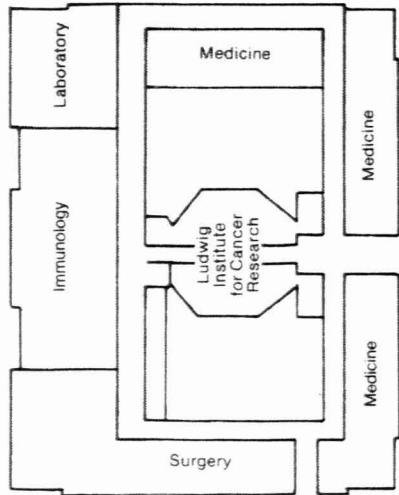


The University  
of Sydney

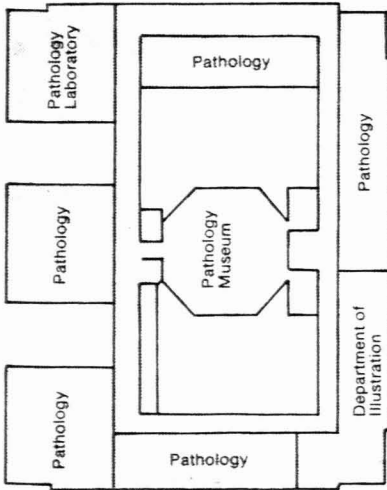
Medicine  
Handbook  
1982



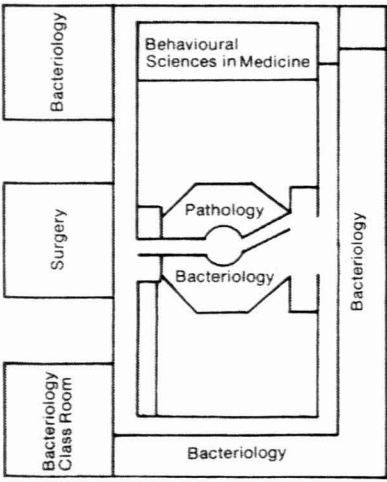
BLACKBURN BUILDING



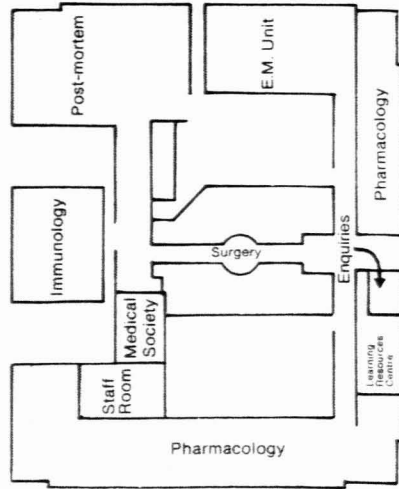
LEVEL 3: Immunology, Medicine and Surgery



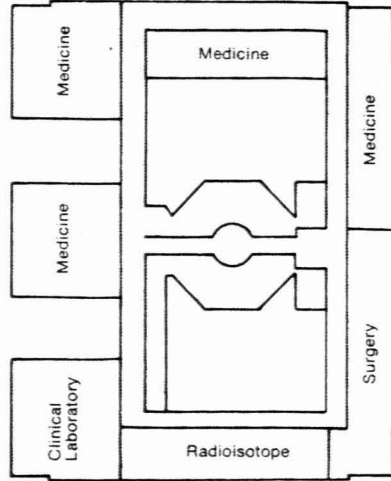
LEVEL 5: Pathology, and Illustration



LEVEL 6: Bacteriology, Surgery Pathology and Behavioural Sciences in Medicine



LEVEL 2: Immunology, Pharmacology, Surgery and Audio-visual Library



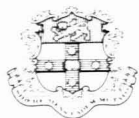
LEVEL 4: Medicine and Surgery





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**Other publications of interest**

- Calendar (\$10.00)
- Handbooks of each faculty (\$4.00 each)

*At no charge*

- Where to find that room
- Undergraduate Prospectus
- Summary of university matriculation and admission requirements
- UCAC Student Information Guide
- Guide for New Students
- Ways to finance your studies
- Postgraduate Studies Prospectus

**Correspondence**

All correspondence concerning selection, matriculation, enrolment, registration, exemption, leave of absence, examinations, and similar matters should be addressed to:

**The Registrar**

The University of Sydney, N.S.W. 2006

Telephone: (02) 692 1122; Telegrams: UNIVSYD

Telex no: 20056; Answer back: FISHLIB

**Term dates**

	Term	Lectures begin	Lectures end	Examination period	Term ends
<b>First Year</b>	Lent	22 Feb	30 Apr	3-7 May	8 May
	Trinity	31 May	30 July	2-6 Aug	7 Aug
	Michaelmas	30 Aug	29 Oct	from 8 Nov	4 Dec
<b>Second Year</b>	2:1	22 Feb	30 Apr	3-7 May	8 May
	2:2	31 May	6 Aug	9-13 Aug	14 Aug
	2:3	30 Aug	5 Nov	from 8 Nov	4 Dec
<b>Third Year</b>	3:1	25 Jan	2 Apr		
	3:2	14 Apr	18 Jun		
	3:3	18 Jun	3 Sept		
	3:4	13 Sept	5 Nov	from 8 Nov	4 Dec
<b>Fourth Year</b>	4:1	11 Jan	5 Mar	} During last week of Lectures	6 Mar
	4:2	15 Mar	14 May		15 May
	4:3	24 May	23 July		24 July
	4:4	2 Aug	1 Oct		2 Oct
	4:5	11 Oct	10 Dec		11 Dec
<b>Fifth Year</b>	5:1	Unallocated			
	5:2	22 Feb	28 May		29 May
	5:3	7 June	10 Sept	13 Sept-8 Oct	9 Oct
	5:4	11 Oct	3 Dec		4 Dec

# Contents

	Message from the Dean	v
	Introduction	vii
1	Staff	1
2	The Faculty of Medicine	40
	By-laws and Resolutions	47
	Committees of the Faculty	50
	Student membership of the Faculty	50
	Examinations and assessment	51
3	Undergraduate degree requirements	
	Degrees	53
	Requirements for the MB, BS, BSc(Med)	54
4	Courses of Study	
	First Year	61
	Second Year	65
	Third Year	69
	Fourth Year	70
	Fifth Year	75
5	Other faculty information	
	Statement of enrolment record	79
	Compulsory subscriptions	80
	Overseas students	80
	Student identification cards	80
	Examinations	80
	Avenues of appeal	81
	Personal tutor scheme	82
	Government of the University	84
	Undergraduate scholarships and prizes	84
	Libraries	86
	Learning Resources Centre	87
	Societies	88
	Cadetships and traineeships	90

6	Postgraduate study	
	Requirements for postgraduate degrees	93
	Diplomas	96
	Boards of postgraduate studies	98
	Victor Copleston Memorial Institute	99
	Postgraduate scholarships and prizes	102
7	Teaching hospitals	
	University administrative units	106
	Regulations	108
	The seven general teaching hospitals	114
	The six special hospitals	122





## Message from the Dean

I welcome you to the Faculty of Medicine. I congratulate you on your admission into the course and look forward to the opportunity of meeting all of you personally at some stage during your training in the University.

Evolving patterns of change in health care have required medical schools to review their curricula in response to the needs of the community and advances in medical science and practice. The community, quite reasonably, expects its medical schools to provide an educational training that enables doctors to acquire a comprehensive understanding of man in health and sickness, an appreciation of his physical and social environment and those skills which are associated with the highest standards of professional competency.

In 1969 the Faculty of Medicine began to consider reforms in its curriculum and a five-year course was introduced in 1974. Since that time there have been a number of revisions to the undergraduate curriculum to make provision for new developments while retaining the best features of our traditional training. I must emphasise that medical education is a continuing process and that the undergraduate course is the first part of the education of medical practitioners irrespective of what field they follow in their professional life.

I sincerely hope that your experience in the course and your contact with the staff and your fellow students will help you develop and maintain a sense of enthusiasm and an appreciation of your responsibility to the needs of the community. These are attitudes which are central to good medical practice.

I also hope you will appreciate that there is a great deal more to a university education than mere attendance at lectures and passing examinations. It is highly desirable that you should actively participate in the corporate life of the University if you are to have the full and rich experience which distinguishes a university graduate from graduates of other post-secondary institutions.

Finally, may I say that the Faculty is pleased to have you with us. I hope that if you have any difficulties or problems you will not hesitate to consult me or other staff members of the Faculty.

  
Richard Gye  
DEAN



# Introduction

## **Undergraduate study**

This is the Faculty of Medicine Handbook. In it we hope you will find most of what you need to know about the Faculty.

In particular, it will help you find out who the people in your Faculty are: the degree requirements and the ways these can be satisfied; what courses are offered; and where to turn for more information, advice and help.

The requirements for the three bachelor's degrees are presented in Chapter 3, under the by-laws and resolutions of the Senate. The resolutions include lists of the courses to be taken in each year of study, and a description of the courses with book-lists is provided in Chapter 4. If you are uncertain about any aspect of your programme of studies, talk to someone—those able to help you are listed on page viii.

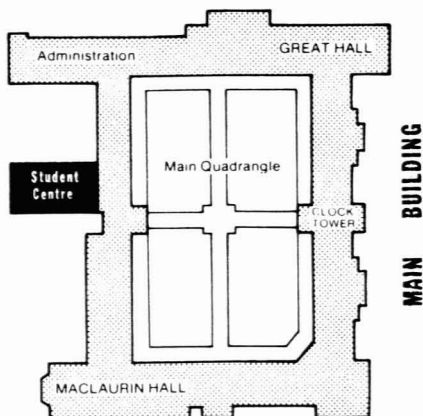
Chapter 5 collects together special information relating to the Faculty.

## **Postgraduate study**

All specific postgraduate information is contained in Chapter 6.

### Information and advice

General enquiries are often best made here.



Dean's Office  
Level 3  
Bosch Building

Mr D. W. Swinbourne, Assistant to the Dean  
Mr R. L. Tindall, Secretary to the Faculty

- For preliminary discussion of university courses, matriculation, and general information.
- Enquiries from graduates of other universities, and enquiries from undergraduates in other faculties about entry into the undergraduate medical course or about postgraduate medical studies.

Information and  
advice on particular  
courses

Head of the department concerned.

*For first and second year Medicine*

Professor K. W. Cleland

Sub-Dean (Preclinical)

Department of Histology and Embryology  
(ground floor, Anderson Stuart Building).

*For the paraclinical and clinical years*

Professor J. G. McLeod

Department of Medicine,  
(Blackburn Building)

Personal

For information on the following services:

- Housing Officer
- Student Health Service
- Counselling Service
- Financial assistance
- Careers and Appointments Service

and other points of general information, see the *Guide for New Students*.

Noticeboards

Current information about courses and tutorials is posted on noticeboards in the Anderson Stuart, Blackburn and Bosch Buildings. It is worthwhile checking these often.

Timetables

Timetables for the various years of the undergraduate course are available from the particular departments, and are also posted on the noticeboards.



*Location*

There is a map of the grounds included in this handbook, as well as floor plans inside the covers.

**Teaching hospital addresses**

	<i>Telephone</i>
<i>The Royal Prince Alfred Hospital</i> Missendon Road, Camperdown 2050	51 0444
<i>Sydney Hospital</i> Macquarie Street, Sydney 2000	230 0111
<i>The Royal North Shore Hospital of Sydney</i> Pacific Highway, St Leonards 2065	438 0411
<i>The Mater Misericordiae Hospital</i> Pacific Highway, Crows Nest 2065	929 7022
<i>The Repatriation General Hospital, Concord</i> Hospital Road, Concord 2139	736 7911
<i>Lidcombe Hospital</i> Joseph Street, Lidcombe 2141	646 8555
<i>The Women's Hospital, Crown Street</i> Crown Street, Surry Hills 2010	31 0477
<i>St Margaret's Hospital for Women</i> 435 Bourke Street, Darlinghurst 2010	31 0466
<i>The Royal Alexandra Hospital for Children</i> Bridge Road, Camperdown 2050	51 0466
<i>The Rozelle Hospital</i> Cnr Church and Glover Streets, Leichhardt 2040	82 0601
<i>The Macquarie Hospital, North Ryde</i> Coxs Road, North Ryde 2113	888 1222
<i>Parramatta Psychiatric Centre</i> Fleet Street, Parramatta 2150	630 6444
<i>Parramatta Hospitals/Westmead Centre</i> Hawkesbury Road, Westmead 2145	633 6333



# 1 Staff<sup>1</sup>

<i>Dean</i>	Richard Spencer Gye, MA DPhil <i>Oxf.</i> BSc(Med) MB BS, FRACS FRCS
<i>Sub-Deans</i>	John Atherton Young, BS BSc(Path) MD DSc <i>Qld.</i> FRACP ( <i>Academic Affairs</i> ) Kenneth Wollaston Cleland, MB BS ( <i>Preclinical</i> ) Douglas William Piper, MB BS, FRACP ( <i>Clinical</i> ) William H. McCarthy, MEd <i>Ill.</i> MB BS, FRACS ( <i>Medical Education</i> ) Robert R. Munro, MD BS, FRCS Ed ( <i>Staff/Student Affairs</i> ) John Miles Little, MD MS, FRACS ( <i>Westmead</i> ) James Graham McLeod, DPhil <i>Oxf.</i> BSc(Med) MB BS, MRCP FRACP FAA ( <i>Special Duties</i> ) Anthony H. Goodman, MB BS PhD ( <i>Postgraduate Studies</i> )
<i>Graduate Assistant and Assistant to the Dean</i>	Donald W. Swinbourne, MCom <i>N.S.W.</i>
<i>Graduate Assistant and Secretary to the Faculty</i>	R. L. Tindall, BA
<i>Graduate Assistant, The Westmead Centre</i>	Christine F. Samojluk, BA
<i>Graduate Assistant and Secretary to the Postgraduate Committee in Medicine</i>	Daphne G. Johns, BA DipEd
<i>Graduate Clerk</i>	.....
<i>Sir Lorimer Dods Professor and Director of the Children's Medical Research Foundation</i>	Peter B. Rowe, MD BS, FRACP

## **Anaesthetics**

<i>Nuffield Professor</i>	Douglas Joseph, MB BS, FFARCS FFARACS
<i>Senior Lecturer</i>	M. J. Bookallil, MB BS, FFARCS FFARACS
<i>Lecturers (part time)</i>	Bruce S. Clifton, MB BS DA, FRACP FFARACS Lawrence T. Gadd, MB BS, FFARACS Ross Holland, MB BS, FFARACS Edward H. Morgan, MB BS DA, FFARACS

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<sup>1</sup>As at November 1981

STAFF

Brian J. Pollard, MB BS, FFARACS  
B. E. Sharkey, MB BS, FFARACS

*CL in Anaesthetics*

**At Royal Prince Alfred Hospital**  
F.M.S. Bodlander, MB BS, FFARCS FFARACS  
G.B.S. Roden, MB BS, FFARCS  
K. Tweedale, MB BS, FFARACS  
J. S. Windeyer, MB BS DA, FFARACS

*CL in Anaesthetics*

**At Sydney Hospital**  
L. E. Csenderits, MB BS, FFARACS  
L. Gadd, MB BS, FFARACS  
D. W. Gronow, MB BS, FFARACS  
J. Lucas, MB BS, FFARACS MRCS LRCP

*CL in Anaesthetics*

**At the Royal North Shore Hospital**  
R. J. Binsted, MB BS, FFARACS FFARCS  
D. L. Cay, MB BS, FFARCS FFARACS  
M.McD. Fisher, MB ChB *N.Z.*, FFARACS  
A. F. T. Hobbes, BSc(Med) MB BS, FFARACS  
R. W. Jefferis, DA *R.C.P.&S.*, MB BS, FFARACS  
C. N. Norgate, MB BS, FFARACS  
G. J. Purcell, MB BS DA, FFARCS FFARACS  
J. C. Warden, MB BS, FFARACS

*CL in Anaesthetics*

**At Repatriation General Hospital, Concord**  
M. H. Harpur, MB BS, FFARACS  
Denise B. Sporr, MB BS, FFARACS

*CL in Anaesthetics*

**At Lidcombe Hospital**  
L. Bartholomeusz, MB BS, FFARACS  
F. Y. Chiew, MB BS *Malaya*, FFARACS  
L. Miller, DA *Lond.* MB BS, FFARACS  
T. O'Connell, MB BS, FFARACS  
S. M. Taylor, MB BS, FFARACS

*CL in Anaesthetics*

**At the Westmead Centre**  
Frederick Henry Cox, MB BS, FFARACS  
Ian F. Edmiston, MB BS, FFARCS  
Chin Aik Kam, MB BS, FFARCS FFARACS  
Francis Xavier Lah, MB BS, FFARACS  
William J. McMeniman, MS BS, FFARACS  
Ian Y. Pearson, MB ChB *Cape T.*, FFARCS  
Thomas Voss, MB ChB *Cape T.*, FFARCS  
T. Gareth Watkins, MB BS *Wales*, FFARCS

*CL in Anaesthetics*

**At Mater Misericordiae Hospital**  
R. W. Jefferis, DA *R.C.P.&S.* MB BS, FFARACS  
V. G. Balmer, MB BS *Melb.* DA *R.C.P.&S.*, FFARACS

*CL in Anaesthetics*

**At St Margaret's Hospital for Women**  
M. G. Scarf, MB BS, FFARACS



## **Anatomy**

<i>Challis Professor</i>	Michael John Blunt, MB BS PhD <i>Lond.</i> , Hon. FRACS Hon. FRACOLMSSA
<i>Associate Professors</i>	C. G. dos Remedios, BSc PhD R. R. Munro, MD BS, FRCSEd Philomena McGrath, MD BS, FRACS
<i>Senior Lecturers</i>	R. J. Bandler, BA <i>Miami, Ohio</i> PhD <i>Carnegie-Mellon</i> P. L. Davies, MDS B. Dreher, MS PhD <i>Warsaw</i> Angela F. Dulhunty, BSc PhD <i>N.S.W.</i> M. Girgis, MD <i>Khart. MA Camb.</i> PhD <i>Lond.</i> , MRANZCP W. S. Webster, BSc PhD <i>Lond.</i>
<i>Principal Tutor</i>	Anne Glucina, BSc <i>Otago</i>
<i>Senior Tutors</i>	M. Arnold, MB ChB <i>Witw.</i> , FRCSEd Margaret Scott, MB BS BSc <i>N.S.W.</i> G. J. Witten, MSc <i>N.E.</i>
<i>Tutors</i>	Pauline Itzkowic, BSc <i>N.S.W.</i> (part time) Roshun Rodriguez, MA BM BCh <i>Oxf.</i> , FRCS (part time)

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## **Bacteriology**

<i>Associate Professor and Acting Head of Department</i>	Yvonne Cossart, DCP <i>Lond.</i> BSc(Med) MB BS, FRCPath
<i>Senior Lecturer</i>	Raymond Kearney, BSc PhD <i>Qld</i>
<i>Lecturer (temporary)</i>	Colin Harbour, BSc <i>Wales</i> PhD <i>Lond.</i>
<i>Lecturers (part time)</i>	Richard A. Benn, DipBact <i>Lond.</i> BSc(Med) MB BS, FRCPA FRACP David Dorman, BSc PhD Frank Jennis, MB BS DCP, FRCPA MRCPath
<i>Senior Tutors (temporary)</i>	Mary A. Pegler, MSc, MASM Carol H. Thompson, BVSc
<i>Tutors (part time)</i>	Helen Agus, BSc Barbara Blainey, MSc Rudi G. Schamschula, MDS Allison Vickery, MSc Gerald V. Williams, BSc(Med) MB BS

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## Behavioural Sciences in Medicine

Associate Professor  
and Head of  
Department

Wendy-Louise Walker, BA PhD

Lecturers

Susan Ballinger, BA *Macq.*  
Lorna D. Channon, BSc *Manc.* MSc *Leeds* PhD *Manc.*  
Susan C. Hayes, BA PhD *N.S.W.*

Tutors

Anthony Diment, BSc *N.S.W.*  
Michael D. Fine, BA  
S. Helene Levin, BA *Macq.*

---

## Biochemistry

Professor

Philip W. Kuchel, BSc(Med) MB BS *Adel.* PhD *A.N.U.*

Boden Professor of  
Human Nutrition

A. Stewart Truswell, MD ChB *Cape T.*, FRCP FRACP FFCM

McCaughey Professor

Robert G. Wake, MSc PhD

Associate Professors

James Done, MSc PhD *Lond.*  
Arnold J. Hunt, BSc PhD *Adel.*  
Michael A. Messer, MSc PhD *Melb.*  
Michael B. Slaytor, MSc PhD

Senior Lecturers

Ivan G. Darvey, BSc PhD *N.S.W.*  
Alan R. Jones, PhD *Manc.* MSc  
Richard E. Loughlin, MSc PhD *Melb.*  
M. Dan Montague, BSc PhD *Manc.*  
Reginald W. O'Brien, MSc PhD *N.S.W.*  
Gregory B. Ralston, BSc *N.S.W.* PhD *A.N.U.*  
Michael A. W. Thomas, DPhil *Oxf.* BSc  
Vivian K. L. Whittaker, MB BS *Qld* PhD *A.N.U.*

Lecturers

Audrey M. Bersten, MSc  
Simon Easterbrook-Smith, BSc *Well.* PhD *Adel.*  
*Human Nutrition Unit*  
Janette C. Brand, BSc PhD *N.S.W.* (CIH)  
Ian Darnton-Hill, MB BS *Adel.* DA *R.C.P.&S.* DipND *Flin.*  
(CIH)  
David C. K. Roberts, BSc *Liv.* PhD *A.N.U.*  
Susan Ash, MHP *N.S.W.* BSc DipND (CIH)

*Senior Tutors* Margaret R. Dwyer, BSc PhD  
Kerie Hammerton, BSc PhD  
Dawn P. Mulvena, BSc *Melb.* MSc *Qld*

*Tutors* Mary T. Campbell, PhD *W.Aust.* BSc  
Les A. Johnson, BSc PhD *Qld*  
Kim O'Toole, BSc PhD

---

## **Cancer Medicine**

*Professor* Martin Henry Norman Tattersall, MA BChir MD *Camb.* MSc  
*Lond.*, FRCP FRACP

*Associate Professor* Richard M. Fox, BSc(Med) MB BS PhD, FRACP

---

## **Child Health**

*Professor* Thomas Stapleton, MA DM BCh *Oxf.* DCH *R.C.P.&S.*, FRCP  
FRACP

*Lecturer* D. C. K. Bau, MB BS DCH, MRCP FRACP

*Lecturers (part time)* Eric D. Burnard, MB ChB *N.Z.*, MRCP FRACP (*Care of the  
Newborn*)  
R. John Chapman, MB BS, MRCPed  
C. L. Goh, MB BS *Sing.*, FRACP  
R. Macleod, MB BS  
Stephen Vince, MD *Bud.*

---

## **Community Medicine**

*Professor* Charles Bridges-Webb, MB BS *Melb.* MD *Monash*, FRACGP

*Professor of  
Community and  
Geriatric Medicine* Gary R. Andrews, MB BS, FRCPEd FACMA

*Senior Lecturer* John Barrand, MHPEd *N.S.W.* DA *R.C.P.&S.*, FRACGP  
LMSSA

*Lecturer (temporary)* Gregory Ireland, MB BS

*Lecturers (temporary)  
(part time)* Paula Buckley, MB BS *Monash*  
Noel Hickson, BSc ThL *Melb.* MB BS  
Andrea Mant, MA *A.N.U.* MB BS

W. L. Adams, BSc MB BS, FRACGP  
S. M. Ahern, MB BS *N.S.W.*  
T. Anderson, MB ChB *Glas.* DObst *R.C.O.G.*, FRACGP  
A. Andrew, MB BS MBA *N.S.W.*, FRACGP  
J. K. Arundell, MB BS  
E. Asher, MB BS, FRACGP  
W. R. Atkinson, MB BS *Melb.*, FRACGP  
R. M. Ayres, MB BS *N.S.W.*  
P. J. Baker, MB BS  
R. J. L. Baker, MB BS  
J. Barker-Whittle, MB BS, FRCSEd  
R. E. Barros, MB BS *N.S.W.*  
W. B. Bartlett, MB BS  
J. M. Beith, MB BS, FRCS FRACS  
H. B. Bernard, MB BS  
R. Binks, MB BS, MRACGP  
F. Black, BSc(Med) MB BS, FRACGP  
B. K. Bland, MB BS  
J. Bloomfield, MB BS *N.S.W.*  
P. Bookallil, DObst *R.C.O.G.* MB BS, FRACGP  
H. J. E. Bowen, BSc *N.S.W.* DObst *R.C.O.G.* MB BS, FRACGP  
R. W. Bramley, BDS *N.Z.* MB ChB *Otago* DObst *R.C.O.G.*,  
FRACGP  
D. J. Brennan, MB BS, MRCP FRACP  
P. T. Brown, MB BS  
P. K. Brownlie, MB BS  
A. R. Buhagiar, MB BS, FRACGP  
J. I. Cahill, MB BS, FRACGP  
D. D. Caldwell, MB BS *Qld.*, FRACGP  
P. Cambourn, MB BS  
W. H. Chan, LRCP MRCS FRACGP FAMAS  
A. H. B. Chancellor, MB BS, FRACP FRACGP  
I. Chung, MB BS, FRACGP  
J. Clarke, MB ChB *Leeds*  
G. E. Cocker, MB BS  
J. B Connolly, MB BS  
R. V. Coombes, MB BS  
A. M. Cotterill, MB BS *N.S.W.* DObst *R.C.O.G.*, FRACGP  
A. N. Cowan, MB BS *Lond.* DObst *R.C.O.G.*, LRCP FRCS  
R. C. Crago, DCH *Lond.* MB BS  
P. J. Crawford, MB BS *Tas.*  
T. P. David, DObst *R.C.O.G.* MB BS, FRACGP  
R. W. Deacon, MB BS  
P. B. Deaner, MB BS *Lond.* DObst *R.C.O.G.*, LRCP MRCS  
L. G. Deithe, DObst *R.C.O.G.*, MB BS  
R. M. Dey, MB BS  
S. J. Doumani, MB BS  
J. F. Eather, MB BS *Qld.*  
J. D. Egan, DObst *R.C.O.G.*, MB BS  
E. J. Elkington, BA MB BCh *Oxf.*  
T. D. G. Fairbairn, MB ChB *St.And.*  
M. F. Fernando, MB BS *Ceyl.* DObst *Auck.* MNZCGP



