

Summary:

The Launceston Clinical School (LCS) has a reputation as being supportive of students and an academically successful clinical school. The majority of rotations take place within the Launceston General Hospital, although students also attend St Vincent's Private Hospital, local and rural GP practices, and community based health providers. There is also dedicated teaching on Clinical Pharmacology and Advanced Life Support.

The adoption of a teaching model for Year IV students allows the division of tutorials and clinical attachments. Each rotation lasts 5 weeks separated by a week of teaching block. However every Tuesday comprises of a teaching day.

Typical rotations include:

  Fourth year

  •  **Surgical Specialties**

  This 5 week rotation consists of 4 placements – 1 week each of Plastics, ENT and Urology, and 2 weeks of Orthopaedics. These comprise of attachments with the relevant surgical team- encompassing rounds, ward work, clinics and theatre. There is the opportunity during one of the Orthopaedics weeks to work in the private hospital, St.Vincent’s. Students are free to attend the tutorials that are held for the interns, RMOs and Registrars. All of the surgical specialties are taught by enthusiastic consultants who have high expectations from all students to learn from these attachments.

  •  **Medical Specialties**

  This 5 week rotation gives students the opportunity of spending 1 week each in Renal, Cardiology, and Gastroenterology, and 2 weeks in Respiratory. This is a good opportunity to spend time with Consultant physicians in a one-to-one setting in clinics, ward rounds and performing procedures. Spending time on each unit is unique to the LCS. The downside is that you may not necessarily “feel part of the team” for your entire term on each unit, given the brevity of 1 week placements.
• **General Practice**

This 5 week rotation involves spending time at a single GP practice within greater Launceston. Students are sometimes given the opportunity to “Wave Consult” or “Parallel Consult”, which are fantastic learning experiences. The GP rotation also includes undertaking a Clinical Audit for the General Practice that you are based at. There is also an additional set of community visits with a Pharmacist, performing comprehensive Medication Reviews. These additional tasks are unique to LCS and give students are holistic Primary Care term.

• **Psychiatry**

There is a broad overview to Psychiatry delivered through a 5 week rotation. Students experience Psychiatry within the Inpatient and Outpatient setting (including with the Crisis Assessment Team), and a week on Paediatric Community Psychiatry. The addition of a Community Paediatric Psychiatry Week in 2014 allows community visits as well as private clinics. A program of tutorials is offered throughout the year to provide a thorough introduction to the mental health issues commonly encountered in daily ward experiences, as well as the Psychiatric setting.

• **Paediatrics**

The Paediatrics rotation (5 weeks) is rigorous and well supported – the teaching staff pride themselves on being accessible to students, providing formal and informal learning opportunities, and providing extensive experience of Paediatric and Neonatal health issues through ward work and clinics. Evening and weekend on-call sessions are an important component of this rotation. Students will definitely feel part of the treating team. However complex Neonatal and Paediatric patients are often transferred to the RHH or Royal Children’s Hospital in Melbourne, which may restrict understanding of rarer patient presentations.

• **Obstetrics and Gynaecology**

This 5 week rotation involves attending and assisting at births, Obstetric and Gynaecological clinics, and Obstetric and Gynaecological surgery. Students should take advantage of this rotation – there is opportunity to see a side of medicine that may rarely be revisited for many but can be a rewarding and eye-opening experience. This rotation is well-regarded because of the abundance of department teaching by the Registrars as well as the Consultants.
Fifth year

- **General Surgery**

  This 7 week rotation consists of 2 two week blocks, one with each of the General Surgical units. These are: Breast & Endocrine, Colorectal and Hepatobiliary/Upper GI. In addition you do one week of anaesthetics. The program is well organised and taught, with rosters, tutorials, a suturing workshop, student-led presentations and private theatre. Students have a high degree of expectation placed upon them, with two students required to be on-call every night and over the weekend, which creates a very demanding placement. On the flipside, there are many opportunities to improve your skills.

- **General Medicine & Haematology/Oncology**

  Students spend two weeks in Calvary Private hospital – where they are in ‘charge’ of the general medical ward. They receive daily tutorials from the consultant and are expected to do a case presentation on each Friday. Students spend 3 weeks attached to Haematology/Oncology – this is broken down into 1 week on the wards, 1 in the haem/onc outpatients clinic and 1 week on radiation oncology. There is a one week placement on the general medical ward. On the Gen Med rotation students also have a one week placement in the ICU. Students are involved in the clinical assessment of patients, administrative work and practical procedures.

- **General Practice**

  Students spend five weeks in a rural general practice (preferences are required). The rotation also incorporates one week of aged care – where you will do medication reviews of patients in the aged care facilities, plus have daily tutorials with a GP. The final two weeks can consist of either research, dermatology or refugee health placements.

- **Department of Emergency Medicine**

  Launceston students have 4 weeks allocated to emergency. There is a high degree of case ownership encouraged in students and there is an expectation to see patients alone. The remaining 3 weeks are utilised for student selectives.
Outside of medicine:

a) Accommodation and cost of living

Accommodation costs in Launceston are slightly cheaper than in the South. There are a number of rental properties in the streets around the hospital that can be rented by students, and most students live within walking distance to the hospital.

The hospital also has accommodation for students and other visiting employees, which is very close and inexpensive. The Nurses’ Home Accommodation, across the road from the LGH, provides very basic but convenient housing.

b) Sporting life

Opportunities are available to become involved in local sporting teams. The range of social leagues included netball, soccer and cricket – often in mixed gender teams. The LGH also offers access to their gymnasium at a price of approximately $1/week.

c) Social life

In Launceston, the year group is smaller, but friendship bonds are close! Who needs to go out on the town when you have house parties? There are a range of pubs and clubs in Launceston, and many affordable and higher class restaurants and cafes. Exciting events include Breath of Life, Festivale, AFL football and the Gorge. Launceston is a 50-minute flight from Melbourne and a two and a half hour drive from Hobart.

Students in Launceston are very friendly and welcoming to others from different years. There is also great camaraderie with interns and RMOs who are ex-UTAS students.

Strengths:

• Helpful and supportive office staff, free printing and supportive heads of school
• New Clinical School building with excellent student facilities
• Abundance of opportunities and support to get involved with research
• Pharmacology teaching that incorporates lectures from a dedicated pharmacist
• Simulation practice at the Newnham Campus on their Level 3 SimMan dummies

Weaknesses:

• Teaching and clinical time overlap during fourth year, making it difficult to commit to time on the ward
• Attendance is rigorously marked, if you are the type of person to skip the occasional few lectures you will be reprimanded, unless you email with a reason (such as illness, or fatigue)
• Limited opportunities to teach junior medical students, but some outreach to high school students
• CBL teaching seems less case-based for many of the clinicians than the RCS
• Often large gaps in the middle of “Teaching Tuesdays” between lectures
• The LGH has a strict policy against students writing on drug charts, or discharge letters, which might reduce your preparation for internship

This school is for you if:

You want a hands-on teaching program with Clinician-led tutorials. You want to develop meaningful relationships with students, teaching staff and LGH personnel.

You should think twice about this school if:

You have a passion for Neurology, Neurosurgery, Cardio-thoracic Surgery or Paediatric surgery (not offered).

If you won’t handle a high after-hours workload. If you like solely doing independent learning.
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*Note: LAB indicates laboratory sessions, LUNCH indicates lunch break.*
Rural Clinical School (Burnie)

Address:
Burnie Hospitals Campus
Brickport Road
Cooee 7320

Heads of Clinical School:  
Associate Professor Lizzi Shires  
Associate Professor Deb Wilson

Summary:

The Rural Clinical School (RCS) is based in Burnie primarily at the North West Regional Hospital (NWRH). With students also spending time at the Mersey Community Hospital (MCH), various community mental health placements and GP practices along the North West Coast. It is known to be a supportive environment with excellent academic outcomes. In both years students have clinical teaching blocks, 9 in year 4 and 6 in year 5 which include lectures, tutorials, skills sessions and OSCE practice sessions. Students spend lots of time in the community promoting health in schools and community events. In year 5 students spend the weekend in Queenstown (location may change) doing Emergency Skills in real environments with simulated mass casualties. They also complete the Advanced Life Support course.