A. E. Fisher, MB BS, FRACGP  
 J. S. Fitzhenry, MB BS, MRCGP  
 I. W. Fitzpatrick, MB BS, FRACGP  
 J. F. Frith, BSc(Med) MB BS *N.S.W.*  
 D. G. Fulton, DObst *R.C.O.G.* MB BS, FRACGP  
 R. W. Fulton, MB BS *N.S.W.* FRACGP  
 P. M. Furey, MB BS  
 A. S. Gabrael, MB BCh *Cairo* FRACGP  
 J. L. Galati, MB BS *Melb.* DObst *R.C.O.G.*, FRACGP  
 J. Gambrill, MB BS *N.S.W.*, FRACGP  
 P. H. Gaston, DCH *R.C.P. & S.* MB BS  
 L. J. Gazal, MB BS  
 A. R. Gibson, MB BS  
 J. G. Gilchrist, DObst *R.C.O.G.* MB BS, FRACGP  
 V. M. Goldrick, DCH *R.C.P. & S.* MB BS  
 N. K. Goundar, MB BS *Andhra*  
 G. B. Grunwald, MD *Bud.* MB BS, FRACGP  
 H. F. Haber, MB BS, FRACGP  
 R. W. Hardie, MB BS  
 B. W. Harding, MB BS, FRACGP  
 B. C. Harris, MB BS, FRACGP  
 J. F. Harris, DObst *R.C.O.G.* MB BS, FRACGP  
 B. H. Heber, MB BS *Lond.* DObst *R.C.O.G.*  
 D. B. Hempton, MB BS *N.S.W.*  
 A. Hollo, MB BS  
 A. G. Hopcroft, MB BS, FRCSEd  
 A. D. P. Hull, MB BS  
 R. S. Jelliffe, MB BS *Lond.* DObst *R.C.O.G.*  
 B. L. Jones, BSc(Agr) MB BS, FRACGP  
 J. M. Jones, DObst *R.C.O.G.* MB BS  
 A. Joshi, MB BS *Bom.*  
 H. Kalmath, MB BS *Bom.*  
 G. Kenny, MB BS, FRACGP  
 V. Kijvanit, MB BS, FRCSGlas FRCSI  
 D. Killer, MB BS *Qld.* FRACP  
 R. Kirkby, MB BS  
 B. Klineberg, MB BS *N.S.W.*, FRACGP  
 W. J. Laurence, MB ChB *Cape T* DCH *Lond.* DObst  
*C.O.G.(S.A.)*  
 R. J. Lee, MB BS  
 A. M. Liebhold, MB BS *Melb.* DCH *Lond.*, FRACGP  
 J. W. Logan, MB BS, FRACGP  
 A. H. Lowy, MB BS, FRACGP  
 E. H. Loxton, DObst *R.C.O.G.* MB BS  
 G. R. Lucas, MB BS  
 N. A. Lucas, DObst *R.C.O.G.* MB BS, FRACGP  
 R. N. McCredie, DObst *R.C.O.G.* MB BS, FRACGP  
 K. McDonald, MB BS, FRACGP  
 J. G. Madden, LRCPs LLM *R.C.P. & S. Irel.*  
 E. M. J. Marshall, MB BCh DAO *Belf.*, FRACGP  
 I. B. Marshall, MB BS *N'cle(U.K.)*, MRCGP FRACGP  
 R. J. Medbury, DObst *R.C.O.G.* MB BS  
 L. W. Middleton, MB BS, FRACGP  
 J. Miller, MB BS *N.S.W.*, FRACGP

M. F. Morgan, MB BS, MRACGP  
 E. Mulvey, MB BS *Melb.*  
 O. R. Muratore, MB BS *N.S.W.*  
 J. D. Musgrove, DCH *Lond.* MB BS  
 G. Naker, MB BS *Bom.*  
 H. Nathan, MD *Sofia*  
 W. L. Osborne, MB BS, MRCPEd FRACGP  
 D. O. Oliver, MB ChB *Edin.* DObst *R.C.O.G.*, MRCGP  
 FRACGP  
 J. O'Loan, MB BS, FRACGP  
 B. F. Pegum, MB BS, MRACGP  
 A. Pennington, MB BS DTM&H, FRACGP  
 D. J. Penny, MB BS  
 A. C. Pepper, MBE, DObst *R.C.O.G.* MB BS, FRACGP  
 A. S. Pollack, MB *Bratislava* DPH *Czech.* MB BS  
 H. B. Pratt, MB ChB *Otago*, FRACGP  
 D. L. A. Pryde, MB BS, FRACGP  
 G. L. Pulley, MB BS  
 R. Ramrakha, MB BS  
 G. S. Reiger, MB BS  
 C. Reitberger, MB BS  
 M. Richardson, MB ChB *Edin.*, MRCGP MRCPsych  
 D. C. Roantree, MB BS *Adel.*  
 J. V. Roche, DObst *R.C.O.G.* MB BS, FRACGP  
 S. Rosenberg, MD *Lodz* MB BS  
 A. W. Rososinski, MB BS *Adel.*, FRACGP  
 R. S. Sekel, MB BS  
 B. Shea MB BS *Qld* DObst *R.C.O.G.*, FRACGP  
 R. Sheather, MB BS  
 P. S. Smeeth, MB BS  
 W. J. Smith, MB BS, FRACGP  
 N. Singh, MB BS *Bom.*, FRACP  
 D. A. Spalding, MB BS *Qld* DA  
 I. G. Spencer DA DCH *Lond.* DObst *R.C.O.G.* MB BS  
 G. W. Steele, MB BS  
 R. D. Stone, MB BS *N.S.W.*  
 J. Talbot, MB BS *Adel.*, FRACGP  
 M. J. Tarlinton, MB BS, FRACGP  
 R. M. Tinning, MB BS  
 J. E. N. Trollor, MB BS *Lond.* DObst *R.C.O.G.*, FRACGP  
 V. L. Velens, MB BS  
 F. J. Vett, BSc MB BS *Qld*, MRCP  
 F. Virant, MB BS  
 I. R. Walker, MB ChB *Brist.*  
 T. D. Wilkins, MB BS  
 M. G. Williams, MB BS *Qld.*  
 F. R. Wilson, DObst *R.C.O.G.* MB BS

*CL in Community and  
Geriatric Medicine  
(part time)*

G. Broe, BA MB BS, FRACP  
R. W. A. Bottoms, MB BS *Lond.*, LRCP FRCS  
T. Cahill, MB BS, FRACP  
T. Choy, MB BS, FRACP  
C. T. Chua, MB BS *N.S.W.* DipAcupuncture, MCGP  
C. F. Clowes, MB BS *N.S.W.*, FRACP  
K. D. Coorey, DCH *Lond.* MB BS, FRCPEd  
K. Cotton, PhD *Lond.* MD BS  
P. J. D'Arbon, MB BS, FRACGP  
C. C. Ewart, MB BS, MRCP  
A. Ganora, MB BS, FRACGP  
D. Garrard, MB BS  
T. Gavranic, MB BS DPH, FRACP  
R. B. Geeves, MB BS, FRACGP FRCPSing  
T. Gibian, MB BS, FRACP  
A. N. Gyory, MS *Minn.* BSc(Med) MB BS, MRCP  
E. Imperial, MD *Phil.*, FRCP FPCC FACC  
P. Kelleher, MB BS, FRACP  
J. E. Marosszeky, DPRM *Aust. PG.Fed.Med.* MB BS  
G. Miller, MB BS *Lond.*, MRCP  
P. S. Morey, MPH *Harv.* MB BS, FRACP  
J. Murphy, MB BS *W. Aust.*, FRACP  
L. Mykyta, MB BS *Adel.*, MRCP FRACP  
R. J. Oakeshott, DPRM *Aust.PG.Fed.Med* MB BS, FRCSEd  
FRACS  
T. J. O'Neill, DObst *R.C.O.G.* MB BS, FRACGP  
S. Prakash, MB BS *Madr.* MS *New Delhi*, FRACS  
M. Price, MB BS, FRACP  
G. Roberts, MB ChB *Cape T.*  
P. Sinnett, MD BS, FRACP  
J. Stephenson, MB BS *Lond.*, LRCP MRCS  
B. H. Stone, MB BS, FRCSEd  
N. Sweeney, BSc MB BS, FRCSEd FRACS  
T. Underwood, MB BS *Ceyl.* DCH *Lond.*, MRCP ARIC  
J. H. E. Voss, MB BS, FRACP  
S. Williams, MB BS, FRANZCP  
C. Wong, MB BS *Sing.*, FRACP

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## **Diseases of the Ear, Nose and Throat**

*Lecturer (part time)*

John H. Seymour, MB BS, FRCS

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## **Diseases of the Skin**

*Lecturer (part time)*

W. E. de Launey, MB BS DDM, FACD FRACP

## Histology and Embryology

*Bosch Professor*

Kenneth Wollaston Cleland, MB BS

*Reader*

John K. Pollack, PhD *McG* BSc

*Associate Professor*

Clifford J. Griffin, DDSc (*Dental Histology and Embryology*)  
Ernst W. van Lennep, NatPhil Drs *Utrecht*

*Senior Lecturers*

Clare A. Rae, PhD *N.E.* BSc  
Cedric D. Shorey, MSc PhD *N.S.W.*, CGIA FIST  
George E. Sullivan, MSc *N.Z.* PhD

*Lecturers*

Lynette A. Moffat, BSc PhD  
Margaret A. Swan, BSc PhD  
John McAvoy, BSc *Belf.* PhD *Flin.*

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## Medicine

*Bushell Professor of  
Neurology and Head of  
Department*

James Graham McLeod, DPhil *Oxf.* BSc(Med) MB BS, FRCP  
FRACP FAA

*Professors*

Peter Anthony Castaldi, MD BS, FRACP FRCPA  
Douglas William Piper, MD BS, FRCP FRACP  
James Roland Lawrence, MB BS *Adel.*, FRACP Hon. FACP  
John R. Turtle, MD BS, FRACP

*Scandrett Professor  
Cardiology*

David Thomas Kelly, MB ChB *N.Z.*, FRACP FACC

*Professor of  
Immunology*

Antony Basten, MB BS *Adel.* DPhil *Oxf.*, FRCP FRACP  
FRCPA

*Reader*

William K. T. Fowler, MSc *N.Z.* PhD *Lond.* (*Medical Physics*)

*Associate Professors*

Akos Z. Gyory, MD, FRACP  
John D. Pollard, BSc(Med) MB BS PhD, FRACP  
Solomon Posen, BA MD BS *Adel.*, MRCP FRACP  
Ann J. Woolcock, MB BS *Adel.* MD, FRACP

*Senior Lecturers*

Peter J. Fletcher, MB BS PhD, FRACP  
Tania C. Sorrell, MD BS *Adel.*, FRACP  
Colin E. Sullivan, MB BS PhD, FRACP  
Ronald S. Walls, MB ChB *Cape T.* DPhil *Oxf.* FCP(SA)  
FRACP FRCPA  
Denis K-S Yue, MB BS PhD, FRACP

*Lecturer (temporary)*

Robert L. Raison, BSc PhD *Monash*

*CL in Medicine*

**At Royal Prince Alfred Hospital**  
R. Batey, BSc(Med) MB BS, FRACP  
R. A. V. Benn, BSc MB BS, FRACP  
J. A. Burgess, MB BS, FRACP

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CL: Clinical Lecturer (part time)

F. H. Burns, MB BS, MRCP FRACP  
D. T. Church, MB BS, FRACP  
M. L. Cohen, MB BS, FRACP  
P. E. Donnelly, PhC MB BS, FRACP  
G. G. Duggin, PhC MB BS, FRACP  
N. D. Gallagher, MD BS, FRACP  
J. M. Greenway, MB BS, MRCP FRACP  
B. M. Hall, MB BS, FRACP  
J. E. Hassall, MB BS, FRACP  
J. Horvath, MB BS, FRACP  
Aet Joasoo, MD BS, FRACP  
J. R. Johnson, MB BS, FRACP  
R. M. H Kater, MB BS, FRACP FRCP  
J. Leicester, MB BS, FRACP  
R. H. Loblay, MB BS, FRACP  
G. L. McDonald, BA MB BS, FRCP FRACP  
P. S. Morey, MB BS, FRACP  
R. J. Mulhearn, MB BS, FRCP FRACP  
K. W. Perkins, MB BS, FRACP  
P. C. Thorpe, MB BS, MRCP MRACP  
D. Tiller, MB BS, FRACP  
P. R. Wikramanayake, MB BS, FRACP  
J. York, MD *Melb.* MB BS, FRACP  
W. Zylstra, MB BS DTM&H, FRACP

*CL in Cardiology*

I. K. Bailey, MB BS, FRACP  
L. Bernstein, MB BS, FRACP  
P. J. Harris, BSc(Med) MB BS PhD  
J. G. Richards, MB BS, FRCP FRACP  
D. R. Richmond, MB ChB BSc *Leeds MSc Minn.*, MRCP  
FRACP

*CL in Dermatology*

I. H. E. Dawson, MB BS  
Katherine E. Georgouras, MB BS DDM, FACD  
W. A. Land, MB BS DDM, MACD  
B. McGraw, MB BS DDM, MACD

*CL in Haematology*

D. Joshua, PhD *Oxf.* MB BS, FRACP, FRCPA  
H. Kronenberg, MB BS DCP, FRACP FRCPA FRCPath  
K. A. Rickard, MB BS *Melb.*, FRACP FRCPA MRCPath  
FCAP

*CL in Neurology*

J. L. Allsop, MB BS, FRACP  
G. M. Halmagyi, MB BS, FRACP  
J. Walsh, BSc(Med) MD BS, FRACP

*CL in Thoracic  
Medicine*

P. Gianoutsos, MB ChB *N.Z.*, FRACP  
H. P. B. Harvey, MB BS, FRCP FRACP  
J. H. Lee, MB BS, FRACP  
D. Lindsay, MD BS, FRACP  
I. Young, MB BS, FRACP

### **At Sydney Hospital**

#### *CL in Medicine*

W. J. Benson, MB BS, FRCP FRACP  
S. Colagiuri, MB BS, FRACP  
P. Clifton-Bligh, BSc(Med) MB BS, FRACP  
P. N. Francis, MB BS, MRCP FRACP  
J. R. Graham, BSc(Med) MB BS, MRACP  
J. P. Ingham, MB BS DCH *Lond.*, MRCP MRCPEd MRACP  
J. W. James, MB BS, FRACP  
R. Jeremy, MB BS, FRACP  
R. G. Lewis, MB BS, FRCP FRACP  
J. F. Mahony, MB BS, FRACP  
S. P. Mistilis, MB BS, FRACP  
A. S. Mitchell, MB BS, FRACP  
V. Phadke, MB ChB *Makerere*, FRACP FRCPA  
P. C. Pigott, MB BS, MRCP FRACP  
J. Raftos, MB BS, FRACP  
C. S. H. Reed, MB BS, FRACP  
G. S. Stokes, MD *NSW* MB BS, FRACP  
I. L. Thompson, MB BS, FRCP FRACP  
P. C. Vincent, BSc(Med) MD BS, FRACP FRCPA

#### *CL in Dermatology*

A. G. Finley, OBE ED, MB BS DDM, FACD  
E. Lobel, MB BS PhD DDM, FACD  
R. McCullagh, MB BS DDM, FACD

#### *CL in Cardiology*

J. W. James, MB BS, FRACP  
R. G. Lewis, MB BS, FRCP FRACP  
A. S. Mitchell, MB BS, FRACP  
H. J. Paoloni, MD BS, FRACP

#### *CL in Endocrinology*

P. Clifton-Bligh, BSc(Med) MB BS, FRACP  
S. Colagiuri, MB BS, MRACP  
J. P. Ingham, MB BS DCH, MRCP MRCPEd  
R. Mason, MB BS

#### *CL in Gastroenterology*

A. R. Brown, MB ChB *N.Z.* FRCS FRACS  
P. N. Francis, MB BS, MRCP FRACP  
J. R. Graham, BSc(Med) MB BS, FRACP  
S. P. Mistilis, MB BS, FRACP

#### *CL in Haematology*

W. J. Benson, MB BS, FRACP FRCP  
S. Gordon, MB BS DCP, FRCPA MRCPath MRACP  
V. J. McPherson, MB BS, FRCPA  
C. S. H. Reed, MB BS, FRACP  
I. L. Thompson, MB BS, FRCP FRACP  
P. C. Vincent, BSc(Med) MD BS, FRACP FRCPA

#### *CL in Renal Medicine*

R. Caterson, MB BS, FRACP  
J. F. Mahony, MB BS, FRACP  
E. Savdie, MB BS DTMH, MRCP FRACP  
G. S. Stokes, MD *N.S.W.* FRACP

*CL in Neurology*

L. S. Basser, MB BS, MRCP FRACP  
R. Garrick, MB BS, MRCP FRACP  
G. O. A. Lord, MB BS *N.S.W.*, MRACP  
W. H. Wolfenden, MB BS, FRCP FRCPEd FRACP

*CL in Rheumatology*

R. Jeremy, MB BS, FRACP

*CL in Thoracic  
Medicine*

M. Harris, BSc MB BS *N.S.W.*, MRCP FRACP  
P. Pigott, MB BS, MRCP FRACP  
S. F. Tattersall, MD BS *Lond.*, MRCP FRACP

*CL in Medicine*

**At the Royal North Shore Hospital of Sydney**

D. H. Allen, MB BS, PhD, FRACP  
G. E. Bauer, MB BS, FRCP FRACP FACC  
P. G. Caspari, MB BS, FRACP FACC  
R. A. Cooper, MB BS, FRACP  
G. Diethelm, MB BS  
A. C. Edwards, MB BS, FRACP  
R. C. Edwards, MB BS, FRACP MRCP  
F. M. Elliott, MB BS PhD, FRACP  
R. G. Epps, BSc MB BS, FRCP FRACP  
D. I. Fevre, MB BS, FRACP  
B. L. Geddes, MB BS, FRACP  
J. F. Gunning, MD BS, FRACP FACC  
I. B. Hales, MD BS, FRCP FRCPEd FRACP  
T. R. Heap, MB BS, FRACP  
L. S. Ibels, MB BS, FRACP  
J. P. Isbister, BSc(Med) MB BS, FRACP FRCPA  
R. Joffe, MB BCh, FRCP FRACP  
R. W. Johnston, MB BS DPM, FRCP FRACP  
K. O. Jones, MB BS DCP, FRCPA FRCPath  
J. A. Levi, MB BS, FRACP  
M. R. Lunzer, MB BS, MRCP FRACP  
W. R. J. Middleton, BSc(Med) MD BS, FRCP FRACP  
G. S. Nagy, MB BS, FRCP FRACP  
R. J. Oakeshott, MB BS DPRM, FRCSEd FRACS FACRM  
R. F. O'Reilly, MB BS, FRACP  
J. H. Price, MB BS, FRCPEd MRCPI FRACP  
R. B. M. Ravich, MB ChB *N.Z.*, FRACP  
R. D. Scurr, MB BS, FRCPA  
M. R. Shanahan, MB BS *N.S.W.* DTM&H *Liv.*, FRACP  
G. Shenfield, MB BCh *Oxf.*, MRCP FRACP  
B. H. Short, MB BS, FRACP  
J. N. Stiel, MB BS, FRACP  
M. Sulway, MD *Birm.* MB BS, FRACP  
T. R. Terenty, MB BS, FRACP  
I. D. Thomas, MB BS, FRCP FRACP  
R. A. Vandenberg, MB BS, FRACP  
J. Webb, MD BS *Qld.* FRACP  
J. V. Wells, MD BS *N.S.W.*, FACP FRCPA FRACP

## STAFF

P. M. Williamson, MB BS, FRACP  
 E. G. Wilmshurst, MD BS, FRACP  
 J. D. Wingfield, MB BS, FRACP  
 J. C. Wiseman, MD BS FRACP

*CL in Cardiology*

G. Bauer, MB BS, FRCP FRACP FACC  
 P. Caspari, MB BS, FRACP FACC  
 G. L. Donnelly, MB BS, FRCP FRACP  
 A. C. Edwards, MB BS, FRACP  
 R. C. Edwards, MB BS, MRCP FRACP  
 J. Gunning, MD BS, FRACP FACC  
 S. Hunyor, MB BS, FRACP FACC

*CL in Dermatology*

G. S. Cottee, MB BS DDM, FACD  
 M. Downie, MB BS *N.S.W.* DDM  
 N. Goldman, MB BS  
 J. M. Lark, MB BS, FACD  
 J. L. Le Guay, MB BS DDM, FACD

*CL in Haematology*

J. P. Isbister, BSc(Med) MB BS, FRCPA FRACP  
 K. O. Jones, MB BS DCP, FRCPath FRCPA  
 K. S. Lau, MB BS *Malaya*, FRCPA  
 R. D. Scurr, MB BS, FRCPA

*CL in Neurology*

R. Joffe, MB BCh, FRCP FRACP  
 R. W. Johnston, MB BS DPM, MRCP FRACP  
 G. Selby, MD BS, FRCP FRCPEd FRACP  
 T. R. Terenty, MB BS, FRACP  
 P. M. Williamson, MB BS, FRACP  
 J. D. Wingfield, MB BS, FRACP

*CL in Paediatric  
Medicine*

P. Barr, MB BS, MRACP  
 G. J. Bench, MB BS FRACP  
 J. Davis, MB BS, FRACP  
 R. H. Vines, MB BS DCH *Lond.*, FRCP FRACP

*CL in Rheumatology*

A. B. Corrigan, DipPhysMed *Lond.*, MB BS, MRCPEd FRACP  
 J. B. Dick-Smith, MB BS  
 M. J. Cross, MB BS, FRACS  
 S. Dodman, MB ChB *Manc.*, MRCP FRACP  
 R. G. Robinson, OBE, MB BS, FRACP  
 J. Webb, MD BS *Qld*, FRACP

*CL in Thoracic  
Medicine*

D. H. Allen, MB BS PhD, FRACP  
 C. W. Clarke, PhD *Lond.* MB BS, FRACP  
 F. M. Elliott, PhD *Lond.* MB BS, FRACP  
 B. L. Geddes, MB BS, FRACP  
 J. B. Lawson, MB BS, FRACP  
 R. A. Vandenberg, MB BS, FRACP

*CL in Medicine*

**At Repatriation General Hospital, Concord**  
 B. J. Arnold, MB BS DCP, FRCPA FRCPath FRACP  
 W. J. Arter, MB BS, FRACP  
 A. S. Balint, MB BS, FRACP



W. J. Benson, MB BS, FRACP FRCPA  
 C. R. B. Blackburn, MD BS, FRCP FRACP Hon.FACP  
 A. B. X. Breslin, MB BS, FRACP  
 T. Burfitt Williams, MB BS, FRACP  
 H. Burns, MB BS, FRACP  
 J. N. Carter, BSc(Med) MD BS, FRACP  
 Y. T. Choong, MB BS, FRACP  
 P. V. Collett, MB BS, FRACP  
 I. S. Collins, MB BS, FRACP FRCPEd  
 A. B. Conomy, MB BS, FRACP  
 A. B. Corrigan, DipPhysMed Lond. MB BS DPM, MRCPEd  
 MRCP  
 J. L. Cowlshaw, MB BS, FRACP  
 G. G. Crane, MB BS, FRACP FRCPA  
 R. A. Evans, MB BS, FRACP  
 A. Flemming, MD BS, MRCP FRACP  
 C. R. George, MB BS, FRACP  
 M. Gillies, MB BS, FRACP  
 K. Goulston, MD BS, FRACP  
 F. Hanly, MB BS, FRCPA  
 F. Harding-Burns, MB BS, FRCP FRACP  
 M. R. Harris, MSc MB BS, MRCP FRACP  
 B. J. S. Hartnett, MB BS, FRCPEd FRACP  
 P. W. Harvey, MB BS, FRACP  
 J. Hewson, MB BS, FRCPA  
 S. N. Hunyor, MB BS, FACC FRACP  
 C. R. Jenkins, MB BS  
 R. Joffe, MB BCh, MRCP FRACP  
 S. Kalowski, MB BS, FRACP  
 S. Kannangara, MB BS, FRACP  
 C. H. Katelaris, MB BS  
 D. Latt, MB BS, FRACP  
 P. Lawrence, MB BS, FFARACS  
 G. D. Lord, MB BS, FRACP  
 V. A. Lovric, MB BS DipClinPath, FRCP FRCPA FRACP  
 R. A. Mackenzie, MB BS, FRACP  
 P. J. Maloney, MB BS, MRCP FRACP  
 G. E. Marlin, MB BS, FRACP  
 G. Nicholson, MB BS PhD, FRACP  
 N. R. Noble, MB BS, FRACP  
 G. O'Neill, MB BS, FRACP  
 N. Patel, MD BS, FRACP  
 C. G. Pawsey, MB BS, FRACP  
 O. Peiris, MD BS *Ceyl.*, MRCPEd MRCP FRACP  
 K. Phadbe, MB BS, FRACP FRCPA  
 R. A. Royle, MB BS, FRACP  
 D. Sharpe, MB BS, FRCP  
 D. Spencer, MB BS, FRACP  
 S. Waller, MD MScChem Lond., MRCP MRCPEd FRACP  
 P. Wikramanayake, MD *Ceyl.* BS, FRACP MRCP FRCPEd  
 R. N. Wyndham, MB BS, FRACP

*CL in Dermatology* C. L. Bear, MB BS DDM, FACD  
G. D. Cains, MB BS, FACD  
L. J. Cains, MB BS DDM, FACP  
G. Palmer, DDM *Vienna* MB BS, FACD FRCPEd MRCP  
W. Regan, MB BS DDM, FACD  
J. S. Brooks, BA MB BS DDM, FACD

*CL in Medicine* **At Lidcombe Hospital**  
J. A. Booker, MB BS, MRCP FRACP  
T. M. Cahill, BA MB BS, FRACP  
T. Choy, MB BS, FRACP  
C. F. Clowes, MB BS FRACP  
T. P. Gibian, MB BS, FRACP  
P. Kelleher, MB BS, FRACP

*CL in Gastro-  
enterology* T. Tydd, MB BS, FRACP

*CL in Haematology* W. Hughes, MB BS, FRCPA

*CL in Neurology* G. A. Broe, BA MB BS, FRACP  
H. Creasy, MB BS, FRACP  
C. Elliott, MB BS, FRACP  
V. Vignaendra, MB BS, FRACP