The RCS is the smallest of the 3 clinical schools with approximately 50 students (both year 4 & 5)

Typical rotations include:

a) Fourth year

The rotations in fourth year are 5 weeks duration each. Typical rotations include: General Medicine, Surgery (allocated to either General Surgery or Orthopaedics), Obstetrics and Gynecology, Paediatrics, Mental Health and Emergency Medicine. The other clinical rotation is Primary Care. Primary care is experienced one day a week every week for the university year. The rotations are primarily based at NWRH, however students may be placed at MCH for O&G.

- Teaching Blocks

  Formal teaching occurs during Group Learning Weeks. In 2016 there were 6 weeks, spaced out through the year. Teaching includes tutorials in all the clinical rotations, skills sessions in simulation labs, and practice OSCEs.

- General Medicine

  This rotation occurs at the NWRH, and students are attached to one of the Gen Med teams. In the morning students attend ward rounds, and are then free to help out with ward work, take histories and examine patients on the ward, or attend outpatient clinics. There are multiple outpatient clinics that run throughout the week, and they are relatively easy to get into and clinicians are happy for students to be with them.
• Mental Health

This rotation primarily occurs out in the community at various community mental health services including child and adolescent mental health service, older persons mental health service, crisis assessment team, Don college clinic, community adult mental health services and many others. A small period of time is spent in inpatient psychiatry at NWRH, and students may need to stay in Latrobe at University-provided accommodation for part of the rotation when they are attached to certain community mental health services.

• Paediatrics

Students have a 5 week Paediatrics placement based at the NWRH with some time spent at the MCH for outpatient clinic. The paediatric ward at the NWRH has 12 beds, if you are really interested in paediatrics the best time to have this rotation is in winter so ask the RCS early for this opportunity. There is also a small special care nursery (SCN) located at the North West Private Hospital where students spent some time. Each morning student will attend ward rounds that go through both the paediatric ward and SCN. Then student have an opportunity to attend outpatient clinics or spend time on the ward. There are a range of specialist paediatric outpatient clinics each month however it is the responsibility of student to find out when these are including diabetes, cystic fibrosis and a visiting paediatric cardiologist (from RCH in Melbourne) which are all great opportunities. Students will be required to do case presentations at weekly teaching sessions. You will also participate in the statewide paediatrics teaching through teleconference between LGH, RHH and NWRH.

• Emergency Medicine

Students are rostered as to when they are expected to be at DEM. The times are either 8am-4pm, or 4pm-10pm. Students usually have the same number of hours as on other rotation, but it is spread out during the week and includes weekend shifts. 5 days are spent down at MCH (accommodation provided) in 4th year. This is a very practical rotation, and student should expect to be able to practice performing procedural skills, as well as clerking patients who present to DEM (inc. history, examination, investigation and management). Students are responsible for seeing their own patients and then consulting with one of the senior doctors on that shift.

• Surgery

Based at NWRH, students are allocated to either General Surgery or Orthopaedic surgery (and students will do the other in 5th year). Students spend time doing ward rounds, outpatient clinics, or spending time in theatre. This is a very hands on rotation where students are able to see patients in clinics, scrub in in theatre and help out on the wards.

• Obstetrics and Gynaecology

In 2016 students were based at either North West Private Hospital (private/public obstetrics)/NWRH (gynaecology) or MCH during this rotation. This is potentially changing for 2017 so that students will only be placed in Burnie. Students spend their time in clinics (general gynae, mirena, colposcopy (MCH), ante- and post-natal), theatre or
birthing suites. Students may be called in at late hours of night to assist with births. Students are able to gain a lot of hands on experience in this rotation but may need to seek out these opportunities.