*CL in Rheumatology* K. D. Coorey, MB BS DCH, MRCPed

*CL in Thoracic  
Medicine* J. Mann, MB BS, FRACP

*CL in Dermatology* K. Georgouras, MB BS DDM, FACD

*CL in Cardiology* R. Dunn, MB BS, FRACP  
E. Imperial, MD, FPCP FPCC FACC

*CL in Endocrinology* J. Tidmarsh, MB BS, FRACP

*CL in Medicine* **At Mater Misericordiae Hospital**  
L. B. Coy, MB BS, FRACP  
G. Diethelm, MB BS  
R. Edwards, MB BS, FRACP  
R. F. O'Reilly, MB BS, FRACP  
D. Sinclair, MB BS, FRCPCan FRACP  
J. R. Johnson, MB BS, FRACP  
I. S. Love, MB BS, FRACP

*CL in Dermatology* M. Rogers, MB BS, FACD  
G. S. Cottee, MB BS DDM, FACD

*CL in Paediatric  
Medicine* **At Royal Alexandra Hospital for Children**  
G. Angel-Lord, MB BS  
G. Bench, MB BS DCH, FRACP  
R. Binks, MB BS, MRACGP  
J. M. Brown, MB BS, FRACP  
M. Burgess, MD BS, FRACP

R. Burns, MB BS DCH  
 B. C. Callaway, MB BS, MRACGP  
 C. Campbell, MB BS DPM, MANZCP  
 J. M. Celermajer, MB BS, FRACP  
 R. J. Chapman, MB BS, MRCPed  
 P. Christopher, MB BS  
 J. R. Davis, MB BS, FRACP  
 C. Enfield, DA MB BCh DPM, MRCPsych  
 D. Fox, MB BS DPH  
 M. D. Gett, MB BS, FRACP  
 B. Green, MB BS DPM, MANZCP  
 C. Green, MB BCh *Belf.* DCH, MRCP MRCP FRACP  
 H. F. Haber, MB BS  
 B. Hamilton, MB BS  
 R. Hindmarsh, MB BS  
 R. Kamath, MB BS, FRACP  
 H. Kilham, MB BS, FRACP  
 B. Kinghorn, MB BS  
 J. E. Lawrence, MB BS  
 A. Lipson, MB BS, FRACP  
 E. Loughman, MB BS  
 J. D. McDonald, MB BS, FRACP  
 R. Macleod, MB BS  
 C. Mellis, MB BS, FRACP  
 H. Merrington, MB BS, FRACGP  
 J. Muller, MB BS DCH, MRACGP  
 R. K. Oates, MB BS, FRACP  
 R. A. Ouvrier, BSc(Med) MB BS, FRACP  
 J. C. J. Quoyle, MB BS, FRACP  
 C. Reye, MB BS  
 W. G. Roper, MB BS DCH  
 L. P. Roy, BSc(Med) MB BS, FRACP  
 G. L. Serfontein, MB ChB MMed(Paed) *Stell.*, FCP(SA) FRACP  
 M. Silink, MB BS, FRACP  
 G. Soutter, MB ChB *Cape T.* DCH *R.C.P.&S.*  
 A. Stewart, MB BS  
 J. Sullivan, MB BS, MRANZCP  
 D. Thomas, MB BS  
 W. K. Thompson, MB BS  
 J. Tindale, MB BS  
 A. R. Tink, MB BS, FRACP  
 W. B. Utber, MB BS, MRACGP  
 S. Vince, MD *Bud.*  
 R. H. Vines, DCH *R.C.P.&S.* MB BS, MRCP FRACP  
 H. Walsh, MB BS  
 J. G. Watson, BEc BA MB BS, MRACGP  
 R. Williams, MB BS, MRANZCP  
 J. S. Yu, DCH *R.C.P.&S.* MB BS, FRACP  
 L. J. Cains MB BS DDM, MACD  
 M. B. Lewis, MB BS DDM, MACD

*CL in Paediatric  
 Dermatology*

*CL in Paediatric  
Pathology*

P. M. Bale, MB BS *Melb.*, FRCPA MRCPPath  
G. J. Bryant, MB BS *Qld.*, FRCPA  
D. C. Dorman, BSc *Adel.* PhD *Lond.*  
A. E. Kan, MB BS, FRCPA  
A. T. Lammi, MB BS, FRACP FRCPA

*CL in Medicine*

**At the Westmead Centre**

David V. Cody, MB BS, FRACP  
Ian S. Collins, MB BS, FRCP FRACP  
Paul Despas, MB BS, FRACP  
Creswell J. Eastman, MD BS, FRACP  
Ludwig A. Engel, PhD *McGill* MB BS *Melb.*, FRACP  
Peter E. Gillespie, MB BS, FRACP  
Patrick W. Harvey, MB BS, FRACP  
Thomas I. Robertson MB BS, FRACP FRCP  
Paul Russell, MB BS, FRACP  
John Stewart, MB ChB *N.Z.*, FRACP FRCP  
Alan P. Skyring, MB BS, FRACP  
Peter C. Waugh, MB BS, FRACP FACA  
Alan Young, MB BS, FRACP FRCP

*CL in Cardiology*

David V. Cody, MB BS, FRACP  
Paul Russell, MB BS, FRACP  
John F. B. Uther, MD BS, FRACP  
Alan Young, MB BS, FRACP FRCP

*CL in Dermatology*

Christopher Commens, MB BS, FACD  
Joseph F. Krivanek, MB BS, FACD

*CL in Haematology*

Wilbur Hughes, MB BS, FRCPA  
Jerry Koutts, MD BS, FRACP FRCPA  
Thomas I. Robertson MB BS, FRACP FRCP

*CL in Neurology*

Cyril F. Elliott, MB BS *Qld.*, FRACP  
Ivan Lorentz, MB BS, FRCP FRACP  
John Morris, DM BCh BA *Oxf.*, MRCP FRACP  
Grant Walker, MB BS, FRACP

*CL in Thoracic  
Medicine*

Paul Despas, MB BS, FRACP  
Ludwig A. Engel, PhD *McGill* MB BS *Melb.*, FRACP  
Ian Gardiner, MB BS, FRACP

*CL in Endocrinology*

Creswell J. Eastman, MD BS, FRACP  
James R. Hazel, MB BS *Qld.*, FRSTM&H FRACP  
Howard C. Smith, BSc(Med) MB BS, FRACP

*CL in Renal Medicine*

John Stewart, MB ChB *N.Z.*, FRCP FRACP

*CL in Rheumatology*

Graydon Howe, MB BS, FRACP  
David G. Spencer, MB BS, FRACP

*CL in Immunology*

Sumitra Kamath, MB BS DCP, FRCPA  
Graeme Stewart, BSc(Med) MB BS, FRACP

*CL in Infectious  
Diseases Medicine*

Rosemary Munro, MB BS DipBact *Manc.*, MRCP  
MRCPath

*CL in Nuclear Medicine  
and Ultrasound*

John E. Arnold, MB BS, FRACP  
David B. Carseldine, MB BS DCH *Lond.* DDU *Aust. Soc. Ult.  
Med.*, MRCP FRACP  
Ernest F. Crocker, MB BS BSc DDU, FRACP  
Simon M. Gruenewald, MB ChB MSc *Cape T.*, MRCP  
Anthony G. Walker, MB BS DDU *Aust. Soc. Ult. Med.*, FRACP

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## **Obstetrics and Gynaecology**

*Professor and  
Head of Department*

Christopher Neville Hudson, MB MChir *Camb.*, FRCS  
FRCOG FRACOG

*Professor*

Rodney Philip Shearman, MD BS DGO, FRCOG FRACOG

*Reader*

Bevan L. Reid, MD BS BVSc DTM&H

*Associate Professors*

Ian S. Fraser, BSc MB ChB *Edin.*, FRACOG  
J. Derek Llewellyn-Jones, OBE, BA MD BCh MAO *Dub.*,  
FACOG FRACOG  
Douglas M. Saunders, MD BS, FRACS FRCOG FRACOG

*Senior Lecturers*

Suzanne F. Abraham, MSc PhD *Melb.*  
J. Geddis Grudzinskas, BSc MB BS, MRCOG FRACOG  
Brian J. Trudinger, BSc(Med) MB BS, FRCS MRCOG  
FRACOG

*CL in Obstetrics and  
Gynaecology*

### **At the Women's Hospital, Crown Street**

J. C. Anderson, MB BS, MRCOG FRACOG  
Richard Bellingham, MB BS, MRCOG FRACOG  
Warwick R. S. Birrell, MB BS, FRCOG FRACOG  
Reginald Bowman, MB BS, FRCOG FRACOG  
Ian T. Brake, MB BS, FRCOG FRACOG  
W. Brooks, MB BS, MRCOG  
Peter H. Crowe, MB BS, FRCS FRACS FRCOG FRACOG  
D. Itzkowic, BSc(Med) MB BS, MRCOG FRACOG  
William G. McBride, AO CBE, MD BS, FRCOG FRACOG  
John D. Murray, MB BS, FRCOG FRACOG  
Victor Pannikote, MB BS, FRCOG FRACOG  
G. Paul, MB BS, MRCOG FRACOG  
Struan B. Robertson, MB BS, FRCOG FRACOG  
E. Tishler, MB BS, MRCOG FRACOG  
G. Turner, MB ChB *St. And.* DCH, MRCPEd FRCPCan

*CL in Bacteriology,  
Pathology and  
Cytology in Obstetrics  
and Gynaecology*

Y. Holcombe, MB BS, FRCPA

*CL in Care of the  
Newborn*

Graham J. Bench, DCH *R.C.P.&S.* MB BS, MRACP  
Elizabeth John, MD BS *Madras.*, FRACP

*CL in Obstetrics and  
Gynaecology*

**At Royal Prince Alfred Hospital**

K. H. Atkinson, MB BS, MRCOG  
Alan H. Bradfield, MB BS DGO, MRCOG  
Andrew G. Child, MB BS, MRCOG  
J. V. Malcolm Coppleson, MD BS, FRCOG  
Peter M. Elliot, MB BS DGO, MRCOG  
Susan E. Fleming, MB BS, MRCOG  
Anthony M. Frumar, MB BS, FRCOG  
Frederick C. Hinde, MB BS DGO, MRCOG FRCSEd FRACS  
R. P. Jansen, BSc(Med) MB BS, FRACP MRCOG  
Andrew R. Korda, MB BS, MRCOG  
John W. Knox, MB BS, FRCSEd FRCOG FRACS  
Ronald Lawrence, MB BS DGO, FRCOG  
Robert C. Lyneham, MB BS, MRCOG  
Gordon M. Parkin, MB BS DGO, FRCOG  
H. John Solomon, MB BS DGO, MRCOG

*CL in Bacteriology,  
Pathology and  
Cytology in Obstetrics*

Peter Russell, BSc(Med) MB BS, FRCPA  
Patricia Bannatyne, MB BS, FRCPA

*CL in Care of the  
Newborn*

M. Gett, MB BS, MRACP  
D. Henderson-Smart, MB BS PhD, FRACP  
Con James, MB BS  
P. Lancaster, MB BS *Qld.*, FRACP  
G. N. Bruce Storey, DABP *Amer. Bd Paediatrics* MB BS,  
MRACP  
B. Wyeth, MB BS, FRACP

*CL in Obstetrics and  
Gynaecology*

**At the Royal North Shore Hospital of Sydney**

E. S. Boyce, MB BS, MRCOG FRACOG  
J. C. Hunter, MB BS, MRCOG FRACOG  
W. Geoffrey Jasper, MB BS, FRCOG FRACOG  
I. McN. Kelso, MB BS *N.S.W.*, MRCOG FRACOG  
John F. Kemp, MB BS, FRCSEd FRCOG FRACS FAGO  
FRACOG  
John F. Leaver, MB BS, FRCOG FRACOG  
D. C. Morton, DDU *Aust. Soc. Ult. Med.* MB BS, FRCOG  
FRACOG  
W. Hugh Patterson, MB BS, FRCOG FACS FRACOG  
John C. Pennington, MB BS, MRCOG FRACOG  
David W. Pfanner, MB BS, FRCSEd FRACS FRCOG  
FRACOG  
Richard H. Picker, DDU *Aust. Soc. Ult. Med.* MB BS, FRCSEd  
MRCOG FRACOG  
Ewen Sussman, MB BS, FRCOG FRACOG  
Ian D. Truskett, MB BS, FRCOG FRACOG

*CL in Bacteriology,  
Pathology and  
Cytology in Obstetrics*

Keith O. A. Jones, MB BS DCP, MRCPATH MCPA

*CL in Neonatal  
Paediatrics*

P. A. Barr, MB BS, FRACP  
G. J. Bench, DCH *Lond.*, MB BS, FRACP  
J. R. Davis, MB BS, FRACP  
Robert H. Vines, MB BS DCH *Lond.*, MRCP FRACP

*CL in Obstetrics and  
Gynaecology*

**At St Margaret's Hospital for Women**

Kenneth L. Collins, MB BS, FRCOG FAGO  
Marc D. Manion, MB BS, FRCOG FAGO  
Peter C. McAuliffe, MB BS DGO *Dub.*, LM *Rotunda*, FRCOG  
FAGO FRACOG  
David H. McGrath, MB BS, FRCOG FAGO  
Robert J. F. McInerney, CMG, MB BS, FRCS FRACS FACS  
FRCOG FAGO FRACOG  
Clifton J. Ryan, MB BS, FRCOG FAGO  
John K. Tully, MB BS, FRCOG FAGO FRACOG  
David H. Eizenberg, MB BS, MRCOG FAGO FRACOG  
Keith G. Hartman, MB BS, MRCOG FAGO FRACOG  
Michael J. Fortune, MA *Camb.*, MB BCh, MRCOG FAGO  
FRACOG  
Terence J. Cody, MB BS, MRCOG FAGO FRACOG  
John V. Mutton, MB BS, MRCOG FAGO FRACOG  
Anthony A. Pickett-Heaps, MB BS, MRCOG FAGO  
FRACOG

*CL in Anaesthetics*

Michael G. Scarf, MB BS, FFARACS

*CL in Bacteriology,  
Pathology and  
Cytology in Obstetrics*

Mary Heseltine, MB BS, FRACP FRCPA MRCPPath

*CL in Care of the  
Newborn*

Graham Bench, MB BS DCH, FRACP  
Peter Van Vliet, BSc MD *N.S.W.*, MB BS, FRACP

*CL in Obstetric  
Medicine*

Richard O'Reilly, MB BS, FRACP

*CL in Radiology  
(Obstetric)*

T. Paul Loneragan, MB BS DDR, FRACR

*CL in Obstetrics and  
Gynaecology*

**At the Westmead Centre**

Antony Baccarini, MB BS, FRCOG FRACOG  
Alexander J. Crandon, PhD *Leeds*, MB BS, MRCOG FRACOG  
Geoffrey L. Driscoll, MB BS, MRCOG FRCS FRACOG  
James S. Gibson, MB BS, FRCOG FRCS FRACOG  
Kim B. Kuah, MB BS *Sing.*, MRCOG FICS FRACOG  
Roderick D. MacDonald, MB BS, FRCS FRACS FRCOG  
FRACOG  
George A. Mobbs, MB BS, FRCOG, FRACOG  
Michael J. Simcock, BMedSc MB ChB *N.Z.*, FRCS FRCOG  
FRACOG  
Brian R. Spurrett, MB BS, MRCOG FRACOG

*CL in Family Planning*

Barbara W. Simcock, MB BS BSc, MRCS LRCP

*CL in Gynaecological  
Pathology*

Phillip J. Baird, MB BS, FRCPA

*CL in Venereology*

John A. Moran, MB BS DipVEN

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## **Ophthalmology and Eye Health**

*Professor of Clinical  
Ophthalmology*

Frank A. Billson, MB BS *Melb.* DO *R.C.P.&S.*, FRCSEd FRCS  
FRACS FACS FRACO

*Lecturer*

Jan Wennerstrom, MD *Uppsala*

*Lecturers  
(part time)*

Frank Martin, MB BS DO, FRACO FRACS

Justin Playfair, MB BS, FRACS FRACO

P. A. Rogers, MB BS DO, FRACS FRACO

*CL in Ophthalmology*

### **At Royal Prince Alfred Hospital**

P. S. Duke, MB BS DO, FRCS FRACS FRACO

L. F. Hann, MB BS DO, FRACO

H. L. Hughes, AM, DO *Melb.* DOMS *Lond.* MB BS, FRACS  
FRACO

I. B. Jack, MB BS DO, FRACO

B. Kurdian, MB BS DO *Melb.*, FRACS FRACO

S. Saunders, DOMS *Lond.* MB BS, LRCP MRCS FZS

L. F. Shanahan, DO *Lond.* MB BS, FRACO

K. M. Silva, MB BS *Qld* DO *R.C.P.&S.*, FRCS FRACO

H. Stern, MB BS *W.Aust.* DO, FRACO

R. F. Taylor, DO *Lond.* MB BS, FRCS FRACS FRACO

D. T. Treloar, MB BS DO, FRACS FRACO

*CL in Ophthalmology*

### **At Sydney Hospital**

E. J. Donaldson, MB BS DO, FRACS FRACO

P. Hanbury, MB BS DO, FRACO

R. A. Higgins, MB BS DO, FRACS FRACO

J. W. Hornbrook, DO *R.C.P.&S.* MB BS, FRACO

A. B. L. Hunyor, BSc(Med) MB BS DO, FRACS FRACO

F. J. Martin, MB BS DO, FRACS FRACO

E. J. Milverton, MB BS DO, FRACO

W. Muntz, DO *R.C.P.&S.* and *Vienna* MB BS, FRACO

J. Playfair MB BS, FRACS FRACO

G. Pittar, DO *Lond.* MB BS, FRCSEd FRACO

L. P. Robinson, MB BS, DO, FRACS FRACO

P. A. Rogers, MB BS DO, FRACS FRACO

A. W. Wechsler, MB BS, FRACS FRACO

*CL in Ophthalmology*

### **At the Royal North Shore Hospital of Sydney**

C. N. Banks, MA MB Bch *Camb.*, LRCP FRCS FRACO

S. E. Cains, MB BS, FRACS FRACO

D. Campbell, MB BS, FRACS FRACO

Geoffrey C. Hipwell, MB BS DO, FRCS FRACO

C. M. Rogers, MB BS, FRACS FRACO

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CL: Clinical Lecturer (part time)



**At Repatriation General Hospital, Concord**

N. Gibbons, MB BS DO, FRACO  
 B. Kurdian, MB BS DO, FRACS FRACO  
 J. F. Killick, MB ChB *Edin.* DO, FRCS  
 M. B. Kappagoda, MB BS *Ceyl.* DO *Lond.*, FRCS FRACS  
 FRACO  
 A. L. McKay, DO *R.C.P.&S.* MB BS, FRACO  
 R. Saad, DO *Lond.* MB BS, FRACP  
 T. F. Shuttleworth, DO *Lond.* MB BS, FRCSEd FRACO

**At Lidcombe Hospital**

J. Chandra, MB BS *Luck.*, FRACS FRACO  
 A. Charawanamutta, MB BS AM *Sing.* DO *Edin.*, FRCSEd  
 S. H. Sarks, MB BS DO, FRCSEd FRACS LRCP  
 G. Thomson, MB BS DO  
 I. B. Wechsler, MB BS DO, FRACS FRACO

**At the Westmead Centre**

Donald J. Du Temple, MB ChB *N.Z.* DO *R.C.P.&S.*, FRCS  
 FRACS FRACO  
 John A. Harding, DO *R.C.P.&S.*, MB BS FRCS FRACS  
 FRACO  
 John G. Henry, DO *R.C.P.&S.* MB BS, FRCS FRACS FRACO  
 Peter F. Hopkins, MB BS DO, FRACO  
 George Thomson, MB BS DO, FRACO  
 Roger D. Williams, MB BS, FRACS FRACO

**At Royal Alexandra Hospital for Children**

G. C. T. Burfitt-Williams, DO *R.C.P.&S.* MB BS, FRACO  
 FRACS  
 J. Hornbrook, DO *R.C.P.&S.* MB BS, FRACO  
 F. Martin, MB BS DO, FRACO FRACS  
 P. Waddy, BSc MB BS DO, FRACO

---

**Paediatrics****At the Westmead Centre**

Neil Buchanan, BSc MB BS *Lond.* PhD *Witw.*, MRCS LRCP  
 FCP(SA) FRACP

D. Butler, MB BS, FRACP

A. Chong, MB BS MMed *Sing.*, FRACP  
 S. Clarke, MB BS, FCP(SA)  
 M. J. Deloughery, MB BS, FRACP  
 P. E. Doyle, MB BS *Tas.*, FRACP  
 A. M. Fasher, MB BS  
 M. Frost, MB BS

STAFF

B. E. Kearney, MB BS, FRACP  
P. W. Knight, MB BS, FRACP  
W. Koo, MB BS, FRACP  
G. Miller, MB BS, FRACP  
C. C. Poon, MB BS, FRACP  
D. Thomas, MD BS, FRACP

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**Pathology**

*Professors*

David Agar Cameron, MDS PhD  
Alan Beh Puan Ng, MB BS *Melb.*, FASCP FIAC FASDermP  
FRCPA

*Clinical Professor*

Ernest Sydney Finckh, MD BS DCP, FRACP FRCPA  
FRCPath

*Visiting Professor*

Vincent John McGovern, MD ChB *N.Z.* FRACP FRCPA  
FRCPath

*Reader*

John R. Gibbins, MDS PhD

*Associate Professor*

Susan E. Dorsch, MB BS PhD

*Lecturer*

Leslie Arnold, BSc(Med) MB BS PhD

*Temporary Senior  
Tutor*

Michael Rodriguez, BSc(Med) MB BS

*Visiting Senior  
Lecturer (Part-time)*

William A. Evans, BSc(Med) MB BS DCP, FRCPA

*Visiting Lecturers  
(Part-time)*

William Brighton, MD BS, FRCPA  
Tanya Jelihovsky, MB BS DCP  
Ronald C. Newland, BSc(Med) MB BS DCP, FRCPA  
Keith Viner-Smith, MB BS *Adel.*, FRACP FRCPA FRCPath

*Visiting Tutors*

Jean Armytage, MB BS DCP, FRCPA  
Faye Chambers, MB BS  
Thomas Donnelly, BVSc DipVetPath  
Valda Geddes-Dwyer, MB BS  
E. Mary Gilder, BSc MB BS  
Neil Hunter, BDS PhD  
Kenneth L. Kneale, MB BS, FRCPA  
Steven Krilis, MB BS  
Betty Lin, MB BS, FRCPA  
Hilary Lunzer, MB BS *Lond.*, LRCP MRCS  
Geoffrey W. McCaughan, MB BS  
Kailash Narayan, MB BS *Rajasthan* MD *All India Inst. Med.*  
*Sci.* PhD *A.N.U.*  
Robert L. O'Grady, BSc BDS PhD  
Jeanette Philips, MB BCh *Witw.*, FRCPA MIAC  
Brian Quinn, MB BS DCP, FRCPA  
Henry H. Y. Yeung, MB BS *H. K.*

*Honorary Associates*

F. W. Gunz, MD BS *Lond.* PhD *Camb.*, FRCP FRACP FRCPA  
D. S. Nelson, PhD *A.N.U.* BSc(Med) MB BS DSc, FRACP  
FRCPA

*CL in Pathology*

**At the Royal North Shore Hospital of Sydney**

J. Fryer, MB BS, FRCPA  
R. Hollis, MB ChB *Witw.*, FRCPA  
W. H. Payne, DCP *Lond.* MB BS, MRCPath MRCPA  
K. V. Smith, MB BS *Adel.*, FRCPath FRCPA FRACP

*CL in Pathology*

**At Sydney Hospital**

E. Hirst, MD BS DCP, FRACS FRCPA  
S. McCarthy, MB BS DCP, FRCPA

*CL in Pathology*

**At Repatriation General Hospital, Concord**

K. L. Kneale, MB BS, FRCPA  
Betty Lin, MB BS, FRCPA  
R. C. Newland, BSc(Med) MB BS DCP, FRCPA

*CL in Pathology*

**At the Westmead Centre**

P. O'Neill, MB BS, FRCPA

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## Pharmacology

*Professor*

Graham Allen Ross Johnston, MSc PhD *Camb.* FRACI

*Reckitt & Colman  
Professor of Clinical  
Pharmacology*

John Shaw, MB BS PhD, FRACP

*Reader*

Gregory B. Chesher, MSc PhD

*Associate Professors*

L. Bruce Cobbin, BSc *Melb.* PhD  
Graham A. Starmer, MSc *Manc.* PhD  
Diana M. Temple, BSc *W. Aust.* MSc PhD

*Senior Lecturers*

David M. Jackson, BPharm MSc PhD  
J. Paul Seale, MB BS PhD *Lond.* FRACP

*Lecturers*

Robin D. Allan, BSc PhD  
Rosemarie Einstein, BSc PhD  
Ewan J. Mylecharane, BPharm *V.I.C.* BSc PhD *Melb.*

*Tutors*

Christine Phillips, BSc *Bath* PhD *Edin.*  
Ian Spence, BSc PhD *Monash*  
Susan D. Whicker, BSc *Adel.*

## Physiology

<i>Professors</i>	William Burke, BSc PhD <i>Lond.</i> John Atherton Young, BS BSc(Path) MD DSc <i>Qld.</i> , FRACP
<i>Professor and Deputy Vice-Chancellor</i>	Michael Gleeson Taylor, MD BS <i>Adel.</i> PhD <i>Lond.</i> , FRACP
<i>Readers</i>	Maxwell R. Bennett, BE MSc PhD <i>Melb.</i> DSc, FAA Joseph F. Y. Hoh, PhD <i>A.N.U.</i> BSc(Med) MB BS
<i>Associate Professors</i>	Arthur V. Everitt, BSc PhD Barry S. Gow, MDS PhD, FRACDS David J. C. Read, MD BS, FRACP
<i>Senior Lecturers</i>	David F. Davey, BSc PhD <i>McG.</i> Anne E. Sefton, BSc(Med) MB BS PhD
<i>Lecturers</i>	R.A.L. Dampney, BSc PhD Brian J. Morris, BSc <i>Adel.</i> PhD <i>Monash</i> A. Pettigrew, BSc PhD
<i>Tutors</i>	Graham R. Cam, BA DipEd <i>Macq.</i> Ian Hutchinson, BSc <i>Lond.</i> PhD <i>Leeds</i> Ken Takeda, MSc <i>Tor.</i> PhD <i>N.S.W.</i>

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## Psychiatry

<i>Professor</i>	Pierre Joseph Victor Beumont, MB ChB <i>Pret.</i> MSc <i>Oxf.</i> MPhil <i>Lond.</i> DPM, FRANZCP FRACP FRCPsych MRCPEd
<i>Clinical Professors</i>	William A. Cramond, OBE, MD BS, FRANZCP FRACP FRCPsych FRSEd Russell Meares, MD BS <i>Melb.</i> DPM <i>Lond.</i> FRANZCP MRCPsych
<i>Associate Professors</i>	Gordon F. Johnson, MB BS <i>Qld</i> DPM <i>Lond.</i> , FRCPsych FRANZCP Christopher Tennant, MD BS DPM MPH <i>Harvard</i> MRCPsych MRANZCP
<i>Senior Lecturer</i>	Ralph J. Schureck, MB BS <i>Qld</i> MA DPM <i>Camb.</i> , MRANZCP MRCPsych
<i>Honorary Associates</i>	H. P. Greenberg, MB BS DPM, FRANZCP FRCPsych J. Ellard, MB BS DPM, FRACP FRANZCP L. Helen Barnes, MB BS DPM, FRANZCP MRCPsych
<i>Clinical Lecturers</i>	<b>At Royal Prince Alfred Hospital</b> M. Bashir, MB BS FRANZCP F. J. Buttsworth, MB BS, FRANZCP R. Gertler, MB BS, FRANZCP A. Gilandas, BSc <i>Oregon</i> MSc PhD

P. Jenkins, MB BS MRANZCP  
M. Jennings, MB BS DPM, FRCPCan FRANZCP  
H. Knutzelius, MB BS DPM *Lond.*, MRCPsych  
J. Plapp, BA *Melb.* PhD *St Louis*  
I. Richards, MB BS, MRANZCP  
H. H. Smartt, MB BS DPM, FRANZCP  
S. Touyz, BSc PhD *Cape T.* BSc *Witw.*  
R. B. Vickery, MB BS DPM, FRANZCP  
R. T. White, MB BS DPM, MRCPsych FRANZCP  
A. Williams MPh *Yale*, BSc(Med) MB BS FRANZCP

**At Sydney Hospital**

*Clinical Lecturer*

J. P. Maguire, MB BS, MRCPsych  
H. Leyton, MB BS DPM, FRANZCP  
J. G. Short, MB BS, MRANZCP  
B. Bourke, MB BS, FRANZCP

**At the Royal North Shore Hospital of Sydney**

*Clinical Lecturers*

G. J. Barnes, MB BS, MRCPsych FRANZCP  
R. Bartrop, MD *N.S.W.* MB BS DPM, FRACP MRCPsych  
A. G. Bennett, MB BS DPM, FRANZCP FACMA  
MRCPsych  
C. B. Degotardi, MB BS DPM, MRANZCP  
M. Freeman, MB BS DPM, MRANZCP  
J. A. Telfer, MB BS, FRANZCP

**At Repatriation General Hospital, Concord**

*Clinical Lecturers*

G. J. Barnes, MB BS, MRCPsych FRANZCP  
B. Boman, MB BS, MRANZCP  
C. Smith, MB BS, MRANZCP  
G. S. Spragg, MB BS DPM, MRANZCP

**At Lidcombe Hospital**

*Clinical Lecturers*

D. Learoyd, MB BS, MRANZCP  
J. Pettigrew, MB BS, MRANZCP  
S. Williams, MB BS, FRANZCP

**At Rozelle Hospital**

*Clinical Lecturers*

P. H. Merory, MD *Prague-Oxf.* DPM, LRCP MRCS DOMS  
FRANZCP MRCPsych  
P. Cameron, MB BS, FRANZCP  
I. Dzintars, MB BS DPM *Lond.*, FRANZCP

**Macquarie Hospital**

*Clinical Lecturers*

W. A. Barclay, MSc *Col.* BSc(Med) MB BS DPM, FRANZP  
M. D. McGrath, MB ChB *Leeds* DPM, MRCPsych FRANZCP  
R. Kaneyson, MB BS DPM, MRANZCP  
M. A. F. Connolly, BSc(Med) MB BS DCH DPM, MRCP  
MRCPsych MRCPsych  
G. J. Pohlen, MB ChB *Otago* MSc *Lond.*, DPM, MFCM,  
MCCM, MRANZCP, MRCPsych

**At Parramatta Psychiatric Centre**

*Clinical Lecturers*

C. S. Balaraman, MB BS *Madr.* MRANZCP  
W. J. Bignault, ChB MD *Cape T.* DPM *Witw.*, FRANZCP

STAFF

K. A. Henson, MB BS, MRANZCP  
C. Kordick, MB BS, MRANZCP  
M. B. Merlin, MB ChB *Witw.*, FRANZCP  
G. J. M. Westerink, MB ChB *N.Z.* DPM *Melb.*, FRANZCP

**At Northside Clinic<sup>1</sup>**

*Clinical Lecturers*

K. Mayne, MB BS, MRCPsych FRANZCP  
C. McFie, MB ChB *Glas.* MPhil *Lond.* DPM, MRCP  
MRCPsych MRANZCP  
A. Orsmond, MB BS *Lond.* DPM, MRANZCP MRCPsych  
LRCF  
J. Phillips, MB BS *Melb.*, MRANZCP

**At the Westmead Centre**

*Clinical Lecturers*

Peter G. Churven, MB BS *Qld.* MRANZCP  
Graham A. Edwards, MD MHA *N.S.W.* DPM FRANZCP  
MRCPsych  
Peter Morse, MB BS, FACMA MRANZCP  
Andrew Robertson, MB BS *Lond.*, MRCS MRANZCP  
LRCF  
Gerrit J. Westerink, MB ChB *N.Z.* DPM, MRANZCP  
Neville Whan, MB BS, MRCPsych

**At Banks House, Bankstown District Hospital<sup>1</sup>**

*Clinical Lecturers*

W. B. Andrews, MB BS, MRANZCP  
M. Giuffrida, MB BS, MRANZCP

**At Rydalmere Hospital<sup>1</sup>**

*Clinical Lecturers*

R. Elliott, MB BS, MRANZCP  
D. Johns, MB BS, MRANZCP  
R. D. Moorthy, MB BS, MRANZCP  
R. Schmidtman, MB BS, MRCPsych  
C. Sochan, MB BS, MRANZCP  
D. I. Nasser, MB BS *Qld.* MHP *N.S.W.* DPM *Qld.* MRANZCP  
MRCPsych

**At Palmerston Clinic—Hornsby Hospital<sup>1</sup>**

*Clinical Lecturers*

W. Eaton, MB BS, MRCPsych MRANZCP  
L. Madew, MB BS DPM, FRANZCP  
M. Roberts, MB BS, MRANZCP

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## Radiology

**At Royal Prince Alfred Hospital**

*Clinical Lecturers*

B. D. Bach, MB BS, MRACR  
L. J. Harding-Smith, MB BS DDR, MRACR  
T. S. Lamond, MB BS DDR, MRACR

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<sup>1</sup>Affiliated teaching units of the Department of Psychiatry.

B. Markell, MB BS, FRCR MRCP  
J. Ryan, MB BS, FRACR  
K. Sherbon, MB BS DDR, FRACR FRCR  
A. Theile, MB BS DDR, FRCR  
R. Waugh, MB BS DDR, MRACR

**At the Royal North Shore Hospital of Sydney**

A. Fulton, MB BCh MA *Camb.*, FRCR MRACR  
A. Goldin, MB ChB *Witw.*, FRCR  
G. Goldin, MB ChB *Cape T.*, MRACR  
J. H. Hunt, MB BS, FRACR  
P. K. Macintosh, MB BS, MRACR  
J. Roche, MB ChB *Liv.*, MRACR  
W. A. Sorby, MB BS, FRACP FRACR

*Clinical Lecturers*

**At Sydney Hospital**

J. E. Blundell, MB BS, MRACR  
P. Cappe, DMRD *Lond.* MB BS  
J. D. Cashman, MB BS DDR, FRACR  
M. T. W. Houang MB BS *N.S.W.* DMRD *Lond.*, FRCR  
N. H. Korner, MB BS DDR, MRCPEd MRACR  
K. Plewe, MB BS DDR, FRACP MRACR  
B. A. Roberts, MB BS, FRACP MRACR  
W. K. Wong, MB BS, FRCR MRACR  
J. T. Wright, MD FRCPEd FRACR  
M. Vowels, MB BS, MRACR

*Clinical Lecturers*

**At Repatriation General Hospital, Concord**

G. R. Faithfull, MB BS DDR, FRCR FRACR  
M. Ngan, BSc (Med) MB BS DDR  
A. T. Palme, MB BS, MRACR  
M. C. Schieb, PhC MB BS DDR, FRACP FRACR  
W. F. Sporr, MB BS DDR

*Clinical Lecturers*

**At Lidcombe Hospital**

B. T. Hammond, MB BS, MRACR

*Clinical Lecturer*

**At Royal Alexandra Hospital for Children**

M. D'Silva, MB BS *Ceyl.* DMRD *R.C.P.&S.*, MRACR  
A. H. Lam, MB BS *H. K.*, MRACR

*CL in Paediatric  
Radiology*

**At the Westmead Centre**

Eric Broadfoot, MB BS DCH *Lond.* DDR, MRACR  
Peter M. Fitzgerald, MB BS DDR, MRACR  
James E. Jarrett, MB BS, MRACR  
Kenneth C. Simmons, MB BS, MRACR  
Yoi Sun Soo, MB BS *H.K.* DMRD *R.C.P.&S.*, MRACR

*Clinical Lecturers*

## Radiotherapy

### At Royal Prince Alfred Hospital

*Clinical Lecturers*

D. Green, MB BS, FRACR FRACS MRCS  
J. K. Donovan, DMRT *Lond.* MB BS, MRACR  
P. J. Duval, MB BS, FRCR MRACR

### At the Royal North Shore Hospital of Sydney

*Clinical Lecturers*

B. J. Biggs, MB BS *Melb.* DTM&H, MRACR  
M. Holecek, MB BS, MRACR  
A. Mallik, MB BS *Calc.* DMRT *Lond.*, FRCR  
R. T. H. Shepherd, MB BCh *Oxf.* DMRT *Lond.*, FRCR

### At Repatriation General Hospital, Concord

B. W. McEwen, MB BS, FFR FRACR  
D. P. Ewing, MB BS DTR, FRACR  
R. L. Woods, MD BS *Lond.*, MRCS MRCP

### At the Westmead Centre

*Clinical Professor  
of Radiotherapy*

A. O. Landlands, BSc MB ChB DMRT *Edin.*, FRCR

*Clinical Lecturer*

Kenneth W. Tiver, MB BS, MRACR

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## Surgery

*Professors*

John Miles Little, MD MS, FRACS  
James May, MB MS, FRACS  
Gerald White Milton, MB BS *Adel.*, FRCS FRACS  
Murray Theodore Pheils, MA MB MChir *Camb.*, LRCP  
FRCS FACS FRACS  
Thomas Smith Reeve, CBE, MB BS, FACS FRACS

*Raymond E. Purves  
Professor (in the field  
of transplantation)*

Ainslie Glenister Ross Sheil, BSc MA *Oxf.* MB BS *Qld.*,  
FRCS FRACS

*Professor of  
Orthopaedics and  
Traumatic Surgery*

Thomas Kinman Fardon Taylor, DPhil *Oxf.* MB BS, FRCS  
FRCSEd FRACS

*Reader (Surgical  
Biophysics) and  
Director of the Gordon  
Craig Urological  
Research Laboratories*

Anthony H. Goodman, MB BS PhD, FRACS

*Associate Professors*

Graham A. E. Coupland, MB BS, FRACS  
Frederick O. Stephens, MD MS, FRCSEd FACS FRACS  
William H. McCarthy, MEd *Ill.* MB BS, FRACS  
Janet McCredie, DMRD *Lond.* MD BS, FRCR FRACR  
(*Diagnostic Radiology*)



<i>Senior Lecturers</i>	M. Appleberg, MB BCh <i>Witw.</i> , FCS(SA) FRACS E. L. Bokey, MB BS, FRACS John P. Fletcher, MB BS <i>W.A.</i> , FRCS FRACS J. P. Harris, MB BS, FRCS FRACS John E. Payne, MB BS, FRCSEd M. D. Ryan, MB BS, FRCSEd FRACS
<i>Senior Lecturers (part time)</i>	Christopher P. Bambach MB BS, FRACS Michael S. Stephen MB BS, FRACS
<i>Lecturer</i>	David W. Storey, MB BS, FRCS FRACS
<i>Director of the Raymond Purves Laboratories</i>	Peter Ghosh, BSc <i>Lond.</i> PhD, ARIC FRACS
<i>Lecturer to Dental Students (part time)</i>	Nicholas A. Packham, BDS MB BS, FRACS
<i>Lecturers in Orthopaedics and Traumatic Surgery (part time)</i>	Francis W. Marsden, MB BS, FRCSEd FRACS David H. Sonnabend, MB BS, FRACS
<i>Lecturer in Ear Nose and Throat Surgery (part time)</i>	John H. Seymour, MB BS FRCS
<i>Lecturer in Plastic Surgery (part time)</i>	Edward W. Gibson MB MS, FRACS FACS
<i>Lecturers in Surgical Disease of Children (part time)</i>	D. H. Cohen, MB BS, FRACS A. W. Middleton, MB BS, FRCS FRACS
<i>CL in Surgery</i>	<b>At Royal Prince Alfred Hospital</b> P. J. Burke, MB BS, FRACS D. C. Glenn, BSc(Med) MBBS, FRCS FRACS J. E. D. Goldie, MB BS, FRCS FACS FRACS D. S. Johnson, MB BS, FRCS FRACS D. Millons, MB BS, FRCS B. P. Morgan, MB BS, FRACS G. R. Nicks, OBE, MB ChM <i>N.Z.</i> , FRCS FRCSEd FRACS F. W. Niesche, MB BS, FRCS FRACS R. C. Opie, MB MS, FACS FRACS N. A. Packham, BDS MB BS, FRACS W. G. Patrick, MB BS, FRACS D. M. V. Rea, MB ChB <i>N.Z.</i> , FRCS FRACS S. B. Renwick, MB BS, FRCS FRACS L. M. Roberts, MB BS, FRCS FRACS D. M. Sheldon, MB BS, FRCS FRACS M. Spigelman, MB BS, FRCS FRACS G. Ramsey Stewart, MB BS, FRCS FRACS R. West, MB BS, FRACS FRCS
<i>CL in Ear, Nose and Throat</i>	G. M. Halliday, MB BS, FRCSEd J. H. Lancken, MB BS DLO, FRACS B. J. O'Reilly, MB BS, FRACS

## STAFF

B. P. Scrivener, MB BS DLO, FRCS FRCSEd FRACS

*CL In Neurosurgery*

G. K. Vanderfield, MB BS, FRACS FACS

*CL in Orthopaedic Surgery*

I. Barrett, MB BS, FRACS  
 M. Benanzio, MD *Cagliari ChOrth Bologna*  
 I. J. Bryan, MB BS, FRCSEd  
 P. Holman, MB BS, FRACS  
 D. Macdonald, MB ChB *N.Z.*, FRACS  
 F. W. Marsden, MB BS, FRCSEd FRACS  
 H. D. Tyer, MB BS, FRACS  
 K. W. Walter, MB BS, FRACS FRCS

*CL in Plastic and Reconstructive Surgery*

E. W. Gibson, MB MS, FRACS

*CL in Thoracic Surgery*

D. K. Baird, BSc(Med) MB BS, FRACS FRCS  
 A. F. Grant, MB BS, FRCS FRACS  
 C. F. Hughes, MB BS, FRACS  
 B. D. Leckie, MB BS, FRCS FRCSEd

*CL in Urology*

D. D. Arnold, MB BS, FRCS FRACS  
 J. Boulas, MB BS, FRACS  
 G. J. Coorey, MB BS, FRCS FRACS  
 B. S. Pearson, MB BS, FRCS FRACS  
 J. Rogers, MB BS, FRCS FRACS  
 R. Wines, MB BS, FRACS FRCSEd FRCS

*CL in Sugery***At Sydney Hospital**

S. Boland, MB BS, FRCS FRACS  
 A. R. Brown, MB ChB *N.Z.*, FRCS FRACS  
 R. Campbell, MB BS, FRCSEd FRACS  
 W. B. Conolly, MB BS, FRCS FACS FRACS  
 P. Crea, MB BS, FRCS FRACS  
 D. L. Glen, MB BS, FRCS FRACS  
 S. J. Hazelton, MB BS, FRCS FRACS  
 J. D. Hughes, MB BS, FRCS FRACS  
 M. J. Inglis, MB BS, FRCS FRCSEd FRACS  
 J. H. McKessar, MB BS, FRCS FRCSEd FRACS  
 J. Niesche, MB BS, FRCS FRACS  
 J. E. Reimer, MB BS, FRCS FRCSEd FRACS

*CL in Colon and Rectum Unit*

D. G. Failes, MB BS, FRCS FRACS  
 M. J. Killingback, MB BS, FRCS FRCSEd FRACS  
 M. Stuart, BSc MB BS, FRACS FACS  
 S. Sakker, MBE, MB BS, FRCS FRCSEd FRACS

*CL in Ear, Nose and Throat*

V. D. Bear, DLO *R.C.P.&S.* MB BS  
 E. J. Beckenham, MB BS, FRCS FRACS  
 B. N. Benjamin, OBE, MB BS DLO  
 F. D. Elsworth, MB BS *N.S.W.*, FRACS  
 P. K. Ng, MB BS *N.S.W.*, FRCSEd FRACS

<i>CL in Neurosurgery</i>	A. P. Poulgrain, MB BS <i>Qld</i> , FRCS FRCSI FRACS R. G. Rushworth, MB BS, FRCS FRACS
<i>CL in Orthopaedic Surgery</i>	F. P. Blake, MB BS, FRCS FRACS W. D. Bye, MB BS, FRCS FRCSEd FRACS J. M. Ellis, MB BS DTM&H, FRCS FRACS D. K. Faithfull, MB BS, FRACS T. J. Herbert, MB BS, FRCS A. S. Sachdev, MB BS, FRCSEd D. G. Seaton, MB BS, FRCSEd FRACS
<i>CL in Reconstructive and Plastic Surgery</i>	M. L. O'Mara, MB BS DLO <i>Lond.</i> , FRCS FRACS
<i>CL in Urology</i>	J. E. Blackman, MB BS, FRCS FRACS G. R. Gibson, LLB MB BS, FRCS FRACS H. M. Learoyd, MB BS, FRCS FRCSEd FRACS I. F. Potts, MB MS, FRCS FRACS B. G. Storey, MB BS, FRCS FRACS
<i>CL in Surgery</i>	<b>At the Royal North Shore Hospital of Sydney</b> M. Appleberg, MB BCh <i>Witw.</i> , FCS(SA) FRACS C. P. Bambach, MB BS, FRACS G. J. Coorey, MB BS, FRCS FRACS V. H. Cumberland, MB MS, FRCS FRACS G. A. Cutler, BEc MB BS, FRCS FRACS G. Douglas, MB BS, FRACS M. K. Eagleton, MB BS, FRCS FRACS I. R. Fielding, MB BS, FRCS FRACS N. A. Fowler, MB BS, FRCS FRACS R. M. Hollings, MB BS, FRCS FRACS P. B. Humphries, MB BS, FRCSEd FRCS FRACS A. Mallik, MB BS DMRT, FRCR M. J. Morris, BSc(Med) MB BS, FRACS T. W. O'Connor, MB BS, FRCS FRACS B. J. Parker, MB BS, FRCSEd FRACS A. G. Poole, MB BS, FACS FRACS H. J. Richards, MB BS, FRCS FRACS O. H. Schneider, MB BS, FRCS FRACS R. B. Wiles, BSc MB MS, FRACS J. D. Yeo, MB MS, FRACS
<i>CL in Cardio-Thoracic Surgery</i>	D. C. Johnson, MB BS, FRACS C. W. Deal, MB BS, FRCSEd FRCS FRACS D. E. Ross, MB BS, FRCSEd FRACS
<i>CL in Ear, Nose and Throat</i>	T. H. O'Donnell, MB BS DLO A. C. Dowe, DLO <i>Lond.</i> MB BS, FRCS FRCSEd FRACS G. Lucchese, MB BS, FRCSEd FRCS
<i>CL in Neurosurgery</i>	J. M. F. Grant, MB MS, FACS FRACS R. G. Rushworth, MB BS, FRCS FRACS
<i>CL in Orthopaedic and Traumatic Surgery</i>	K. R. Daymond, MChOrth <i>Liv.</i> MB BS, FRCSEd FRACS F. J. Harvey, MChOrth <i>Liv.</i> MB BS, FRCSEd FRCS FRACS

STAFF

R. W. McGlynn, MChOrth *Liv.* MB BS  
J. R. McGlynn, MB BS, FRCSEd FRACS  
R. W. D. Middleton, MB BS, FRCSEd FRACS  
W. D. Ryan, MB BS, FRCSEd FRACS  
B. D. Shepherd, MB BS BDS, FRCSEd FRCS FRACS  
J. P. H. Stephen, BAgr MB BS, FRCS FRACS  
R. N. Tinning, AM, MB BS, FRCSEd FRACS

*CL in Reconstructive Surgery*

R. Barnett, MB BS, FRACS  
R. P. Chandler, MB BS, FRCS FRACS  
D. L. Dey, MB MS, FRACS FACS  
P. J. O'Keefe, MB BS, FRCS FRACS

*CL in Urology*

J. H. Alexander, MB BS, FRACS  
D. H. Keller, MB BS, FRCS FRACS  
J. A. A. H. Saalfeld, MB BS, FRCS FRACS

*CL in Surgery*

**At Repatriation General Hospital, Concord**

R. C. Claxton, MB BS, FRCS FRCSEd FRACS  
M. M. de Burgh, MB BS, FRACS  
D. J. Gillett, ChM *Liv.* MB BS, FACS FRCS FRCSEd FRACS  
D. Golovsky, MB BS, FRCS FRACS  
R. J. Healey, MB BS, FRCS FRCR FRACS MRACR  
W. J. Hughes, MB BS, FRCS FRACS  
P. B. Humphris, MB BS, FRCS FRCSEd FRACS  
P. J. Kennedy, MB BS MDS, FRACDS FRACS  
S. G. Koorey, MB BS, FRCS FRACS  
E. R. Lippey, MB BS, FRACS FRCS  
D. C. Mackenzie, MB BS, FRCS  
J. E. Moulton, MB BS, FRCS FRCSEd FRACS  
J. P. O'Neill, MB BS, FRCS FRACS  
R. C. Smith, MB BS, FRACS  
D. C. Perry, MB BS, FRACS  
W. K. Soh, MB BS, FRACS  
C. Summerhayes, MB BS, FRCS FRACS  
R. G. Tucker, MB BS, FRCSEd FRACS

*CL in Cardio-Thoracic Surgery*

.....

*CL in Ear, Nose and Throat*

O. J. Davies, MB BS DLO  
J. Szasz, MB BS DLO  
R. J. A. Woolcock, MB BS DLO

*CL in Neurosurgery*

N. Dan, MB BS, FRCS FRACS  
H. E. Hudson, MD *Chile*, FRACS  
A. P. Poulgrain, MB BS, FRCSI FRCS

*CL in Orthopaedic Surgery*

A. D. Dixon, MB BS, FRACS  
A. J. Grant, BA *Qld* MB BS, FRCSEd  
R. J. E. D. Higgs, MB BS, FRCS FRACS  
K. Hume, MB BS, FRCS FRACS  
W. P. Lennon, MB BS, FRACS  
W. J. Marsden, MB BS, FRCSEd FRACS

K. W. Walter, MB BS, FRCSEd FRACS  
K. Wilding, MB BS, FRCS FRACS

*CL in Reconstructive  
Surgery*

T. R. M. Furber, MB MS, FRACS  
A. W. Lewis, MB BS, FRACS

*CL in Urology*

J. H. Alexander, MB BS, FRACS  
A. Lalak, MB BS, FRCSEd FRACS  
P. W. O. Maher, MB BS, FRCS FRACS

*CL in Surgery*

**At Lidcombe Hospital**

F. Bonar, MB BS, FRACS FRCS  
P. F. Thursby, MB BS, FRACS  
W. O. Shields, BSc MB ChB, FRCSEd  
B. H. Stone, MB BS, FRCSEd  
S. K. C. Wong, MB BS, FRACS FRCSEd

*CL in Ear, Nose and  
Throat*

O. Harrison, MB BS, FRACS

*CL in Neurosurgery*

J. Matheson, BA MB BS, FRACS

*CL in Orthopaedic  
Surgery*

G. Kalnins, MB BS, FRCSEd FRACS  
J. Walsh, MB ChB, FRCSEd FRACS  
J. Wong, MB BS, FRACS

*CL in Reconstructive  
Surgery*

N. V. Sweeney, MSc MB BS, FRACS FRCSGlas

*CL in Urology*

A. Brooks, MB BS, FRACS  
J. M. Drummond, MB BS, FRACS  
J. Boulas, MB BS, FRACS  
A. Mitterdorfer, MB BS, FRACS

*CL in Surgery*

**At the Westmead Centre**

Bruce H. Barraclough, MB BS, FRACS  
David G. Failes, MB BS, FRCS FRACS  
David C. Glenn, BSc(Med) MB BS, FRCS FRACS  
Ian Kalnins, MB BS, FRACS  
Ian C. O'Rourke, MB BS, FRCS FRACS  
Geoffrey Vernon Shead, MB MS, FRCS FRACS

*CL in Ear, Nose and  
Throat*

John Currotta, BSc MB BS, FRACS  
Patrick F. Kevin, MB BS, FRCS FRACS  
Peter W. Noyce, MB BS, FRACS

*CL in Facio Maxillary*

Alfred J. Coren, BDS, FDSRCS FFDRCS

*CL in Hand Surgery*

Richard Honner, MB BS, FRCS FRACS

*CL in Neurosurgery*

Nicholas W. C. Dorsch, MB BS, FRCS  
Michael R. Fearnside, MB MS, FRACS

*CL in Orthopaedic  
Surgery*

John L. Cummine, MB BS, FRACS  
John M. Harrison, BSc(Med) MB BS, FRCS FRACS  
Philip J. McGrath, MB BS, FRCS FRACS  
Donald W. Whiteway, MB BS, FRCS FRACS FACS  
James T. Wong, MB BS, FRACS