- **Primary Care**

  Occurs throughout the year. Students are allocated a GP along the North-West Coast (as far as Port Sorell) and travel out there every Tuesday (including during Group Learning Weeks). Students are in a 2 GPs for the year: one each semester. Student experiences can vary greatly depending on which GP they are allocated.

a) **Fifth year**

There are 5 week rotations in Remote Medical Practice, General Medicine, Surgery, Emergency Medicine and Selective. 1 weeks in both Nursing Home and Palliative Care and 3 weeks in Anaesthetics/ICU. There are 1 week teaching blocks held at the clinical school between each rotation.

  Student also participate in an Emergency Skills weekend with practice experience of mass casualty events as well as completing the accredited Advanced Life Support course.

- **Rural and remote**

  Remote Medical Practice attachments organised by the clinical school are located in the communities of Smithton, King Island, West Coast (Queenstown/Strahan) and Huonville however students have the opportunity to choose to do this rotation elsewhere in the state or on the mainland. The RCS will provide generous subsidies to these student. Students will have an attachment of 5 weeks which can be split over more than one location or all at one location (up to the student). Accommodation is provided and travel to these locations is subsidised.

- **Surgery**

  Students will be allocated to either General Surgery or Orthopaedics. Generally students who studied entirely orthopaedics in 4th year at the Rural Clinical School will be allocated to general surgery in 5th year and vice versa.

  Students will be involved in theatre, clinics and ward work as well as weekly teaching sessions.

- **Emergency Medicine**

  Students are allocated shifts and are expected to be available for morning, evening, night and weekend shifts. Students participate in all activities of the unit including the Thursday morning DEM teaching program incorporating student case presentations, as well as attending regular journal club held by the department. As in 4th year this is a great rotation where students are able to practice history taking, examination and management skills as well as procedural skills. Students are responsible for seeing their own patients and then consulting with one of the senior doctors on that shift.

- **General Medicine**

  Students will be assigned to a Registrar and Consultant (one of the teams) during their
medical attachment and undertake a range of tasks including ward work, clinics, unit education–side program, teaching bedan case discussions. Students will be allocated to either the Mersey Community Hospital or the North West Regional Hospital.

- **Nursing Home/Palliative Care**
  
  Students undertake a 2 week attachment that is supervised by Palliative Care and Nursing Home Consultants.

- **Anaesthetics/ICU**
  
  During this 3 week period of introduction to Anaesthesia and Intensive Care you will be attending a wide range of department activities ranging from ward rounds to attending elective and emergency lists in theatre. In addition there is the opportunity to practice skills such as intubation, airway management and drug administration under the guidance of the Consultant and Registrars.

- **Selective**
  
  This is essentially a second elective for students at the RCS. It is a 5 week placement that can be undertaken anywhere in the world. Financial support from the RCS is also available to help cover costs. This is organised by students themselves in any area of medicine they have an interest. It is advised that you begin to organize this in 4th year and request your selective rotation at the time organised.

**Outside of medicine:**

  **a) Accommodation and cost of living**

All RCS students receive financial support from the school for accommodation and cost of living.

All students at the RCS have access to RCS accommodation (University apartments/RCS rental properties).

**** All prices below are based on 2016 and are subject to change****

1. **Subsidised Rent/accommodation bursary.**

*Those who choose to live in RCS Accommodation:*

  **a) RCS Atrium Apartments:**

  Single room (charged $30/week) – commercial rate is $140/week
  Ensuite Room (charged $50/week) – Commercial rate is $160/week

  **b) West Park Apartments**

  Studio apartments (charged $30/week) – commercial rate is $110/week

*Those who choose to live in private rentals*
a) Single students – No subsidy available

b) Students with partners (non MBBS)/ Family - Rental & Utilities subsidy $160/week.