<i>CL in Paediatric Surgery</i>	Hugh C. O. Martin, MB BS, FRCS FRACS John Pitkin, MB BS, LRCP FRCS FRACS
<i>CL in Paediatric Urology</i>	Robert B. Filmer, MB BS, FRCS FRACS FACS
<i>CL in Reconstructive and Plastic Surgery</i>	Geoffrey P. Curtin, MB BS BDS, FRCS FRACS FRACDS Philip G. Thompson, MB BS, FRCS FRACS George N. Threlfall, MB BS, FRACS
<i>CL in Thoracic Surgery</i>	Timothy B. Cartmill, MB BS, FRACS David C. Johnson, MB BS, FRACS
<i>CL in Urology</i>	James Boulas, MB BS, FRACS Andrew Brooks, MB BS, FRACS Malcolm Drummond, MB BS, FRCS FRACS
<i>CL in Surgery</i>	<b>At Mater Misericordiae Hospital, North</b> F. H. D. Breslin, MB BS, FRCS FRACS G. J. Coorey, MB BS, FRCS FRACS M. K. Eagleton, MB BS, FRCS FRACS I. R. Fielding, PhC MB BS, FRCS FRACS T. O'Connor, MB BS, FRCS FRACS B. F. Sheridan, MB BS, FRCS FRCSEd FRACS
<i>CL in Orthopaedic Surgery</i>	R. A. Elliott, MB BS, LRCP FRCS FRACS F. J. Harvey, MB BS MChOrth <i>Liv.</i> , FRCS FRCSEd FRACS FACS A. Hodgkinson, MB BS, FRCSEd FRACS FACS J. P. H. Stephen, MB BS, FRCS FRACS
<i>CL in Paediatric Surgery</i>	<b>At Royal Alexandra Hospital for Children</b> D. H. Cohen, MB MS, FRACS Genevieve Cummins, BSc(Med) MB BS, FRACS D. L. Dey, MB MS, FRACS M. Glasson, MB BS, FRCS FRACS R. S. B. Hudson, MB BS, FRCS FRACS H. C. O. Martin, MB BS, FRACS FRCS A. W. Middleton, MB BS, FRCS FRACS
<i>CL in Paediatric Ear, Nose and Throat</i>	B. N. P. Benjamin, OBE, MB BS DLO, FRACS
<i>CL in Paediatric Neurosurgery</i>	I. H. Johnston, MB ChB <i>St. And.</i> BSc, FRCS FRCSGlas
<i>CL in Paediatric Orthopaedic Surgery</i>	I. Barrett, MB BS, FRACS D. W. Whiteway, MB BS, FRCS FRCSEd FRACS FACS
<i>CL in Paediatric Urology</i>	D. D. Arnold, MB BS, FRCS FRACS R. B. Filmer, MB BS, FRACS FRCS FACS R. D. Wines, MB BS, FRCS FRACS

## University administrative units in the teaching hospitals

### At Royal Prince Alfred Hospital

*Warden of the Clinical School*

J. A. Burgess, MB BS, FRACP

*Clinical Supervisors*

A. Joasoo, BSc(Med) MD BS, FRACP  
B. P. Morgan, MB BS, FRACS

### At Sydney Hospital

*Warden of the Clinical School*

A. R. Brown, MB ChB N.Z., FRCS FRACS

*Clinical Supervisors*

S. Colagiuri, MB BS, MRACP  
S. J. Hazelton, MB BS, FRCS FRACS

### At the Royal North Shore Hospital of Sydney

*Warden of the Clinical School*

G. E. Bauer, MB BS, FACC FRCP FRACP

*Clinical Supervisors*

C. P. Bambach, MB BS, FRACS  
R. C. Edwards, MB BS, FRACP MRCP

### At Repatriation General Hospital, Concord

*Warden of the Clinical School*

S. G. Koorey, MB BS, FRCS FRACS

*Clinical Supervisor*

O. Peiris, MD BS *Ceyl.*, FRACP MRCPEd MRCP

### At the Westmead Centre

*Sub-Dean*

J. M. Little, MD MS, FRACP

*Administrative Officer*

Christine F. Samojluk, BA

### At Lidcombe Hospital

*Warden of the Clinical School*

P. F. Thursby, MB BS, FRACS

*Clinical Supervisor*

### At Mater Misericordiae Hospital

R. F. O'Reilly, MB BS, FRACP

*Clinical Supervisor*

### At the Women's Hospital

A. Boogert, MB BS, FRACOG

*Clinical Supervisor*

### At St Margaret's Hospital for Women

D. H. McGrath, MB BS, FRCOG FAGO

*Clinical Supervisor*

### At Royal Alexandra Hospital for Children

G. L. Serfontein, MB ChB MMed(Paed) *Stell.*, FCP(SA)  
FRACP

*Clinical Supervisor*

### At the Macquarie Hospital

M. D. McGrath, MB ChB *Leeds* DPM, MRCPsych FRANZCP

## Commonwealth Institute of Health

<i>Professor and Director of the Institute</i>	Lindsay Alexander Gordon Davidson, MB ChB <i>Edin.</i> MD <i>Birm.</i> , FRCP FRCPEd FRACP FRACMA MFCM
<i>Professor of Occupational and Environmental Health</i>	David Alexander Ferguson, MD BS, FRACP
<i>Professor of Preventive and Social Medicine</i>	Charles Baldwin Kerr, DPhil <i>Oxf.</i> MB BS, FRACP MFCM
<i>Professor of Tropical Medicine</i>	Robert Hughes Black, ED, DTM&H <i>Liv.</i> MD BS DipAnth. FRACP
<i>Professor of Public Health Biology</i>	.....
<i>Associate Professors</i>	Grahame M. Budd, MD BS, FRACP ( <i>Environmental Health</i> ) Robert MacLennan, MB BS <i>Qld</i> MS <i>Tulane</i> DCH <i>Lond.</i> DTM&H, MRCP FRACP ( <i>Epidemiology and Biostatistics</i> ) Peter M. Moodie, MD BS DTM&H ( <i>Tropical Public Health</i> )
<i>Senior Lecturers</i>	John R. Brotherhood, MB BS <i>Lond.</i> ( <i>Environmental Health</i> ) Cedric C. J. Gibbs, MB ChB <i>Cape T.</i> , FRACMA FIAC AFAIM ( <i>Health Services</i> ) William B. Hennessy, MB BS DTM&H, FRCP FRACP ( <i>Clinical Tropical Medicine</i> ) Paul A. L. Lancaster, MPH <i>Calif.</i> MB BS, FRACP ( <i>National Perinatal Statistics</i> ) Thomas K. Ng, MD BS <i>H.K.</i> LLB <i>Lond.</i> DPH <i>Sing.</i> DIH <i>Dundee</i> DPA <i>Lond.</i> , FIS FHA FRSH FRACMA MFCM MFOM ( <i>Occupational Health</i> ) Janice C. Reid, BSc <i>Adel.</i> MA <i>Hawaii</i> MA PhD <i>Stan.</i> ( <i>Cross Cultural Studies and Medical Anthropology</i> ) David O. Sillence, MD <i>Melb.</i> MB BS, FRACP ( <i>Human Genetics</i> )
<i>Lecturers</i>	Robert S. U. Baker, BSc PhD <i>W. Aust.</i> , MASM ( <i>Cell Biology</i> ) Janette C. Brand, BSc PhD <i>N.S.W.</i> ( <i>Nutrition</i> ) Ian Darnton-Hill, MB BS <i>Adel.</i> DA <i>Lond.</i> DipND <i>Flin.</i> ( <i>Nutrition</i> ) Terence Dwyer, MD BS <i>N.S.W.</i> MPH <i>Yale</i> ( <i>Epidemiology</i> ) Anthony W. Findlay, BSc <i>N.S.W.</i> ( <i>Occupational Hygiene</i> ) Gregory B. Goldstein, MB BS, FRACP ( <i>Preventive and Social Medicine</i> ) Gordon J. Lincoln, BSc ( <i>Environmental Health</i> ) Gershon Major, BSc <i>Melb.</i> ( <i>Occupational Health</i> ) Colin C. Reid, MB BS ( <i>Occupational Health</i> ) Richard C. Russell, MSc ( <i>Medical Entomology</i> ) John C. Walker, MSc ( <i>Medical Parasitology</i> ) Wim Zylstra, DTM&H <i>Lond.</i> MB BS, FRACP ( <i>Tropical Medicine</i> )
<i>Principal Tutor</i>	Michael F. O'Keefe, ASTC ( <i>Pathology and Microbiology</i> )



<i>Senior Tutors</i>	Susan Ash, MHP <i>N.S.W.</i> BSc DipND ( <i>Nutrition</i> ) Patricia M. Desmarchelier, BAppSc <i>Q.I.T.</i> ( <i>Public Health Biology</i> )
<i>Tutors</i>	Barbara J. McPhee, DipPhy <i>Aust. Physio. Assn.</i> , MAPA ( <i>Occupational Physiotherapy</i> ) Alan J. Rogers, BSc <i>N.S.W.</i> MSc <i>Lond.</i> ( <i>Occupational Hygiene</i> )
<i>Registrar of the Institute</i>	Alexandra Copley, MA
<i>Academic Registrar</i>	John C. Short, BBus DipTech <i>N.S.W.I.T.</i> , AMusA
<i>Librarian</i>	Shirley P. McGlynn, BA, ALA ALAA

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## Libraries

### Medical Library

<i>Librarian</i>	Gwendoline M. Rafferty, BA <i>N.E.</i> , ALAA
<i>Assistant Librarians</i>	Robin Cahill, BA, ALAA (part time) Jean A. Wall, BSc <i>Adel.</i> DipLib <i>N.S.W.</i> (part time)
<i>General Library Assistants</i>	Charles Barnes, ALAA Lorraine Child, ALAA Ronda Halmarick (part time) Mary Benton, BA DipLib <i>N.S.W.</i> (part time) Rosalia Robinson, BA DipLib <i>N.S.W.</i>

### Burkitt Library

<i>General Library Assistant</i>	Ruby Faris
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## 2 The Faculty of Medicine

### History of the Medical School

The University of Sydney was founded in 1850 by an Act of the legislature of New South Wales and is the oldest university in Australasia. The medical school, however, did not come into being until thirty-three years later. Prior to the establishment of the university there had been several attempts to develop medical education on a regular basis in New South Wales. Medical training had been initiated by William Redfern who was transported to New South Wales in 1801 and appointed Assistant Surgeon in Sydney in 1808; together with William Bland, another emancipist surgeon, he had accepted occasional apprentices for training. The Medical Practice Bill of 1838 referred to the possibility of a medical school in Sydney, and in 1846 it was proposed that a medical school be established at the Sydney Infirmary (later renamed Sydney Hospital). Students were admitted as apprentices to the practice of the Infirmary not later than 1849 and received official recognition from the directors in 1851.

The Act of Incorporation of the University of Sydney provided for the granting after examination of degrees in Medicine as well as in Arts and Law. Strenuous efforts were made from the beginning to start a medical school at the University and support was especially strong from medical members of the Senate. However, lack of finance was the main stumbling block: there was a definite objection from some quarters to the idea of having to share the University's slender means with a further faculty. In 1859 the Senate of the University adopted a scheme of medical teaching which was intended to commence in 1860, and instructed the University's architect, Edmund Blacket, to prepare plans for an anatomy school. However, the plan was opposed on the grounds that 'the constitution of such studies and the establishment of a medical school would retard the completion of the curriculum in the Faculty of Arts'. Further schemes in 1866 and 1874 likewise failed.

Two major events assisted to bring about the realisation of a scheme for a medical school. Firstly, in 1868 there was an attempt upon the life of H.R.H. Prince Alfred, Duke of Edinburgh, during his visit to New South Wales. The Duke

recovered, and as a thanks-offering the community raised the sum of £30 000 for a suitable memorial. The Duke wished the money to be allocated for the erection of a hospital and a public meeting resolved that a Prince Alfred Memorial Hospital should be erected on the site of the Sydney Infirmary. This proposal encountered legal difficulties and the University resolved the problem by granting the use of twelve acres of university land, provided that a portion of this was reserved for a school of medicine. The Prince Alfred Hospital Act of Incorporation, which was passed in 1873, stipulated that the hospital's medical staff be appointed by a conjoint board consisting of the Senate of the University and the hospital's Board of Directors sitting together, and that it be open for clinical teaching to students of the medical school when established. The hospital was opened for patients in 1882. In the same year the Government agreed to finance a medical school.

The second event which influenced the Senate in its determination to proceed with the medical school was the death of John Henry Challis in 1880, which resulted in the bequest of the residue of his substantial estate for the benefit of the University. Applications were subsequently invited for a chair of Anatomy and Physiology and Thomas Peter Anderson Stuart came from Edinburgh to fill the chair and to establish the medical school. The Faculty of Medicine owes its development to the genius of Sir Thomas Anderson Stuart, a man of great ability, determination and energy who presided as its Dean until his death in 1920.

The medical school commenced teaching in March 1883 with four students in a four-roomed cottage built between the Great Hall of the University and Parramatta Road. Anderson Stuart pressed for the construction of a more suitable medical school and in 1887 a new building subsequently known as the *Anderson Stuart Building* was commenced on plans prepared by Blacket. The first part of the building was finished in 1891, and the building was completed in 1922. To strengthen the Faculty's teaching staff, Anderson Stuart turned to the Edinburgh medical school and recruited Alexander MacCormack, Robert Scot Skirving, J. T. Wilson and D. A. Welsh. MacCormack and Scot Skirving took up appointments in 1883; Wilson became professor of Anatomy in 1890 when Anderson Stuart relinquished the position to concentrate on his other duties, and Welsh was appointed to the new chair of Pathology in 1902.

Initially the medical curriculum was of five years' duration, the first year being spent in the Faculty of Arts. In 1890 the medical course proper was lengthened to five years and in 1926 it was extended to cover six years. In 1973 the Senate of the University adopted recommendations from the Faculty for the introduction of a new five year curriculum, which commenced in 1974.

The medical school outgrew the Anderson Stuart building and the University received a grant from the Rockefeller Foundation to construct a new building. The *Blackburn Building*, named in honour of Sir Charles Bickerton Blackburn who was Dean of the Faculty from 1932 to 1935 and Chancellor

of the University from 1941 to 1964, was opened to clinical students in 1933. More recently a major building development, the *Bosch Building*, was commenced on a site adjoining the Blackburn Building. Two stages of the Bosch Building complex have been completed; the third stage, an eleven-floor building, has yet to be commenced.

The Bosch Building is named in honour of George Henry Bosch, a Sydney businessman who has been the Faculty's greatest benefactor, and through whose generosity full-time chairs in Histology and Embryology, Medicine, Surgery, and Bacteriology were established between 1927 and 1930. The first occupant of the full-time chair of Medicine was C. G. Lambie, who held the position from 1930 until 1957; the first appointment to the full-time chair of Surgery was Sir Harold Dew, from 1930 to 1956. At the same time the School of Public Health and Tropical Medicine was founded, and in 1933 the chair of Obstetrics became full-time and was occupied by J. C. Windeyer. In recent years the Faculty has established new chairs in areas such as Psychiatry, Child Health, Pharmacology, Clinical Pharmacology, Cardiology, Orthopaedic and Traumatic Surgery, Preventive and Social Medicine, Anaesthetics, Behavioural Sciences, Immunology, Human Nutrition, and Community and Geriatric Medicine, as well as multiple chairs in Pathology, Physiology, Paediatrics, Medicine and Surgery. Present and future academic developments include new chairs in Otolaryngology and Rheumatology.

The Faculty has developed clinical schools based on the Royal Prince Alfred Hospital, Sydney Hospital, the Royal North Shore Hospital, the Repatriation General Hospital, Concord, Lidcombe Hospital and the Westmead Centre, and uses a further six hospitals for teaching in specialist branches of medicine. As well, eleven suburban hospitals have been affiliated to supplement teaching at both the general and specialist hospitals. The Faculty is also involved in the field of continuing medical education, through the activities of the Postgraduate Committee in Medicine. The Postgraduate Medical Foundation of the University raises funds which provide generous support for postgraduate training and research.

The Faculty of Medicine of the University is the largest medical school in Australia and is among the largest in the English-speaking world. It has established a strong international reputation through the high standard of its graduates and through its significant and extensive research activities.

### **The medical curriculum**

In 1974 the University of Sydney introduced a five-year undergraduate medical curriculum, replacing its previous six-year course for the degrees of Bachelor of Medicine and Bachelor of Surgery. The course was the end result of a considerable amount of time and effort spent on the part of all members of the Faculty and many outside helpers. Active planning for the curriculum

commenced in 1969 but it was not until 1973 that the course was formally adopted.

### **General objectives of the course**

The five-year course aims at providing basic training for every type of doctor. Its purpose therefore is to give graduates a rational approach to the practice of medicine in the light of existing knowledge, and to provide them with the capacity to understand and utilise the new developments which they will later encounter in their own particular branch of medicine. For this reason it places considerable emphasis on the scientific aspects of medicine. This includes consideration of the science of normal and abnormal human behaviour, both in individual patients and in communities.

In planning the curriculum, the Faculty had very much in mind the information explosion in all fields of knowledge. One reason for curricular revision is that one cannot simply keep adding new material to the material currently being taught without creating confusion and dissatisfaction in the minds of both students and teachers. The curriculum aims at being flexible, making it easy to alter in the future, without adding significantly to the length or total factual content of the undergraduate course. The medical graduate will be involved in a lifetime of postgraduate study in all fields of medicine. The undergraduate course must therefore provide the scientific basis for such studies and must equip him with sufficient skills to begin the practice of medicine under supervision during his preregistration year following graduation.

The bulk of the course consists of 'core' material, which is defined as material that provides essential orientation for subsequent studies. It is selected in relation to some important principle that the teacher wishes to illustrate. Each student also has the choice of an option, which will allow him to study certain fields in greater depth. Both the 'core' and 'option' components of the course should give the student the opportunity for learning through his own experience and effort.

### **General outline of the course**

The first year and second year of the course each consist of three terms. Third year consists of four terms and fourth and fifth years consist of five terms each. The first two terms of first year are a premedical component, in which Physics and Chemistry are taught. In first year the student is introduced to the basic medical sciences, including Anatomy, Histology and Embryology, Biochemistry, Physiology together with Pharmacology and Behavioural Sciences in Medicine. These subjects are continued throughout second year. At the beginning of third year paraclinical subjects are taught: general and special Pathology, Bacteriology and Pharmacology. The main clinical part of the course is undertaken during the third, fourth and fifth years. In the third year, students are taught Clinical Science and History-Taking and Physical Examination. In Clinical Science the principles of Medicine and Surgery are taught in a coordinated manner and are closely integrated with Pathology, Physiology,

Biochemistry and Pharmacology. The aim here is to correlate clinical medicine with basic medical science. Most of the clinical work will be in relation to observation of inpatients in the teaching hospitals, but the student will also obtain some outpatient experience, and some experience of medicine in community health and general practice settings. At the beginning of the fourth year the course also includes components of Preventive and Social Medicine, Tropical Medicine, Rehabilitation Medicine, Community Medicine, Geriatrics, and Human Sexuality.

In the fourth year students also undertake Obstetrics and Gynaecology, Psychiatry, Paediatrics and Community Medicine (which includes Geriatrics and Rehabilitation Medicine). These courses, which are each of one term's duration, are taught in teaching hospitals. (Community Medicine is taught in community health centres and general practices.)

During this section of the course there is a more direct involvement of the student in patient care in the particular subject.

The fifth year consists of block teaching in Medicine and Surgery. There are two terms of fourteen weeks each in which Medicine and Surgery are taught, both separately and correlatively, in the hospitals and on campus.

The last term of fifth year comprises an 'option', which may be undertaken in clinical and/or basic science subjects, or in any combination of these approved by the Faculty.

Students are allocated to one of six clinical schools at the beginning of the third year, and from there on undertake all their clinical training in that clinical school or in a specialist hospital.

At the end of the fourth year there is an unallocated term in which students may undertake any type of clinical attachment they wish, or in fact, do nothing at all if they so desire, as this is not a formal part of the course. However, during this period most students seek a clerking attachment at a hospital or with a private practitioner, either locally or interstate, or overseas.

### **Specific features of the course**

The course is one year shorter than the former six-year curriculum, although there has been no increase in the length of the pre-registration period. There is no shortening whatsoever in the amount of clinical experience, which covers all the disciplines encompassed in a traditional six-year curriculum, with the addition of a significant component of Community Medicine. There has been a reduction in the components of Chemistry and Physics, while Biology has been completely omitted from the course. The Physics and Chemistry courses have been altered to make them more relevant for medical studies. A significant biological content is available in the course Introductory Medical Science. The five-year curriculum also has a smaller content of Anatomy than the old course. The Faculty believes that new methods of teaching Anatomy will lead to graduates being more rather than less sophisticated than their predecessors in the principles of morphological science.

The development of the course Clinical Science is a significant feature of the curriculum. It is taught in a multidisciplinary fashion and closely integrates the principles of Pathophysiology and the diagnosis of disease with the students' early clinical experience. This integration permits substantial economies of time during the transition period between preclinical studies and clinical experience.

The introduction of the subject Behavioural Sciences in Medicine is another important feature of the course, and is in keeping with curricular developments in medical schools throughout the Western world. The Faculty consider this subject to be of vital importance in the production of a more appropriate and forward-looking graduate. It will teach the medical graduate the essentials of some special skills, understanding and attitudes required by the general practitioner. Another new subject in the curriculum is Community Medicine, which is taught in association with Geriatrics and Rehabilitation Medicine. This subject provides practical experience which brings all students closer to medicine in family and community settings. It draws on the background taught in Behavioural Sciences in first and second years. Departments of Community and Geriatric Medicine and Behavioural Sciences in Medicine have been established by the Faculty for the purpose of the curriculum.

Under the five-year curriculum a system of assessment has been developed. Annual terminal examinations have been abolished, and in their place a system of progressive assessment has been introduced. There are five barriers at different stages of the course, beyond which a student cannot proceed without having satisfied in the subjects leading up to the particular barrier. The barriers are at the end of the premedical component of the course (end of second term of first year); at the end of the preclinical component (end of third term of second year); and at the end of the Clinical Science component (end of third year); at the end of the fourth year; and at the end of the fifth year. The results of continuous assessments undertaken during the terms leading up to these barriers will count towards the results of these barriers.

Another feature of the curriculum is a scheme of student-staff assessment of course content and teaching performance in the individual subjects. A committee has been established for this purpose, and in assessing student opinion of these subjects provides valuable feed-back to the Faculty of the impact of its curriculum.

### **Degree of Bachelor of Science (Medical)**

The degree of Bachelor of Science (Medical) will continue to be offered under the medical curriculum. The degree may be considered comparable to the additional Honours year undertaken in the Faculties of Science and Arts in which students who have shown considerable academic merit are encouraged to undertake an extra year's study in a particular field of interest.

Students who have successfully completed second year Medicine or third year Medicine and who have shown excep-

tional academic progress, may be admitted to undertake candidature for the degree of BSc(Med), which is normally of one year's duration. Candidature may be undertaken in any one of the subjects already studied in the course. A research topic is usually set by the Head of the Department concerned and a candidate after undertaking his research submits a thesis which is examined.



# By-laws and resolutions

## Extract from Chapter XII of the by-laws

### By-laws

1. The Faculty of Medicine shall comprise the following persons:
  - (a) The Professors, Readers, Associate Professors, Senior Lecturers, Lecturers, Principal Tutors, and Senior Tutors being full-time members of the teaching staff and those persons upon whom the Senate has conferred the title of Professor, Reader, Associate Professor, Senior Lecturer or Lecturer in the departments of Anaesthetics, Anatomy, Bacteriology, Behavioural Sciences in Medicine, Biochemistry, Child Health, Community Medicine, Environmental Health, Histology and Embryology, Medicine, Obstetrics and Gynaecology, Ophthalmology and Eye Health, Pathology, Pharmacology, Physiology, Preventive and Social Medicine, Psychiatry, Surgery and Tropical Medicine;
  - (b) the University Lecturers in Medical Jurisprudence, Diseases of the Ear, Nose and Throat and Diseases of the Skin;
  - (c) the Heads of the Schools of Chemistry and Physics or their representatives, the Dean of the Faculty of Arts or his nominee and the Dean of the Faculty of Dentistry or his nominee;
  - (d) the Director, Commonwealth Institute of Health and the Professor of Mathematical Statistics;
  - (e) not more than seventeen persons each of whom shall be a nominee of a teaching hospital and of whom—
    - (i) not more than thirteen shall each be a nominee of one of the following hospitals:
      - Royal Prince Alfred Hospital
      - Sydney Hospital
      - The Royal North Shore Hospital of Sydney
      - Repatriation General Hospital, Concord
      - Lidcombe Hospital
      - The Parramatta Hospitals, Westmead Centre
      - Royal Alexandra Hospital for Children
      - The Women's Hospital (Crown Street)
      - St Margaret's Hospital for Women
      - Mater Misericordiae Hospital, North Sydney
      - Rozelle Hospital
      - Parramatta Psychiatric Centre
      - Macquarie Hospital; and
    - (ii) not more than four persons appointed in the manner prescribed by resolution of the Senate from teaching hospitals specified by the Senate, other than those listed in subclause (i);
  - (f) the Wardens of the clinical schools at the Royal Prince Alfred Hospital, Sydney Hospital, the Royal North Shore Hospital of Sydney, the Repatriation General Hospital, Concord, and Lidcombe Hospital;

- (g) the General Superintendents of the Royal Prince Alfred Hospital, the Royal North Shore Hospital of Sydney, the Parramatta Hospitals, Westmead Centre, and the Royal Alexandra Hospital for Children, and the Medical Superintendents of Sydney Hospital, the Repatriation General Hospital, Concord, and Lidcombe Hospital;
- (h) not more than five students appointed in the manner prescribed by resolution of the Senate;
- (i) such Fellows of the Senate as are legally qualified members of the medical profession;
- (j) the Director of Postgraduate and Continuing Medical Education;
- (k) one nominee each of the Royal Australasian College of Physicians, the Royal Australasian College of Surgeons, the Royal College of Obstetricians and Gynaecologists, the Royal College of Pathologists of Australia, the Royal Australian College of General Practitioners and the Royal Australian and New Zealand College of Psychiatrists who may be a member of the Faculty by virtue of one or other of subsections (a) to (j) above;
- (l) the members of the Postgraduate Committee in Medicine who are not members of the Faculty by virtue of one of subsections (a) to (k) inclusive; and
- (m) such other persons as may be appointed by the Senate on the nomination of the Dean of the Faculty of Medicine with the approval of the Faculty and the Academic Board, provided that any person appointed pursuant to this subsection should be appointed for a period of 3 years and should be eligible for reappointment.

## Resolutions of the Senate

### New Senate Resolutions

#### **Resolutions of the Senate for the appointment of not more than four persons as nominees of teaching hospitals to membership of the Faculty of Medicine.**

Pursuant to section 1 (e) of Chapter XII of the by-laws, the Senate makes the following resolutions:

**1.** There shall be not more than four persons each of whom shall be a nominee of one of the following teaching hospitals appointed to membership of the Faculty

- Auburn District Hospital
- Balmain Hospital
- Blacktown District Hospital
- Rachel Forster Hospital for Women
- Lidcombe State Hospital
- Marrickville District Hospital
- Mona Vale District Hospital
- Royal Newcastle Hospital
- Parramatta District Hospital
- Ryde District Hospital
- Western Suburbs Hospital

2. Appointment to membership shall take place in Lent Term of each alternate year, provided that the first such appointment shall take place in Lent Term 1973 or so soon thereafter as may be arranged.
3. The term of office of each nominee shall be for a period of two years from the first day of Lent Term in the year of appointment until the day prior to the first day of Lent Term in the second year of appointment.
4. A nominee shall cease to hold office if he otherwise becomes eligible for membership of the Faculty.
5. (1) Any vacancy occurring by the death, disqualification or resignation of a nominee may be filled by the Dean of the Faculty on the recommendation of the teaching hospital concerned and the person so appointed shall hold office for the balance of the term of the person he replaces.  
(2) Where a teaching hospital fails to submit a nomination, the Dean of the Faculty may authorise the Registrar to invite another teaching hospital to submit a nomination.
6. (1) The Registrar shall, not less than one month prior to the first day of Lent Term in each alternate year, invite one nomination from each of four teaching hospitals specified in section 1.  
(2) Each teaching hospital specified in section 1 shall be invited to submit one nomination in the following order:
  - (a) For the period Lent Term 1973 to Lent Term 1975—
    - Auburn District Hospital
    - Balmain Hospital
    - Blacktown District Hospital
    - Rachel Forster Hospital for Women
  - (b) For the period Lent Term 1975 to Lent Term 1977—
    - Blacktown District Hospital
    - Rachel Forster Hospital for Women
    - Lidcombe State Hospital
    - Marrickville District Hospital
  - (c) For the period Lent Term 1977 to Lent Term 1979—
    - Lidcombe State Hospital
    - Marrickville District Hospital
    - Mona Vale District Hospital
    - Royal Newcastle Hospital
  - (d) For the period Lent Term 1979 to Lent Term 1981—
    - Mona Vale District Hospital
    - Royal Newcastle Hospital
    - Parramatta District Hospital
    - Ryde District Hospital
  - (e) For the period Lent Term 1981 to Lent Term 1983—
    - Parramatta District Hospital
    - Ryde District Hospital
    - Western Suburbs Hospital
    - Auburn District Hospital.

## Committees of the Faculty

The following are the committees of the Faculty of Medicine which are responsible for the planning and implementation of faculty policies:

- Faculty of Medicine (including Standing Committee of the Faculty)
- Postgraduate Degrees Board
- Boards of Examiners
- Standing Committee on Courses of Study
- Curriculum Advisory Committee
- Curriculum Steering Committee
- Interdepartmental Committee on Introductory Medical Science
- Interdepartmental Committee on Paraclinical and Clinical Sciences
- Interdepartmental Committee on the Option Term
- Consultative Committee to Behavioural Sciences in Medicine
- Advisory Council of the Division of Paraclinical Sciences
- Staff/Student Liaison Committee
- Medical Ethical Review Committee
- Animal Ethical Review Committee
- Animal Houses Committee of Management
- Animal Houses Inspection Committee
- Committee on Restriction upon Re-enrolment
- Committee on Selection of Graduates and Undergraduates of other Faculties into Medicine
- Prizes Committee
- Medical Library Committee
- Medical Research Committee
- Committee of Wardens of the Teaching Hospitals
- Boards of Medical Studies for seven Teaching Hospitals

In addition there are special *ad hoc* committees or working parties concerned with the following areas: liaison with the Health Commission of New South Wales, liaison with the Faculty of Medicine of the University of New South Wales; liaison with the Department of Veterans' Affairs; clinical academic titles for conjoint appointments in teaching hospitals; affiliation of hospitals for undergraduate teaching; various hospital and health planning services in association with the Health Commission of New South Wales; etc.

There are conjoint boards of the various teaching hospitals and the Senate of the University, which are concerned with appointment of staff at the hospitals.

## Student membership of the Faculty

The Resolutions of the Senate make provision for five students to be elected to membership of the Faculty of Medicine.

The five students shall comprise:

- (a) The Senior Undergraduate Vice-President of the Sydney University Medical Society, provided he or she is a

student enrolled for a degree or diploma in the Faculty of Medicine (ex officio);

- (b) Four undergraduate students, representing the second, third, fourth and fifth years of the course for the degrees of Bachelor of Medicine and Bachelor of Surgery.

See also the section on student participation in university government in Chapter 5.

## Examinations and assessment

### Boards of Examiners

Pursuant to section 6 of Chapter VIII of the By-laws, the Faculty of Medicine has resolved to appoint the following Boards of Examiners:

#### Faculty resolutions

#### MBBS

1. The Faculty of Medicine shall appoint annually Boards of Examiners which shall be responsible for assessment of performances in the courses and for the conduct of examinations for the subjects laid down in the By-laws governing the degrees of Bachelor of Medicine and Bachelor of Surgery as from 1st January, 1974.

2. There shall be six Boards of Examiners, namely, the Board of Examiners for Assessment of First Year; the Board of Examiners for Assessment of Second Year; the Board of Examiners for Assessment of Third Year; the Board of Examiners for Assessment of Fourth Year; the Board of Examiners for Assessment of Medicine and Surgery in the Fifth Year; and the Board of Examiners for Assessment of Optional Assignments.

3. The Boards of Examiners shall consist of the Head of each Department with responsibility for the segment of the course for the degrees being examined, and/or his representative or representatives, together with the Heads of Departments with responsibility for other segments of the course for the degrees and/or their representative or representatives.

The Board of Examiners for assessment of Third Year and the Board of Examiners for Assessment of Optional Assignments shall include members of the interdepartmental committee established for the Clinical Science course and the Optional Assignment term respectively, as nominated by the Chairmen, in accordance with Chapter VIII of the By-laws.

4. The Dean of the Faculty or his nominee shall be *ex officio* chairman of each Board of Examiners.

5. The Dean shall invite representatives of the teaching hospitals to be present at the Boards of Examiners for Assessment of Third Year, Assessment of Fourth Year and for Assessment of Medicine and Surgery in the Fifth Year.

#### BSc(Med)

1. The Faculty of Medicine shall appoint annually a Board of Examiners which shall be responsible for the conduct of examinations in the subjects laid down in the By-laws governing the degree of Bachelor of Science (Medical).

2. The Board of Examiners shall consist of the Head of each Department with Responsibility for the subjects for the degree, and/or his representative or representatives.
3. The Dean of the Faculty or his nominee shall be *ex officio* chairman of the Board of Examiners.

# 3

## Undergraduate degree requirements

### Degrees

There are seven degrees in the Faculty of Medicine, viz.:

MB	Bachelor of Medicine
BS	Bachelor of Surgery
BSc(Med)	Bachelor of Science (Medical)
MS	Master of Surgery
MPH	Master of Public Health
PhD	Doctor of Philosophy
MD	Doctor of Medicine

The first three are undergraduate degrees, the rest are post-graduate.

Before admission to the Medical School, candidates for the MB BS degrees must have matriculated into the University of Sydney and have been selected for entry into the faculty of Medicine.

The degrees of Bachelor of Medicine and Bachelor of Surgery are awarded in the case of successful candidates after a course of five academic years. These degrees are those recognised for registration purposes. Full registration, however, is not attained until a further year has been spent as an intern in a recognised hospital.

The degree of Bachelor of Science (Medical) is an additional degree, obtainable during the medical course. It requires interruption of the normal course for a year.

The degree of Doctor of Philosophy is obtained by full-time or part-time postgraduate research.

The degree of Master of Public Health, which is available to non-medical graduates, is obtained on a full-time or part-time basis, and involves coursework or writing a thesis, or a combination of both.

The senior degrees of Doctor of Medicine and Master of Surgery are obtainable five years after graduation and require postgraduate study and research.

	The number of students in each year 1976-81					
	1976	1977	1978	1979	1980	1981
Medicine I	255	247	268	252	251	264
Medicine II	282	265	239	275	246	245
Medicine III	189	291	249	225	265	266
Medicine IV	267	186	288	251	217	254
Medicine V	255	269	175	278	244	206
Medicine VI	253	241	271			
(OBL)						
BSc(Med)	22	9	18	13	19	18
Total	1523	1508	1508	1312	1242	1253

## Requirements for the MB, BS and BSc(Med)

### Extracts from Chapter XII of the by-laws

2. The degrees in the Faculty shall be:

- (a) Bachelor of Medicine (MB)
- (b) Bachelor of Surgery (BS)
- (c) Doctor of Medicine (MD)
- (d) Master of Surgery (MS)
- (e) Master of Public Health (MPH)
- (f) Doctor of Philosophy (PhD) and
- (g) Bachelor of Science (Medical) (BSc(Med))

### Bachelor of Medicine and Bachelor of Surgery

3. A candidate for the degrees of Bachelor of Medicine and of Bachelor of Surgery shall subsequent to matriculation complete such requirements for the degrees as may be prescribed from time to time by resolution of the Senate on the recommendation of the Academic Board and of the Faculty.

4. A person who has enrolled as a candidate for the degrees of Bachelor of Medicine and Bachelor of Surgery before 1 January 1974 and who has not completed the requirements for the degrees by that date, shall complete the requirements for the degrees under such conditions as may be prescribed by resolution of the Senate on the recommendation of the Academic Board and of the Faculty.

5. Bachelors of Medicine, Bachelors of Surgery and Masters of Surgery of this University shall not possess any right to assume the title of Doctor of Medicine.

### Bachelor of Science (Medical)

18. A candidate for the degree of Bachelor of Science (Medical) shall complete such requirements for the degree as may be prescribed from time to time by resolution of the Senate on the recommendation of the Academic Board and of the Faculty.



## **Degrees of Bachelor of Medicine and Bachelor of Surgery**

In accordance with section 3 of Chapter XII of the By-laws, the Senate has prescribed the following Resolutions governing candidate for the degrees of Bachelor of Medicine and Bachelor of Surgery:

1. (a) A candidate for the degrees of Bachelor of Medicine and Bachelor of Surgery shall complete:
  - (i) In the First Year, the prescribed courses of study in the following:
    - (a) Terminating subjects:
      - Chemistry
      - Introductory Medical Science
      - Physics
    - (b) Non-terminating subjects:
      - Anatomy
      - Behavioural Sciences in Medicine
      - Biochemistry
      - Histology and Embryology
      - Pharmacology
      - Physiology
  - (ii) In the Second Year, the prescribed courses of study in the following subjects:
    - Anatomy
    - Behavioural Sciences in Medicine
    - Biochemistry
    - Histology and Embryology
    - Pharmacology
    - Physiology
  - (iii) In the Third Year, the prescribed courses of study in the following subjects:
    - Bacteriology
    - Immunology
    - Pathology
    - Pharmacology
    - Clinical Sciences
  - (iv) In the Fourth Year, the prescribed courses of study in the following subjects:
    - Community Medicine
    - Obstetrics and Gynaecology
    - Paediatrics
    - Psychiatry
    - Preventive and Social Medicine
    - Environmental and Occupational Health
    - Clinical Pharmacology
    - Clinical Laboratory Methods
    - Tropical Medicine
    - Ophthalmology and Eye Health
    - Dermatology
    - Diseases of the Ear, Nose and Throat
  - (v) In the Fifth Year—
    - (a) The prescribed courses of study in the following subjects:
      - Medicine
      - Surgery; and

(b) an optional assignment in any one subject selected from the following, in accordance with Resolutions of the Faculty:

- (i) Anaesthetics and Resuscitation; Anatomy; Bacteriology; Behavioural Sciences in Medicine; Biochemistry; Community Medicine; Environmental Health; Histology and Embryology; Medicine; Obstetrics and Gynaecology; Ophthalmology and Eye Health; Paediatrics; Pathology; Pharmacology; Physiology; Preventive and Social Medicine; Psychiatry; Surgery; Tropical Medicine; or
- (ii) any other subject as may be approved from time to time by Resolution of the Faculty; or
- (iii) a subject which is a combination, approved from time to time by Resolution of the Faculty, of any two or more subjects listed under subsection (v) (b) (i) or approved under subsection (v) (b) (ii).

(b) For the purpose of these Resolutions 'Clinical Sciences' shall comprise an integrated course of instruction in para-clinical and clinical subjects as determined from time to time by the Faculty of Medicine.

2. (i) A course shall consist of lectures, together with such clinical, laboratory and tutorial instruction or practical work, exercises or essays as may be prescribed by the Faculty.
  - (ii) In these resolutions, the words 'to complete a course' and derivative expressions mean:
    - (a) to attend the lectures and seminars if any for clinical, laboratory or tutorial instruction;
    - (b) to complete satisfactorily the practical work, exercises or essays if any; and
    - (c) to pass the examinations if any in the course.
3. (i) There shall be barrier assessments:
    - I at the end of the First Year;
    - II at the end of Second Year;
    - III at the end of the Third Year;
    - IV at the end of the Fourth Year;
    - V at the end of the Fifth Year.
  - (ii) At each barrier assessment, a Board of Examiners appointed by the Faculty for that purpose shall review the performance of candidates in the courses prescribed for the degrees.
  - (iii) A candidate who fails to complete one or more courses satisfactorily shall be deemed to have failed at the barrier assessment.
  - (iv) A candidate who has been deemed to have failed at barrier assessment shall repeat such courses and

complete satisfactorily such assessments as the Board of Examiners, in accordance with the Resolutions of the Faculty, shall prescribe, provided always that he shall be eligible for reconsideration at the barrier assessment when a period of twelve months shall have elapsed.

(v) Notwithstanding anything to the contrary elsewhere in these Resolutions, a candidate who, in the First Year, has not completed one or more non-terminating courses satisfactorily may be allowed to proceed into the Second Year provided that he has completed all terminating courses satisfactorily; the conditions under which such a candidate shall be allowed to proceed into the Second Year shall be determined by the Board of Examiners, in accordance with Resolutions of the Faculty, which may include a requirement to pass examinations in such courses at or before the Second Year barrier assessment.

4. A candidate who has completed all requirements for the degrees shall be recommended to the Senate for admission to the degrees of Bachelor of Medicine and Bachelor of Surgery.

5. Except with the permission of the Faculty, all requirements for the degrees shall be completed within nine calendar years from the first enrolment in the Faculty.

6. The degrees shall be awarded jointly in one of two grades, either Pass or Honours. There shall be two classes of Honours, namely Class I and Class II.

7. Honours at graduation shall be awarded in accordance with Resolutions of the Faculty, and the candidate who shall have been most distinguished shall receive a bronze medal, provided that he shall have obtained first-class honours and be deemed to be of sufficient merit.

8. For the purposes of section 17 of the Medical Practitioners Act, 1938, 'the Fourth, Fifth and Final Year examinations prescribed by the Senate of the University of Sydney for students in the Faculty of Medicine' shall be the examinations of the Third, Fourth and Fifth barrier assessments as set out in Resolution 3 (i).

8A. A candidate who has been enrolled for the degrees of Bachelor of Medicine and Bachelor of Surgery but has not re-enrolled for a period of three or more consecutive years shall complete the requirements for the degrees under such conditions as the Faculty may determine.

### **Transitional provisions for the degrees of Bachelor of Medicine and Bachelor of Surgery**

9. Pursuant to section 4 of Chapter XII of the By-laws, and except as provided in Resolution 10A, a candidate enrolled for the degrees of Bachelor of Medicine and Bachelor of Surgery before 1st January, 1974, and who has not completed the requirements for the degrees by that date, shall proceed to the degrees in accordance with the By-laws in force immediately prior to 1st January, 1974.

**10.** Except as provided in Resolutions 9 and 10A, a candidate enrolled for the degrees of Bachelor of Medicine and Bachelor of Surgery in accordance with the Resolutions of the Senate in force immediately prior to 1st January, 1981, who has completed the requirements for the Third Year prior to 1st January, 1981, shall proceed to the degrees in accordance with those Resolutions.

**10A.** Where a course for the degrees is no longer available for a candidate referred to in Resolution 9 or 10, that candidate shall complete instead such other course or courses as the Faculty may by Resolution prescribe.

### **Bachelor of Science (Medical)**

- 11.** (i) A candidate for the degrees of Bachelor of Medicine and Surgery who—
- (a) has completed the course leading to the second barrier assessment as set out in Resolution 3 (i);
  - (b) has shown special merit in his studies, and
  - (c) is considered by the Head of the Department a suitable candidate for advanced work,
- may be permitted by the Faculty to interrupt his candidature for the degrees and attend an approved course of advanced study in Anatomy, Histology and Embryology, Biochemistry, Behavioural Sciences in Medicine, or Physiology.
- (ii) On completion of the course such a candidate may be recommended by the Faculty for admission to the degree of Bachelor of Science (Medical).
- (iii) The degree shall be awarded in one of two grades, either Pass or Pass with Distinction.
- 12.** (i) A candidate for the degrees of Bachelor of Medicine and Surgery who—
- (a) has completed the course leading to the third barrier assessment as set out in Resolution 3(i);
  - (b) has shown special merit in his studies and
  - (c) is considered by the Head of the Department a suitable candidate for advanced work,
- may be permitted by the Faculty to interrupt his candidature for the degrees and attend an approved course of advanced study in Anatomy, Histology and Embryology, Biochemistry, Behavioural Sciences in Medicine, Physiology, Bacteriology, Pathology or Pharmacology.
- (ii) On completion of the course such a candidate may be recommended by the Faculty for admission to the degree of Bachelor of Science (Medical).
- (iii) The degree shall be awarded in one of two grades, either Pass or Pass with Distinction.

### *Applications*

Those students desiring to proceed to the BSc(Med) degree following the second or the third year examinations are requested to apply to the Registrar on the appropriate form, before the end of October. (Forms are available from the Dean's Office, Faculty of Medicine.)

Applications should indicate the department(s) in which the student desires to work whilst proceeding to the degree. It is not necessary for a student to work in the department in which the best examination results were obtained.

*Scholarships*

Some scholarships may be available for students who are accepted as candidates for the degree of BSc(Med). The availability and value of the scholarships vary from year to year. Candidates who wish to be considered for a scholarship should indicate this when applying for permission to proceed to the degree of BSc(Med). *Candidates for such scholarships should state in their applications whether they receive tertiary education assistance from the Australian Government, or any other living allowance.*

*Honours at graduation*

Under the undergraduate curriculum, the degrees of Bachelor of Medicine and Bachelor of Surgery may be awarded with honours. There are two classes of honours, namely Class I and Class II.

The final year candidate who is considered to have been the most distinguished, may be awarded a bronze medal, provided he or she has obtained Class I honours and is deemed to be of sufficient merit.

The award of honours for students enrolled in Medicine V in 1982 will be determined on the basis of an aggregate of marks obtained at the four barrier assessments during the course. The results at each barrier are weighted as follows:

1st year	barrier assessment × 2
2nd year	barrier assessment × 10
3rd year	barrier assessment × 10
4th year	barrier assessment × 10
5th year	barrier assessment × 10

The marks gained in the individual subjects, which contribute to each total barrier mark, are weighted separately as follows:

<i>1st Year Barrier assessment</i>	
Physics	40%
Chemistry	40%
Introductory Medical Science	20%
<i>2nd Year Barrier assessment</i>	
Anatomy	18%
Behavioural Science in Medicine	18%
Biochemistry	18%
Histology and Embryology	18%
Pharmacology	10%
Physiology	18%
<i>3rd Year Barrier assessment</i>	
Pathology (general pathology and practical examination)	10%
Bacteriology (includes practical examination)	5%
Pharmacology (taught in term 3.1, and includes practical examination)	5%
Clinical Science (including questions on integrated third year subjects—pathology, bacteriology, pharmacology, psychiatry, medicine, surgery and specialities)	80%

DEGREE REQUIREMENTS  
COURSES OF STUDY

<i>4th Year Barrier assessment</i>	
Obstetrics and Gynaecology	25%
Paediatrics	25%
Psychiatry	25%
Community Medicine	25%
<i>5th Year Barrier assessment</i>	
Medicine	50%
Surgery	50%

# 4

## Courses of study

### Books

You are expected to own all books listed as *Textbooks*. However, you are not required to buy books listed as *Preliminary reading* or *Reference books*.

### Courses are subject to alteration

*Note:* Courses and arrangements for courses, including staff allocated, as stated in the *Calendar* or any other publication, announcement or advice of the University are an expression of intent only and are not to be taken as a firm offer or undertaking. The University reserves the right to discontinue or vary such courses, arrangements or staff allocations at any time without notice.

## First year

### Physics I (Life Sciences)

The Physics course consists of 72 lectures together with 3 hours a week laboratory sessions, undertaken during Lent and Trinity terms. The course is designed to emphasise the concepts of Physics and, where possible, to show the appreciation of Physics in the Biological Sciences. There are six units: forces and energy, electricity, thermal physics, optics, ionising radiation and properties of matter. Two-thirds of the lectures are given on closed-circuit television.

#### Textbooks

*Physics I (Life Sciences)* (School of Physics, 1982)

*Physics I Laboratory Manual, Dentistry, Medicine and Veterinary Science* (School of Physics, 1982)

Students wishing to enrol in a first year course in Physics who have not reached the assumed standard for that course, are advised to read one of the following books before the beginning of Lent term:

*The Project Physics Course: Readers 1-6* (Horwitz, 1972)

*Physics for the Inquiring Mind* (Oxford U.P., 1960)

*One, Two, Three... Infinity* (Macmillan, 1947)

*Physics: The Fabric of Reality* (Macmillan, 1975)

E. Rogers  
G. Gamow  
S. K. Kim

Additional instruction will be available for these students during the academic year.

## Chemistry

Chemistry ILS (Life Sciences) is a two-term course specially designed to suit the needs of the student who requires a good general grounding in Chemistry, and who will subsequently undertake a study of such subjects as Biochemistry and Physiology. It covers chemical theory, inorganic, physical, and organic chemistry with many examples from biological areas. The course will presuppose a satisfactory prior knowledge of the Chemistry component of the Science multistrand HSC course.

Fully detailed information about the course is available from the Chemistry School.

### Lecturers

A course of 69 lectures given during Lent and Trinity terms comprising 42 lectures in Inorganic, Physical and Organic Chemistry and 27 lectures in Organic Chemistry, with many illustrations from biological areas.

### Practical work

A course of 17 three-hour sessions during Lent and Trinity terms.

### Examinations

Theory examinations for the course are held at the end of Lent and Trinity terms. Students are advised at the beginning of the year about other factors contributing to the assessment for the course.

### Textbooks

W. T. Lippincott *et al.*  
W. H. Brown  
G. H. Aylward and  
T. J. V. Findlay  
P. G. Simpson and  
H. G. Holland  
Chemistry I Staff

*Chemistry: A Study of Matter*, 3rd edn (Wiley, 1977)  
*Introduction to Organic Chemistry*, 4th edn (Wadsworth, 1981)  
*S.I. Chemical Data*, 2nd edn (Wiley, 1975)

*Chemistry I Laboratory Handbook*, 3rd edn (Science Press, 1978)

*Chemistry I Problem Book* (University of Sydney)

### Special Preparative studies

Students wishing to enrol in Chemistry ILS who have not taken a 2 unit Chemistry course or a 4 unit Science Multistrand Higher School Certificate course, are required to study the following book before the beginning of Lent term.

R. J. Hunter *et al.*

*Chemical Science* (Science Press, 1980)

## Introductory Medical Science

The course given in Lent term is designed to provide an introduction to certain areas of knowledge which may or may not be taken up in more detail later in the medical curriculum. The course is administered by an interdepartmental committee chaired by Professor J. A. Young.

The subject areas included in the course are:

<i>Subject</i>	<i>Number of lectures</i>
Biomathematics	18
Comparative Morphology	18
Genetics	9
Health & Disease in Populations	9
Human Evolution	5



## Behavioural Sciences in Medicine

The general aim of the Department of Behavioural Sciences in Medicine is to conduct a preclinical course that lays a foundation for the development, throughout later undergraduate and postgraduate years, of knowledge, skills and attitudes involved in the effective management of the interpersonal and social aspects of the practice of medicine. While the department does some teaching in clinical years, its main contribution is during the first five terms of the undergraduate medical course, when students have two lectures and one tutorial weekly.

In first year, Lent term introduces the practice of medicine, scientific method in the behavioural sciences, and basic sociological concepts. Trinity and Michaelmas terms take the human being through his lifespan, with emphasis on areas of special medical relevance, such as human sexuality and death, dying and bereavement. The first-year tutorial course develops some of the lecture content areas and introduces basic communication and interviewing skills. Assignments are designed to move students out into the community and to develop interviewing skills further.

In the second-year course, the focus is strongly on the individual in the medical situation. There are four lecture strands in second year: motivation, emotion and stress; the doctor and his patient; the institution of medicine in our society and the delivery of health care in our society. Second-year tutorials are largely discussion-based and relate to the four lecture strands. There are two assignments in second year, and in the carrying out of these assignments, students are given more responsibility for guiding their own learning, deciding on areas of interest and finding out about them.

### Textbooks

#### • Years I and II

L. S. Wrightsman *et al.*

*Psychology: A Scientific Study of Human Behaviour*, 5th edn (Brooks/Cole, 1979)

D. Edgar

*Introduction to Australian Society* (Prentice-Hall, 1980)

B. S. Hetzel

*Health and Australian Society*, 3rd edn (Penguin, 1980)

R. E. Schell and E. Hall

*Developmental Psychology Today*, 3rd edn (CRM/Random House, 1979)

## Histology and Embryology

The first year course in Histology which begins in Trinity term, is concerned principally with the structure of cells and tissues. One lecture is given per week and this is followed immediately by a 2-hour practical period during which students study electron and light micrographs in addition to microscopical preparations.

### Textbook

A. W. Ham and  
D. H. Cormack

*Histology*, 8th edn (J. B. Lippincott Co., 1979)

## Anatomy

The anatomy of the upper limb, lower limb, head and neck, including somatic components of the peripheral nervous and

peripheral vascular systems will be taught during Trinity and Michaelmas terms.

Teaching/learning situations will depend on the use of specific behavioural objectives, small group discussion techniques and the use of prospected specimens and other teaching media. Lectures will be held as an introduction to many of the tutorials. Course orientation will be functional and directed towards clinical applications. Facilities for dissection may be optionally provided.

Students are strongly advised to provide themselves with half-sets of bones.

*Prosectors*

Fourth year students may undertake an elective term in anatomy, working in the area of applied anatomy. Those who do so will dissect and prosect. One or more prosectors may be awarded the Wolfe Solomon Brown Prize and the A. M. Loewenthal Prize each year.

*Practical anatomy*

Tutorial rooms and anatomy museum are open to members of the practical class only, during all the three terms, from Monday to Friday, for periods between the hours of 9 am and 5.50 pm, under the supervision of the professor and the teaching staff.