Accommodation outside of Burnie whilst on placement
The rural clinical school provide accommodation at Latrobe for students on placement at Mersey Community hospital at no extra cost with included UConnect internet on site. For student in 5th year for selected rural and remote placements accommodation will also be provided at no extra cost. For places without accommodation the school will give a bursary (individualised to each student based on need through an application process)

2. Subsidised Electricity/Internet/local calls

At all RCS Accommodation, electricity costs, capped broadband internet and local phone calls are paid for by the RCS.

3. Relocation Bursary

A “one-off” payment to students to cover the costs of relocating to Burnie is received early in the year (in 4th year for most students of in 5th year for students moving from another clinical school to the RCS in 5th year)

a) Single students: $500

b) Students with Families/partners: eligible to additional assistance

4. Travel Bursary

As Primary Care Attachments are dispersed throughout the northwest coast, students receive a travel bursary to contribute to vehicle running costs/public transport costs. The amount varies according to whether they have their own vehicle, and where they are placed during the semester.
$200 per semester in 4th year + $25 per week of placement at Mersey Community Hospital

5. Health and Fitness Subsidy

RCS will provide a financial subsidy of up to $100 for payment towards the cost of accessing health and fitness facilities, sporting team memberships, registration fees or bicycle purchases.

b) Sporting life

There are a range of sporting clubs situated along the North-West coast. It is best to surf the internet to find a club from a sport you are interested in. There are also groups who organize bushwalking, canoeing and other outdoor activities throughout the year. The Rural clinical school is able to help students find sporting clubs on the cost to be involved in if needed.
Only $6/week for the uni gym
c) Social life

Whilst there may not be that many clubs if that’s what you’re into there is more than enough to keep you occupied on the North-West coast. During the day, there are a vast number of cafes to choose from. At night, there are very limited places to attend to have a drink with some friends but RCS student usually put on a range of parties throughout the year. They are a close knit bunch who enjoy many social nights together whether that be at home or out bushwalking or attending local events.

Strengths:

- Excellent teaching and lots of quality student-doctor contact
- Wide exposure to wide range of clinical conditions
- Excellent support during both 4th and 5th year as well as for transition to Intern year
- Very well organized with a structured teaching program in dedicated teaching blocks which increases uninterrupted time for ward activities
- State-of-the-art simulation and skills labs (at both MCH and NWRH campuses) available student students each week to practice skills and dedicated skills teaching during group learning weeks.
- Opportunity for one on one skills teaching each week in the skills lab
- Financial assistance, reduced living costs
- Wide variety of opportunities to get involved in the community through volunteer work
- Only clinical school with a DEM placement in 4th year
- Only clinical school with a 5 week selective placement in 5th year that can be undertaken anywhere in the world (essentially a second elective)
- Accredited ALS course run in 5th year
- Lots of opportunities to get involved in research alongside your clinical studies

Weaknesses:

- Patient diversity limited (although DEM rotation in 4th year means you can see patients that will have their definitive treatment elsewhere)
- Limited sub-specialty experience
- Expensive to fly-out except if you drive to Launceston

This school is for you if:

- Want to feel supported through your clinical years and are happy to be part of the RCS community.
- Enjoy a relaxed environment where the worst traffic jam is the dreaded Cooee Crawl that might hold you up for 30 seconds.
- You want to work hard because due to the small student numbers you can’t slack off without someone noticing.
- Lots of clinical skills teaching in state of the art labs. Clear teaching through teaching weeks with practice OSCEs throughout the year.
- Want flexibility with rotation order (especially in 5th year) due to small student numbers.
- Want lots of free food!!
You should think twice about this school if:

- Want to go unnoticed through the next few years or not work hard.
- If you like clubbing or the buzzing nightlife of Hobart.
- If you want to spend time in sub-specialties throughout your rotations.
- Don’t have a license/car to drive as public transport is scarce and you will need to rely on other people to get you to community placements and to woolworths/coles as these are not close to the hospital or student accommodation.
Example of 4th year Group Learning Week Timetable

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*Please note, the timetable is subject to change. Please see the official email for updates.*
Example of 4th year rotations timetable
Example of 5th year Group Learning week timetable
Example of 5th year rotations timetable

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