Admission to dissecting rooms, tutorial rooms and the Anatomy Museum is strictly limited to graduates in Medicine and Dentistry and undergraduates enrolled in Anatomy.

Removal of anatomical material from the department is prohibited by law as specified in the Anatomy Act.

Textbooks

- M. J. Blunt *A New Approach to Teaching and Learning Anatomy* (Butterworths, 1979)  
E. Gardiner *et al.* *A Regional Study of Human Structure*, 4th edn (Saunders, 1975)  
R. McMinn and R. Hutchings *A Colour Atlas of Human Anatomy* (Wolfe, 1977)  
M. L. Barr *The Human Nervous System—An Anatomic Viewpoint*, 3rd edn (Harper & Row, 1979)  
OR  
R. S. Snell *Clinical Neuroanatomy for Medical Students* (Little, Brown, 1980)

Reference book

- M. J. Blunt and M. Girgis *Multiple Choice Questions in Anatomy and Neurobiology Undergraduates* (Butterworths, 1979).

## Second year

### Anatomy

During the second year of the course attention will be given to the musculo-skeletal framework of the trunk, the visceral systems of the body and the neuro-endocrine system. The course is planned so that the visceral systems and the central nervous system may be 'filled into' the musculo-skeletal framework in a coordinated programme of study.

### Histology and Embryology

The second year Histology course, which has the same form as the first year course, is concerned principally with the structure of organs.

The Embryology course, of one lecture per week, is concerned with the morphology of development in terms 2.1 and 2.2 and with developmental biology and teratology in term 2.3.

#### Textbook

Keith L. Moore

*The Developing Human*. Clinically oriented Embryology. 2nd edn (W. B. Saunders)

### Physiology

Physiology is taught over four terms in first and second year; there are 51 hours of formal instruction in the third term of first year and 170 hours in the three terms of second year. The purpose of the first year segment is twofold. First, it serves as an introduction to the study of living systems and provides core instruction in basic cell physiology. Second, it provides core instruction in cellular neurophysiology, muscle physiology and gastrointestinal physiology, which is not dealt with again in the course. The course consists of 31 lectures in third term and 4 practical classes each of 5 hours' duration. In addition there are 6 tutorials and clinical case demonstrations held during the last 6 weeks of the term.

The second year course is the final three terms of the four-term Physiology course. It consists of approximately 110 lectures and 60 hours practical work, tutorials and clinical cases, distributed throughout the year. It deals successively with the following systems: cardiovascular and respiratory systems (first term); immunology, renal and body fluid physiology (second term); endocrine, reproduction and central nervous systems (third term).

#### Textbooks

D. J. Aidley  
A. C. Guyton

*The Physiology of Excitable Cells* (Cambridge U.P., 1979)  
*Textbook of Medical Physiology* (Saunders, 1980)

#### Reference book

W. F. Ganong

*Review of Medical Physiology* (Lange, 1977)

## Biochemistry

Biochemistry is studied during four terms of first and second year Medicine.

Students will receive three lectures per week in Michaelmas term of first year. Topics include the following: the structure and properties of amino acids, peptides and proteins, nucleotides and nucleic acids; an introduction to the nature of enzymes and enzyme catalysis. Three practical classes will be held dealing with topics related to the lectures in Michaelmas term.

About 90 lectures are given during terms 2.1, 2.2 and 2.3. Topics include the following: Biochemistry of cellular organisation and function; chemistry, digestion, absorption and metabolism of carbohydrates; biological oxidations, including the chemistry and functions of porphyrins and cytochromes, electron transport, oxidative phosphorylation and mitochondrial organisation; the chemistry of lipids; digestion, absorption and metabolism of fats and fatty acids; digestion and absorption of proteins and amino acids; metabolism and functions of complex lipids; nitrogen metabolism and the metabolism of one-carbon compounds; mechanism and control of the synthesis of nucleic acids and proteins including biochemical genetics; the control of intermediary metabolism; biochemical aspects of hormone action; inborn errors of metabolism; plasma proteins and immunoglobulins; biochemistry of the red blood cell; the synthesis and degradation of haemoglobin and the metabolism of iron; vitamins; the biochemistry of connective tissue; aspects of neurochemistry; antibiotics.

Six five-hour practical classes will be held in terms 2.1 and 2.2. Tutorials will be given from time to time.

### Textbook

L. Stryer *Biochemistry*, 2nd edn (Freeman, 1981)

### Reference books

A. G. White *et al.* *Principles of Biochemistry*, 6th edn (McGraw-Hill, 1978)  
S. Davidson *et al.* *Human Nutrition and Dietetics*, 7th edn (Churchill Livingstone, 1979)  
R. W. McGilvery *Biochemistry, A Functional Approach*, 2nd edn (Saunders, 1979)

## Behavioural Sciences in Medicine

See the first year entry.

## Pharmacology and Clinical Pharmacology

Pharmacology is taught over six terms, commencing in term 2.2 of second year and ending in term 4.1 of fourth year. In second year it is co-ordinated on a topic basis with Physiology. Instruction is by lectures, tutorials and correlation sessions.

Third year students will receive a course of lectures and tutorials on systematic pharmacology.

Clinical pharmacology will be taught in Term 4.1 by lectures, tutorials and selected practical sessions.

Examinations are by assessments at the end of each teaching term throughout the course and each will cover the work of that term. Pharmacology as a whole will be examined in the 3.4 barrier assessment.

**Textbook**

G. S. Avery *Drug Treatment* (Adis, 1980)

**Reference books**

L. S. Goodman and A. Gilman *The Pharmacological Basis of Therapeutics* (Macmillan, 1980)

W. C. Bowman and M. J. Rand *Textbook of Pharmacology* (Blackwell, 1980)

## Third year

### Pathology

Students will attend morning and afternoon classes during third year. Instruction in pathology will continue as a part of the Clinical Science course in third year.

The course of study in Pathology consists of systemic lectures, post-mortem demonstrations, practical laboratory work, and tutorials in General and Special Pathology. It is an advantage, but not essential, for a student to possess his or her own microscope.

#### Textbooks

- S. L. Robins and R. S. Cortan  
J. R. Anderson (ed.)
- Pathological Basis of Disease*, 2nd edn (Saunders, 1979)
- Muir's Textbook of Pathology*, 11th edn (Edward Arnold, 1980)

### Pharmacology

See the second year entry.

### Bacteriology

A course of approximately 50 lectures and 40 practical classes dealing with the principles of medical microbiology and immunology, and their application to the study of disease is given in third year.

#### Textbooks

- E. Jawetz *et al.*  
J. P. Duguid *et al.*
- Review of Medical Microbiology*, 14th edn (Lange, 1980)
- OR
- Medical Microbiology*, Vol. I, 13 edn (1978)

#### Reference book

- A. S. Benenson (ed.)
- Control of Communicable Disease in Man*, 13th edn (American Public Health Association, 1981)

### History-taking and Physical Examination

In term 3.1 of third year students commence instruction at the clinical schools. This will include instruction at the bedside in the physical examination of patients, taking history of a patient's illness and recognition of symptoms of disease.

### Clinical Science

In third year, clinical instruction will be given on campus in the form of correlative lectures dealing with specific disease states. The disciplines in this teaching will include:

- Medicine, including subspecialties
- Surgery, including subspecialties
- Clinical Immunology
- Pharmacology
- Bacteriology
- Pathology

In addition to the university teaching sessions, clinical tuition, correlated with the campus teaching, will be given in the hospitals. The aim of this part of the course is to present the core facts about specific disease states in an integrated manner, correlating the different disciplines involved in the diagnosis and treatment of the disease.

## Fourth year

### Term 4.1

This term is of 9 weeks' duration and includes:

- (a) a course in Community Health (Health Ecology) during weeks 1 to 6;
- (b) on-campus lectures in Ophthalmology, Dermatology, Ear Nose and Throat and Tropical Medicine during weeks 5 and 6;
- (c) courses in Human Reproduction and Sexuality and Clinical Laboratory Methods during week 7;
- (d) Clinical Pharmacology lectures, tutorials and practical sessions integrated through weeks 2 to 6; and
- (e) assessment during week 9.

The Community Health (Health Ecology) programme combines teaching of:

Epidemiology  
Occupational Health  
Preventive and Social Medicine  
Health Services Structure, efficiency and quality  
Ethics and Law in relation to Medicine

and does so within a framework that emphasises the 'ecological' linkage of contemporary health problems and practice; and the relationship between individuals and populations and their environmental exposures, where these are of importance for both the maintenance and loss of health status. It also allows the practice of health care, both personal and professional, to be viewed as part of that environment serving to provide conditions favourable to the maintenance of survival, and providing means by which adaptations favouring survival (in both qualitative and quantitative senses) might be maintained.

### *Assignments*

There are four assignment subjects: Obstetrics and Gynaecology; Paediatrics; Psychiatry; and Community, Geriatric and Rehabilitation Medicine. Each subject is undertaken during a term of 9 weeks' duration. The assignments commence in the second term of fourth year, and finish in the fifth term of fourth year.

### **Obstetrics and Gynaecology**

The Assignment Term in Obstetrics and Gynaecology has the following objectives:

1. To give the student insight into the functional and organic processes of human reproduction and the biology of women.
2. To instruct the student in the principles and practice of normal management of normal labour;
3. To indicate the value of prevention of disease in obstetrics and gynaecology;
4. To stress the socio-economic, psychological and psychosomatic factors in the discipline;
5. To demonstrate the care of the neonate;
6. To establish a firm base from which a deeper understanding of, and vocational training in, obstetrics and gynaecology can be



obtained in the early postgraduate years.

The nine-week term will be divided into an introductory week when all students will spend Monday-Thursday in the University, attending lectures, films, discussions and demonstrations. On the Friday students will attend orientations at the hospitals to which they will be attached.

The remaining 8 weeks will be spent attending the practice of the student's chosen hospital. Residence in hospitals will normally be expected for at least 4 of the 8 weeks.

The arrangements for the scheduled teaching sessions will vary between hospitals but, in general, students will receive weekly tutorial sessions and teaching ward rounds from the academic and visiting staff.

An important educational experience will be duty on the delivery floor, during which each student will be expected to admit to hospital, attend during labour, deliver and check the post-natal progress of at least four mothers and babies.

Each student will also spend periods each week with the antenatal service, both inpatient and outpatient; the gynaecological service; and the neonatal intensive care facility of the hospital.

In the last week of the assignment term, an assessment of the student's knowledge, attitudes and skills will be made. This will consist of an essay paper and a viva voce examination. The latter will be conducted by two examiners. Students are also required to complete a written project on a particular topic throughout the term and submit four written case histories as part of their assessment.

#### Textbooks

- N. A. Beischer and  
E. V. McKay  
M. Garrey *et al.* *Obstetrics and the Newborn* (W. B. Saunders, 1976)
- Gynaecology Illustrated* (1972)
- Obstetrics Illustrated* (Churchill Livingstone, 1974)
- D. Llewellyn-Jones *Fundamentals of Obstetrics and Gynaecology*, Vol. I—*Obstetrics*;  
Vol. II—*Gynaecology* (Faber & Faber, 1977)

#### Reference books

- C. J. Dewhurst (ed.) *Integrated Obstetrics and Gynaecology* (Blackwell, 1976)
- L. M. Hellman and  
J. A. Pritchard (eds) *Williams Obstetrics*, 15th edn (Appleton-Crofts, 1976)
- T. N. A. Jeffcoate *Principles of Gynaecology*, 4th edn (Butterworth, 1975)
- D. Llewellyn-Jones *Human Reproduction and Society* (Faber & Faber, 1974)
- R. R. Macdonald (ed.) *Scientific Basis of Obstetrics and Gynaecology*, 2nd edn (Churchill, 1978)
- E. R. Novak and  
J. D. Woodruff *Novak's Gynaecological and Obstetric Pathology*, 7th edn (Churchill, 1974)
- E. R. Novak *et al.* *Novak's Textbook of Gynaecology*, 9th edn (Williams & Wilkins, 1975)
- E. E. Phillipp *et al.* *Scientific Foundations in Obstetrics and Gynaecology* (Heinemann Medical, 1977)
- R. P. Shearman *Human Reproductive Physiology*, 2nd edn (Blackwell, 1979)
- P. A. Davies *et al.* *Medical Care of Newborn Babies* (Spastics Int. Med. Publns, London: Heinemann Medical; Clinics in Developmental Medicine Nos 44/45)

#### Suggested additional reading

- M. Coppleson and  
B. L. Reid *Pre-Clinical Carcinoma of the Cervix Uteri* (Pergamon, 1971)

- F. E. Hytten and I. Leitch  
H. S. Kaplan  
E. Belliveau and L. Richler  
M. Chiswick
- The Physiology of Human Pregnancy*, 2nd edn (Blackwell, 1971)  
*The New Sex Therapy* (Bailliere, Tindall, 1974)  
*Understanding Human Sexuality* (Hodder, 1970)  
*Neonatal Medicine* (Update Publications, 1974)

## Paediatrics

A complete assignment term is allocated to child health. The students are based at the Royal Alexandra Hospital for Children or at the Westmead Centre. As comprehensive an exposure as possible to all aspects of child health and disease is provided. The programme includes attendance at outpatients, medical and surgical ward rounds and tutorials, psychiatric clinics, pathology demonstrations and visits to the child health services in the community including the Spastic Centre, Grosvenor Hospital, Tresillian Mothercraft Homes and Baby Health Centres. History taking and ward clerking are important components of the terms. Family doctors participate in the undergraduate teaching. Each student must spend two weeks in residence in the hospital. When possible, facilities are provided for the individual student with a special interest to pursue it. A limited number may return for this purpose during the option term.

The method of assessment is by a short essay, to be presented two to three weeks before the end of the assignment term, and a three-hour examination on the last day of the term, consisting of short questions about simple paediatric problems.

### Reference books

There is no good and short book covering the whole range of paediatrics. This is fortunate because it encourages the student to dip into a number of books and journals and so realise that there are often different points of view about one subject.

- J. Apley and R. MacKeith  
P. Barker  
H. L. Barnett (ed.)  
Davis and Dobbing (eds)  
Forfar and Arneil (eds)  
Anna Freud  
D. Gairdner and D. Hull (eds)  
Lytt I. Gardner (ed.)  
A. Holzel and J. P. M. Tizard (eds)  
D. Hull and D. I. Johnston  
J. H. Hutchinson  
R. S. Illingworth  
R. S. Illingworth  
Peter G. Jones (ed.)  
S. C. Jordan  
E. W. Nelson *et al.* (eds)  
H. H. Nixon and B. O'Donnell
- The Child and His Symptoms*, 3rd edn (Blackwell, 1978)  
*Basic Child Psychiatry*, 2nd edn (Staples Press, 1980)  
*Pediatrics*, 16th edn (Appleton-Century-Crofts, 1977)  
*Scientific Foundations of Pediatrics* (Heinemann, 1979)  
*Textbook of Paediatrics* (Churchill Livingstone, 1978)  
*Normality and Pathology in Childhood* (International U.P., 1969)  
*Recent Advances in Paediatrics*, 4th edn (Hogarth, 1976) and subsequent volumes in the series  
*Endocrine and Genetic Diseases of Childhood* (Churchill, 1976)  
*Modern Trends in Paediatrics*, 2nd series (Butterworth, 1958) and subsequent volumes in the series  
*Essential Paediatrics* (Churchill Livingstone, 1981)  
*Practical Paediatric Problems*, 4th edn (Lloyd-Luke, 1980)  
*The Normal Child*, 5th edn (Churchill, 1979)  
*Common Symptoms of Diseases in Children* (Blackwell, 1975)  
*Clinical Paediatric Surgery, Diagnosis and Management*, 2nd edn (Blackwell, 1976)  
*Heart Diseases in Paediatrics* (Butterworths, 1973)  
*Nelson's Textbook of Paediatrics* (1979)  
*The Essentials of Paediatric Surgery*, 2nd edn (Heinemann, 1976)

- P. Pinkerton *Childhood Disorder — A Psychosomatic Approach* (Crosby, Lockwood & Staples, 1974)
- A. J. Schaffer (ed.) *Major Problems in Clinical Paediatrics* (Saunders, 1966) and subsequent volumes in the series
- B. Stanbury *et al.* (eds) *The Metabolic Basis of Inherited Disease*, 4th edn (McGraw-Hill, 1978)
- A. W. Venables *Essentials of Paediatric Cardiology* (Charles C. Thomas, 1964)
- D. W. Winnicott *The Family and Individual Development* (Methuen, 1970)
- D. W. Winnicott *Collected Papers* (Tavistock, 1958)
- D. W. Winnicott *The Child, The Family and The Outside World* (Penguin, 1964)
- D. W. Winnicott *Therapeutic Consultations in Child Psychiatry* (Hogarth, 1971)
- D. W. Winnicott *Playing and Reality* (Tavistock, 1971)
- M. Ziai *Pediatrics* (Little, Brown, 1975)
- Current articles in *The Lancet*
- The following book deserves the attention some time before the student starts work as a doctor:
- M. Balint *The Doctor, His Patient and the Illness* (Pitman, 1977)

## Psychiatry

Psychiatry is introduced in a course of lectures and workshops in third year but the major part of teaching occurs during the assignment period in fourth year. During the assignment, all students are given opportunities for clinical experience and instruction in both general and psychiatric hospitals. The various clinical units include:

- (a) Royal Prince Alfred Hospital, Rozelle Hospital and the Glebe, Newtown and Balmain Community Clinics;
- (b) Royal North Shore Hospital, Sydney Hospital, Bankstown Hospital, the Macquarie Hospital and the Northside Clinic;
- (c) Repatriation General Hospital Concord, Lidcombe Hospital, and Parramatta Psychiatric Centre.

(The new psychiatric unit at Westmead will also undertake teaching when it comes into operation.) In addition, topic teaching takes place each week at the Department of Psychiatry at the undergraduate centre at Rozelle Hospital.

The main aim of the course is to demonstrate to students the ways in which psychiatric assessment is undertaken in a variety of clinical settings.

### Textbook

- Imboden and Urbaitis *Practical Psychiatry in Medicine* (Prentice and Hall, 1978)

### Reference books

- Slater and Roth *Mayer Gross' Clinical Psychiatry*
- Freedman *et al.* *Comprehensive Textbook of Psychiatry*
- Lishman *Organic Psychiatry*
- Hackett and Cassem *Handbook of General Hospital Psychiatry*
- Strain and Grossman *Psychological Care of the Medically Ill*
- Fish *Schizophrenia*
- Fish *Psychopathology*
- Jasper *General Psychopathology*
- Granville-Grossman *Recent Advances I, II, III*
- Vigersky *Anorexia Nervosa*
- Psychiatric Clinics of North America for 1978, 1979, 1980
- Diagnostic and Statistical Manual of Disorders*, 3rd edn DSM-III
- Colby *A Manual for Psychotherapists*

# Community Medicine

## Objectives

The general objectives of the term will be to demonstrate and provide information about the experience in community medicine, so that students will be able, as members of a health team, to plan and effect health promotion and the management of the health problems for individuals and families in a community setting.

## Contents

The term will cover community health, general practice, geriatric medicine, primary care and rehabilitation medicine, and include aspects of medical ethics.

Students will spend two weeks in a full-time general practice attachment and three weeks in a full-time geriatric-rehabilitation placement, plus sessional placements in other community health services.

Each student will prepare several case history reports, and will participate in a group of 6 or 7 preparing a written and verbal report on a comprehensive health care project.

### Textbooks

- E. Cassell *The Healer's Art: A New Approach to the Doctor—Patient Relationship* (Penguin, 1978)  
D. Craddock *A Short Textbook of General Practice*, 3rd edn (Lewis, 1976)  
D. C. Morrell *An Introduction to Primary Medical Care* (Churchill Livingstone, 1976)  
OR  
H. J. Wright and D. B. MacAdam *Clinical Thinking and Practice* (Churchill Livingstone, 1979)

### Recommended reading

- Carrer and Liddiard (ed.) *An Aging Population* (Hodder and Stoughton/Open U., 1978)  
Fabb *et al.* *Focus on Learning in Family Practice* (RACGP Family Medicine Programme, 1976)  
R. Walpole (ed.) *Community Health in Australia* (Penguin, 1979)

### Reference books

- J. C. Brocklehurst (ed.) *Geriatric Medicine and Gerontology* (Churchill Livingstone, 1978)  
J. Noble (ed.) *Primary Care and the Practice of Medicine* (Little Brown, 1976)  
R. B. Taylor (ed.) *Family Medicine: Principles and Practice* (Springer, Verlag, 1978)  
H. A. Waldron *Lecture Notes on Occupational Medicine*, 2nd edn (Blackwell Scientific, 1979)

## Fifth year

In Fifth Year students will have two periods of 14 weeks during which they will have the campus teaching in Medicine and Surgery on Monday mornings. These sessions will be divided equally between Medicine and Surgery into:

1. Long correlation sessions of one and a half hours
2. Short correlation sessions of one hour
3. Lectures of one hour

Students will spend four and a half days each week in the teaching hospitals. Each 14-week period will be divided into two terms of seven weeks. Students will have two terms each of medicine and surgery alternating. Hospital seminar tutorials in medicine and surgery will be held for all students on two days each week throughout the four seven-week terms.

## Medicine

During the two terms of seven weeks in medicine, students will be attached to a general or special unit. In addition to general medical responsibilities, they will be participating in the activities of special units in programmed sessions.

### *Patient Responsibilities—General Medicine*

Students will take and record all histories for patients admitted to the unit to which they are assigned. Histories will be checked and countersigned by the resident and/or registrar, to become part of the hospital record. Student responsibilities to the medical unit will include:

- (a) Daily rounds with the intern, resident and registrar
- (b) Rounds with the attending physician
- (c) Attendance and participation in clinical meetings, radiology and pathology sessions
- (d) Direct involvement and supervised participation in day to day patient care
- (e) A 24-hour roster immediate call system on unit admitting days (including weekends)

These responsibilities will continue throughout the two 7-week medicine terms.

### *Teaching Sessions—Hospital*

The following teaching sessions will be scheduled:

1. Seminar tutorials in medicine and surgery held on four days weekly throughout the terms.
2. Daily Monday to Friday: clinical case presentations from all students in rotation, to be conducted by a clinical tutor in medicine
3. Medical resident/registrar tutorials in physical diagnosis weekly

### Reference books

#### • General Medicine

Beeson *et al.*  
J. MacLeod

*Cecil's Textbook of Medicine*, 15th edn (Saunders, 1979)

*Davidson's Principles and Practise of Medicine*, 12th edn (Livingstone, 1978)

- Isselbacher *et al.* *Harrison's Principles of Internal Medicine*, 9th edn (McGraw-Hill, 1980)
- Bodley-Scott *Price's Textbook of the Practice of Medicine*, 12th edn (Oxford U.P., 1978)
- Therapeutics
- S. Alstead and R. H. Girdwood *Textbook of Medical Treatment*, 14th edn (Churchill-Livingstone, 1978)
- N. C. Costrini and W. M. Thomson *Manual of Medical Therapeutics*, 22nd edn (Little, Brown, 1977)
- Ward Work
- J. MacLeod *Clinical Examination*, 5th edn (Churchill-Livingstone, 1977)
- F. C. Firkin *et al.* *A System of Signs*, 4th edn (ANZ, 1979)

## Surgery

### General Surgery

During the seven weeks of general surgery, students will be allocated to general surgical wards and expected to clerk cases allocated to them. They should enter into the general working routine of the Unit. During this term it will be necessary for each student to spend one half day in Ear, Nose and Throat tuition, one radiology tutorial per week and about two tutorials in general surgery each week.

### Special Surgery, Anaesthetics and Resuscitation

During this term students will be allocated to the Department of Orthopaedics and Traumatic surgery for three weeks tuition in diseases of the musculo-skeletal system. One week will be allocated to the Department of Anaesthetics. In the remaining three weeks, students will be required to fulfil an assignment in Urology, Thoracic Surgery, Plastic Surgery and Neurosurgery. They will be required to submit case reports on patients suffering from certain diseases within these specialities. These reports, together with students' comments and results of their reading, will be assessed in their log book. The Department of Anaesthetics will conduct an assessment in the last anaesthetic tutorial in this term.

#### Textbooks

- J. C. Adams *Outline of Orthopaedics*, 8th edn (Livingstone, 1977)
- J. C. Adams *Outline of Fractures*, 7th edn (Livingstone, 1978)
- A. Rains and H. Ritchie *Bailey and Love's A Short Practice of Surgery*, 17th edn (Lewis, 1977)
- Hamilton Bailey *Demonstrations of Physical Signs in Clinical Surgery*, 16th edn (Wright, 1979)
- S. Hoppenfeld *Physical Examination of the Spine and Extremities* (Appleton, Century Crofts, 1976)
- P. R. Scott *Aid to Clinical Surgery* (Churchill-Livingstone, 1979)

#### Reference books

- J. E. Rhoads *Surgery Principles and Practice*, 4th edn (Lippincott, 1970)
- L. V. Ackerman and J. Rosai *Surgical Pathology*, 5th edn (Mosby, 1974)
- J. Kyle *Pye's Surgical Handbook*, 20th edn (Wright, 1977)
- H. Bailey *Emergency Surgery*, 10th edn (Wright, 1977)
- W. Boyd *Pathology for the Surgeon*, 8th edn (Saunders, 1967)
- J. E. Dunphy and L. Way *Current Surgical Diagnosis*, 3rd edn (Lange, 1977)

## Assessment

At the end of the teaching in medicine and surgery, a joint examination will be held by the Departments of Medicine and Surgery for all students, as follows:

*Multiple choice question papers.* Two multiple choice question papers, each with 80 questions, will be held on the morning and afternoon of one day. Medicine and Surgery questions will be combined in these two papers.

*Essay paper.* One 3-hour combined Medicine and Surgery paper requiring short written answers will be held.

*Clinical examinations.* A Clinical Medicine and a Clinical Surgery examination will be held separately. In Medicine there will be one long case (1 hr with patient), duration 20 minutes with two examiners, followed by two short cases, for 20 minutes with a second pair of examiners. In Surgery the long case will be 15 minutes, with two short cases each of 15 minutes.

In addition, in-training evaluation reports and log books will be available to assess student performance.

Students will be encouraged to use the computer based multiple choice question self-assessment system on several occasions throughout the term. They may use this to identify deficiencies in knowledge and to check that these have been remedied following extra work.

## Anaesthesia

A part of the Surgery Term is devoted to Anaesthetics. Emphasis in the lectures, tutorials and the practical tuition will be on preoperative assessment, the effects of anaesthesia and surgery on cardiovascular and respiratory function, the protection of the patient during operation, the immediate post-operative period, cardiopulmonary resuscitation, the management of patients on ventilators and simple local analgesia. Aspects of preoperative management, the principles of the anaesthetic management and postoperative care, will be part of the clerking of the surgical patients during the term, with one week attached solely to a department of anaesthetics of the teaching hospitals. Evaluation of student performance will be from the part-time lecturers and tutors and oral assessment by the Professor of Anaesthetics and/or his nominees.

### Textbook

A. A. Birch and  
J. D. Tolmie

*Anaesthesia for the Uninterested* (University Park Press, 1976)

### Reference books

R. D. Dripps *et al.*

*Introduction to Anaesthesia*, 4th edn (Saunders, 1972)

*Instruction and Examination Manual* (Surf Life Saving Association)

## Option

The fourth term of fifth year is an option term. The purpose of this eight-week term is to allow each student the opportunity to study an individual subject in greater depth. The student is given a chance to learn through his own experience and effort. Options

may consist of various combinations of lectures, tutorials, laboratory exercises, research, clinical instruction, essays and assignments. The option term is a period of supervised training in an acceptable area in which a student has an interest.

A variety of option subjects is available, from which students are required to choose one which may be attractive to them. Copies of a booklet listing the option subjects available in 1982 may be read in the warden's office in each of the various clinical schools, the Medical Library, or the Dean's Office, Faculty of Medicine. Students will be required to advise the faculty of their choice of option subjects, in order of priority, by May 1982. They will be allocated to an option subject by an interdepartmental committee established by the faculty.

Students are required to have satisfied the option term before they may graduate with the degrees of Bachelor of Medicine and Bachelor of Surgery. Their progress during the option will be overseen by a supervisor, who will be required to report to the Board of Examiners for assessment of the option term. If the Board of Examiners decides that a student's performance has not been satisfactory, he will be required to repeat the term.

## Bachelor of Science (Medical)

For the requirements of the degree, see the section on the BSc(Med) degree at the end of Chapter 3 above. The degree may be taken in these departments:

- Anatomy
- Bacteriology
- Behavioural Sciences in Medicine
- Biochemistry
- Histology and Embryology
- Pathology
- Pharmacology
- Physiology



# 5

## Other faculty information

Further information about some items in this section may be found in the *Guide for New Students*.

### Statement of enrolment record

All the information you provide when you enrol is added to the University's Computerised Student Record System. This includes information about your name and address and the degree and the courses in which you enrol. It is important that all this information is recorded correctly at the beginning of the year and amended should a change occur in any of the details throughout the year.

To enable you to know that the information recorded is correct and to enable you to change any of it throughout the year, a *Statement of Enrolment Record* will be sent to you shortly after you complete your enrolment. Please check this carefully as soon as it is received.

If the information on the Statement of Enrolment Record is correct, retain the form as a record of your current enrolment.

If the information on the Statement of Enrolment Record is incorrect in any detail, amend the form where appropriate and lodge it at the Student Centre as soon as possible. A new Statement of Enrolment Record will then be sent to you confirming that the change has been made.

If you wish to:

- change the courses in which you are enrolled;
- discontinue a course;
- discontinue your enrolment totally;

at any time during the year, use your Statement of Enrolment Record to record the appropriate change, obtain faculty approval for your discontinuation or department approval for any additions, and lodge the form at the Student Centre.

Your record as a student at the University will not be correct unless you tell the Registrar (through the Student Centre) about a change. It is not sufficient, for instance, to tell your lecturer that you have discontinued a course. Should you wish to make a

change and cannot locate your Statement of Enrolment Record, please ask at the Student Centre for a new form.

## Compulsory subscriptions

Certain compulsory subscriptions are payable to student organisations, details of which are given in the *Guide for New Students*.

## Overseas students

### *Overseas students*

Some overseas students may be liable for visa application and renewal charges introduced by the Government of the Commonwealth of Australia from 1 January 1980. Detailed information about these charges should be obtained from the Department of Immigration and Ethnic Affairs, Canberra, A.C.T., 2600, or from the Australian diplomatic post nearest to you.

## Student identification cards

All students in first year are issued with signed photo-identification cards. They are required to wear the cards, particularly during assignments in Behavioural Sciences in Medicine and Community Medicine when they have contact with patients, medical practitioners or other members of the public. The University has a responsibility to the public to ensure that its students carry identification and confirmation of their medical student status.

Students in the clinical years of the course are issued with identification cards by their teaching hospital, for the same reasons.

## Examinations

Written examinations are held from time to time throughout the course as part of the system of progressive and barrier assessments. Advance notice will be given. When examinations fall within the general university examination periods in May, August and November, details are included in the general university timetables. For clinical years, written and clinical timetables are sent to the teaching hospitals.

### *Publication of results*

Annual results are displayed in the Quadrangle, published in the *Sydney Morning Herald* and sent by post to individual students.

### *Supplementary examinations*

These may be granted by the Faculty:

- (a) to candidates who have been prevented by duly certified illness or misadventure from completing an examination, or
- (b) to candidates who have failed in any examination, but whose work is deemed sufficient to warrant the concession of a further test. Supplementary examinations should be regarded as distinct privileges, not as rights.

There is a special form for submission with medical certificates. The minimum requirements of a medical certificate are that it:

- (a) be submitted and signed by the student's own medical practitioner in attendance, and indicate the date on which the student sought attention.
- (b) certify unambiguously to a specified illness or medical disability for a definite period.
- (c) indicate the degree of incapacity of the student and express a professional opinion as to the effect of the student's illness on his or her ability to take an examination.

Certificates in connection with annual or supplementary examinations should be submitted prior to the examinations unless the illness or misadventure takes place during the currency of the examinations, in which case the evidence must be forwarded as soon as practicable and in any case before the close of the examination period.

## Avenues of appeal

### **Avenues of appeal for students on various academic and non-academic matters**

Many decisions about academic and non-academic matters are made in the University each year and from time to time a student may consider that a decision affecting his or her candidature for a degree or other activities at the University may not have taken into account all the relevant matters.

In some cases the by-laws or resolutions of the Senate specifically provide for a right of appeal against particular decisions, e.g. Chapter VIII of the by-laws concerning disciplinary decisions and the resolutions of the Senate relating to exclusion of students after failure.

However, there are many other situations where a student may wish to have a decision reviewed or to draw attention to additional relevant information. As a general rule, a student may address a request of this nature in writing to the Registrar or discuss this matter with a member of the Registrar's staff. As a guide to students, the general practice in relation to some particular matters is set out below:

### **Academic matters**

#### *Examination results and re-marks of examination papers*

Appeals concerning results may be made to the Faculty through the Registrar.

#### *Examination timetables*

Any student who is dissatisfied with his or her examination timetable may raise the matter with the Registrar. However, it should be noted that it is not possible to satisfy all candidates concerning individual timetables.

#### *Prizes and scholarships*

A student who believes he or she has failed to obtain a scholarship by a narrow margin may request through the Registrar that

the Chairman of the Academic Board enquires into his or her case.

### **Non-academic matters**

#### *Financial assistance*

A student who has failed to obtain financial assistance and believes the application has been inadequately considered may apply in writing to the Registrar for reconsideration.

#### *Booking accommodation and the front lawn for clubs and societies*

Where a booking has been refused an appeal may be made in writing to the Registrar.

#### *Recognition of clubs and societies*

Any appeal concerning a decision relating to the recognition of a club or society should be presented to the Registrar.

#### *Infringement of parking rules within the University*

Appeal against decisions relating to parking infringements should be lodged with the Deputy Principal.

#### *Exemption from joining the SRC or Convocation*

Upon written application to the Registrar, exemption may be granted from joining the SRC, or Convocation upon graduation, on grounds of conscience.

## **Personal tutor scheme**

For several years members of the Faculty had been concerned about the need for a system of personal mentors or counsellors for its undergraduate students. It has long been recognised that the pressures of the medical course are intense, and that the large size of the student body today makes it difficult to develop personal associations between students and teaching staff. Schemes under which students are allocated to a tutor, who can advise them on academic and personal matters, exist in many medical schools in North America and the United Kingdom.

Accordingly, in 1978, the Faculty introduced a personal tutor scheme for medical students. Initially students from first and third years in 1978 were invited to participate and about fifty personal tutors were appointed. The scheme was extended in 1979 to include students from the first four years of the course. Eventually each tutor will have five students assigned to him, from each year of the course. This will provide contact between students in different years, so that those in junior years can draw on the experience of their seniors, as well as contact between students and staff. The personal tutor advises students regarding academic problems, future plans and financial and personal worries.

The scheme, which is entirely voluntary, is under the direction of Associate Professor C. G. Dos Remedios of the Department of Anatomy, who reports to Associate Professor R. R. Munro, the Sub-Dean (Student/Staff Affairs). Further information is available from Associate Professor Dos Remedios.

## Government of the University

The by-laws and resolutions of the University provide for the election of students, by and from the student body, to membership of the Senate and the faculties and boards of studies. There are also student members of the Academic Board.

The term of office is generally one year, from January to December. Elections are held by postal vote in Michaelmas Term, and notices calling for nominations are sent out in August. Details of the elections are placed on noticeboards around the grounds and published in the *University of Sydney News*. Election announcements are also made available to *Honi Soit* and *Union Recorder* for publication. Before any election, the appropriate ballot papers and instructions, as well as information about the candidates, are sent to all students concerned.

The *Senate* is the overall governing body of the University; the *Academic Board* coordinates the work of the faculties and boards of studies and advises the Senate on academic matters; the *faculties* and *boards of studies* are concerned with the teaching and examining of their subjects and with research in the various departments and schools. Student members are also included on other committees of the University, including various faculty and departmental committees.

The University recognises the important contribution students can make to the decision-making process of the University and all students are urged to take an active part in the selection of student members by nominating appropriate candidates and by voting in each election that concerns them. By participating in these elections, students can become more familiar with the functioning of their University, get to know their fellow students better and help ensure that their interests are taken into consideration in decisions that affect their work at the University.

The above is a summary only. Full details are contained in the University Calendar.

## Undergraduate scholarships and prizes

The *Calendar* should be consulted for additional information about undergraduate scholarships and prizes.

Prize or scholarship	Value \$	Qualifications
George Allan	100	Proficiency in therapeutics
Australian Academy of Forensic Sciences	50	Essay in field of forensic sciences
Peter Bancroft	950	Best research work in any subject
Dagmar Berne	45	Proficiency in final barrier examination
P. O. Bishop	Medal	Greatest proficiency in advanced Physiology for BSc(Med)
Wolfe Solomon Brown	175	Best contribution to Wilson Museum of Anatomy by Student prosector
Burroughs Wellcome	100	Proficiency in pharmacology
G. S. Caird Scholarship No. I	500	Proficiency in fourth year subjects
G. S. Caird Scholarship No. II	700	Proficiency by male student in second barrier examination
Carnation Paediatric	84, 21 (Proxime Accessit)	Best clinical, social or laboratory observation or research. Must have viva voce examination in Paediatrics
Dr H. G. Chapman	50	Essay on original research in physiology or biochemistry
Frank and Margaret Claffy	125	Proficiency in ophthalmology
Harry J. Clayton Memorial	300	Proficiency in medicine and clinical medicine
Sidney B. Clipsham	100	Best account of research or observation in operative surgery during clinical years
Frank Cotton Memorial	75	Proficiency in physiology
Robert Craig Prize in Surgery	150	Best account of research or observations undertaken during the unallocated term or the option term
Dame Constance D'Arcy Memorial	20	Proficiency by female student in obstetrics and gynaecology
Dun Surgery	75	Proficiency in surgery and clinical surgery
Foundation for Research and Treatment of Alcoholism and Drug Dependence of N.S.W.	63 and 42	Essay on medical aspects of alcoholism and drug dependence
Allan Douglas Gillies Memorial	25	Proficiency in pathology
Goode Memorial Scholarship	Loan of up to 50	Short term loans available to medical undergraduates
John Harris Scholarship	400	Proficiency in second barrier examination
Hinder Memorial	150	Proficiency in surgery and clinical surgery
Albert Hing Memorial	70	Proficiency in obstetrics and gynaecology
Ingis and Ward	25	Proficiency in pathology and bacteriology
Mabel Elizabeth Leaver Memorial	175	Proficiency in obstetrics and gynaecology

Prize or scholarship	Value \$	Qualifications
A. M. Loewenthal	25	Proficiency in prosection and in anatomy in second barrier examination
Sir John Loewenthal	75	Royal Prince Alfred Hospital student for proficiency in surgery and clinical surgery in third year barrier assessment
S. H. MacCulloch Trust	Loan or grant of up to 500	Needy undergraduate students in Faculty of Medicine
Norton Manning Memorial	150	Proficiency in psychiatry
Mead Johnson Paediatric	100	Proficiency in paediatrics
Arthur Edward Mills	200	Student who is first on honours list at graduation
Moran	200	Essay (every 2nd year) on history of science and medicine in Australia
N.S.W. Health Commission	50	Proficiency in community medicine
Parkinson Memorial	200	Proficiency in pathology
K. C. T. Rawle 104 ACCS Assoc.	100	Proficiency in surgery and clinical surgery in third year barrier assessment
Renwick Scholarship	450	Proficiency in first and second barrier examinations
A. J. Reynolds	150	Essay on causes, prevention or cure of spondylitis in human beings
Harold John Ritchie Memorial	200	Proficiency in clinical medicine
A. H. Robins	500	Report of work done in social and preventive medicine in 'unallocated' term
Roche Scholarship	200	Students doing BSc Hons in pharmacology, pharmaceutical science or pharmacy, BSc(Med) in pharmacology or MSc and PhD in pharmacology, pharmaceutical science or pharmacy
Royal Australian College of Ophthalmologists	100	Proficiency in ophthalmology
William Henry and Eliza Alice Sharp	35	Proficiency in surgery and clinical surgery
J. L. Shellshear Memorial	25	Proficiency in practical anatomy
Robert Scot Skirving Memorial	75	Proficiency in medicine and surgery
Grafton Elliot Smith Memorial	75	Proficiency in anatomy
Beverly Stewart Memorial	25	Proficiency by female student in first barrier examination
Cedric Swanton Memorial	50	Proficiency in biochemistry
McMahon Tennent	25	Proficiency in biochemistry
Robert H. Todd Memorial	100	Report of an attachment in general practice undertaken during the Assignment in Community Medicine
Upjohn	150	Proficiency in clinical pharmacology and therapeutics
John Wait Scholarship	300	Proficiency in pre-clinical subjects by student proceeding to honours in science or BSc(Med)
Harold Alfred Waldron Memorial	25	Proficiency in bacteriology

Prize or scholarship	Value \$	Qualifications
Herbert John Wilkinson Memorial	500	Proficiency in anatomy
J. T. Wilson Memorial	25	Proficiency in theoretical anatomy
Michael Robert William Young	20	Essay on specific topic on history of medicine

## Libraries

See also the section on Libraries in the *Guide for New Students*.

### Burkitt Library

Burkitt Library is situated on the ground floor of the Anderson Stuart building and contains a valuable collection of material in the fields of Anatomy, Physical Anthropology, Physiology, Histology and Embryology. It is named after Professor A. N. Burkitt, who was Professor of Anatomy from 1926 to 1955, and who donated his large collection of books to form the nucleus of the Burkitt Library. Its collection aims at supporting the teaching and research staff of the pre-clinical departments.

Burkitt Library hours during the whole year are: Mon.-Fri. 9 am-12.30 pm 1.30-5 pm. Closed all public holidays.

### Fisher Library

Books required by undergraduates in the first two years of their course are to be found in Fisher Library.

### Medical Library

This library, which is situated in the Bosch Building, covers the fields of Clinical Medicine, Surgery, Pathology, Bacteriology, Obstetrics and Gynaecology, Paediatrics, Pharmacology, Anaesthetics, Ophthalmology, Psychiatry, Preventive and Social Medicine, and Immunology. It is designed to provide for the needs of the staff of the Faculty, and of undergraduates in the paraclinical and clinical years of the course. It is a modern air-conditioned library with accommodation for 170 readers.

A computerised literature searching service is available (MEDLINE, EXCERPTA MEDICA, BIOSIS).

Medical Library hours from beginning of January to end of November: Mon.-Thu. 9 am-9 pm; Fri 9 am-6 pm; Saturday opening (9 am-5 pm) usually begins around mid-February and



continues until late November. Closed all public holidays. See noticeboard for reduced hours in December.

### **Clinical school libraries**

Libraries for the use of undergraduates are maintained in the clinical schools of the Royal Prince Alfred Hospital, Sydney Hospital, Royal North Shore Hospital of Sydney, Repatriation General Hospital, Concord, Lidcombe Hospital, and in the specialist hospitals. One of the largest medical libraries in Australia has been established at the Westmead Centre, and is available for use by medical and dental students.

### **Commonwealth Institute of Health Library**

The Library, which is on the first floor of the Institute (map ref. K15), provides for the information needs of research workers and students at the Institute. It has a large collection of books and periodicals in the fields of public health and tropical medicine, preventive and social medicine, nutrition, bacteriology, biochemistry, cell biology, occupational and environmental health, parasitology, entomology, epidemiology and biostatistics.

MEDLINE facilities are available for both staff and students.

There are special collections in occupational health, statistics and audiovisual material, and a special reserve section for students.

The Library is open from 8 am to 7 pm on Monday and Wednesday and from 8 am to 5.30 pm on Tuesday, Thursday and Friday.

## **Learning Resources Centre**

The Learning Resources Centre is a centre for self-assisted instruction through the use of audio-visual media, and its facilities are available for all undergraduate and postgraduate students, as well as for continuing education purposes for graduates. Initial emphasis has been on the accumulation of tape-slide programmes, and the Centre has built up an impressive library, which is being rapidly expanded. Video cassettes are available in the Centre. Some computer based instruction has also been developed and computer terminals linked to the Royal Prince Alfred Hospital Computer Centre are located at present in the Medical Library. These are available for use by students. Consideration is presently being given to extending the computer-based instruction programme to other teaching hospitals.

The Centre is in Room 206, Level 2, Blackburn Building. Hours of operation are 9 am-5 pm daily; and 9 am-8 pm Wednesday.

Audio-visual centres have also been developed at the six clinical schools and are linked with the Centre at the University.

## Societies

### Sydney University Medical Society

The Medical Society is the oldest of the university faculty societies, having been founded in 1886 to 'provide a common meeting ground for teachers, graduates and undergraduates in Medicine'. All undergraduates in Medicine are encouraged to join, as this entitles them to numerous benefits. The subscription is \$10, which entitles the subscriber to membership for the whole of his undergraduate course and life membership after graduation. The main office of the Medical Society, is in the Blackburn Building and the hours are 9.30 am to 2 pm.

The following are some of the Medical Society's activities. New members are more than welcome to take an active role in these.

#### *Council*

The Medical Society Council is a body elected by the students, for the students, and made up mainly of students. The Council consists of the two year representatives which each year elects, and clinical years' hospital representatives. The year representatives express any dissatisfaction with various aspects of the course etc., and Council then raises such problems through its membership of various faculty committees. The Council also has various officers responsible for specific areas, such as the general practitioner attachments programme. Individual Council members also create new programmes, such as the book appeal for Indonesian medical students, the Bangladesh drug appeal, or take part in activities such as the Lions Club high blood pressure campaign. The Council holds regular meetings at which any Society member has speaking rights. Minutes of the meetings are posted so as to keep all students aware of what is going on in Council.

#### *AMSA*

The Society is a financial member of the Australian Medical Students' Association. The Association has a number of committees that work towards improvements in the field of medical education, and conducts student overseas exchange schemes in conjunction with the International Federation of Medical Students' Associations. AMSA also makes submissions on behalf of medical students to bodies that make decisions affecting medical students, such as the State and Commonwealth health departments.

AMSA also produces *Panacea*, a magazine written by medical students from all over the country and distributed free to every student. The annual AMSA convention provides a week of panel discussions, debates, etc., plus a wide variety of social events. In 1981 the convention was held in Adelaide and was attended by more than 400 medical students, many from Sydney. In 1982 the Executive of AMSA will be based in Sydney and all support will be welcome.

The AMSA Student Initiatives in Community Medicine is a project, supported by a Commonwealth Government grant that brings together students from many health and welfare disciplines to participate in a variety of community-based exercises.

AMSA also provides financial assistance for travel to approved conferences each year.

*Medical Society publications*

Students of the Faculty often express their views or write short stories and poems for the newspaper *Innominate*. There is also a *Senior Year Book*. Editorship of these publications is open to any member.

*Social events*

The honorary treasurers each year encourage students to organise barbecues, wine and cheese parties, year dinners, football match parties, or any other social event. The society then supplies deposits on rooms, equipment, and any needed financial advice.

Medical students, who have various degrees of talent but quite considerable energy, generally create a well-received revue, organised independently of the Society.

*Special educational efforts*

Students who are involved or interested in non-curriculum areas of medicine have often arranged a film or speaker to come to the Faculty. This is also done formally each year at the Lambie-Dew Oration, in which the speaker is someone of great interest to the medical profession. Student topics are often featured in the Anatomy Department colloquia. The G.P. attachment scheme exposes some students to country medicine during second year. Occasionally *Innominate* may be devoted entirely to a given medical question of general interest.

*Interfaculty competitions*

The Medical Society has sports representatives for each year course, provided the people in that year have a liking for sport. Medicine teams compete for various interfaculty shields, and there are interyear sports matches, which are generally organised by the sports representatives.

*Faculty liaison*

One of the main functions of the Medical Society Council is to assist students on the various faculty committees, where their opinions are solicited and problems are often solved. Each year elects a representative to the Staff-Student Liaison Committee, and there are five student members of the Faculty of Medicine. Assessment of the five-year course is made continually, through the work of these bodies and the various other committees of the Faculty.

*Loans to students*

The *Clinical Years Bursary Fund* makes a loan of \$100 to needy clinical students, which is repayable two years after graduation. This amount may be increased in the near future. The *Student Emergency Loan Fund* offers \$50 to any student in a financial crisis, repayable within one month. (The Registrar's Office provides full information on loans and bursaries in a free booklet entitled *Ways to finance your studies*.)

*Medical Society Bookshop*

The Bookshop is separate from Council but is operated by it, under the management of the general secretary, and the current book-scheme director, who is a medical student. As the pioneer student book scheme in the University, the bookshop enables medical students to save a considerable portion of the cost of textbooks. Most important of all, it tries to ensure that adequate

*Lecture notes and examination reprints*

supplies of the correct textbooks are available at the appropriate time.

Dissection tools, clinical instruments and white coats are sold, as well as recent-edition secondhand books on display by private individuals.

Each new member receives a set of examination reprints for First Year in the subjects Chemistry, Physics and Introductory Medical Science, and the Society sells reprints of examination papers for most preclinical subjects and for some succeeding years. Lecturers in some subjects authorise the printing of their official lecture notes, which are also on sale.

The society prepares a list of available texts and an analysis of their merits or disadvantages, relative to their cost.

## Cadetships and traineeships in medicine

Cadetships or traineeships are made available to selected students by the Royal Australian Army Medical Corps, the Royal Australian Navy and the Royal Australian Air Force.

*Undergraduate scheme*

### **Royal Australian Army Medical Corps**

Each year the Regular Army offers to medical undergraduates and graduates in residency appointments to commissioned rank in the Royal Australian Army Medical Corps.

An undergraduate is eligible to apply for appointment if he is undertaking the first, second or third clinical year of his course of his first year of hospital residency. He must be medically fit, an Australian citizen or have evidence that an application has been submitted for Australian citizenship, be of good character, and have attributes required of an officer of the Royal Australian Army Medical Corps.

The Army will pay lecture and demonstration, library and examination fees and may pay supplementary examinations fees for one subject only each year, tutorial fees to any affiliated college on the recommendation of the University, and laboratory and experiment fees including charges for materials as recommended by the University.

Medical undergraduates selected under the scheme will be appointed to the commissions in the rank of lieutenant in the Regular Army Supplement. On the day they begin their hospital residency, they will be promoted to Captain and on completion of hospital residence they will be transferred to the Australian Regular Army in the rank of Captain.

Medical cadets will continue their normal course at their university and medical school and will be free to take a full part in its academic and social life. They will wear civilian clothes and be regarded as normal undergraduates.

Further information may be obtained from the Office of the Director of Medical Services, Headquarters 2nd Military District, Victoria Barracks, Paddington, N.S.W. 2021, telephone 339 3450.

## **Royal Australian Navy**

Commissions in the Royal Australian Navy are available to selected undergraduates. Entered in the rank of Sub-Lieutenant, after successfully completing three years of a medical course, they are paid during the remainder of the course. Male and female students may apply, but must be Australian citizens or undertake to become Australian citizens.

After residency-year a return-of-service of two to four years on the active list of the Royal Australian Navy is required. The length of service depends upon the stage of entry but is, basically, year for year plus one.

As well as salary, the Navy will pay all fees arising from the course and provide textbooks. Undergraduates are currently paid at the following rates,<sup>1</sup> which change with movements of other Navy salaries:

3 years to graduation:	\$7996
2 years to graduation:	\$8911
Final year:	\$9823

After qualifying, the member is promoted to Surgeon Lieutenant and receives \$17 028 with a tax-free uniform allowance during his or her residency year.

On completion, the member starts a Short Service commission as a registered medical practitioner. Six years effective service qualifies the member for a Defence Forces Housing Loan at low interest rates. Whilst service, the member is well covered against death or invalidity by the Defence Forces Retirement and Health Benefits Fund. Benefits from this fund can be carried on to other approved superannuation funds on leaving the Navy.

On joining, the member is entitled to a free medical and dental cover.

Enquiries should be directed to:

Navy Careers Officer  
Defence Forces Recruiting Centre  
323-339 Castlereagh Street  
Sydney, N.S.W. 2000, telephone 212 1011

## **Air Force Undergraduate Training Scheme**

Each year the Air Force invites applications from medical undergraduates for appointment to commissioned rank in the Medical Branch of the Service. The Undergraduate Scheme provides for selected applicants to continue their medical studies under the sponsorship of the Air Force.

Applicants must have completed at least three years of the university course in the Faculty of Medicine. They must be recommended by the University for appointment, be medically fit, Australian citizens or be prepared to apply for Australian citizenship, and possess the attributes required of an Air Force Officer.

<sup>1</sup>Correct as at May 1981.

OTHER INFORMATION  
POSTGRADUATE  
DEGREES

Undergraduates receive: <sup>1</sup>	
3 years to graduation:	\$7996
2 years to graduation:	\$8911
Final Year:	\$9823

Salary on graduation, and during the year of residency, is \$17 028.

Depending on the stage of entry of Medical Officers to the scheme, a return of service of 2 to 4 years is required. They may also be required to serve at Air Force Hospitals and Bases within Australia or overseas.

Apart from the professional aspects of the Air Force, a great social life can be guaranteed.

Further information can be obtained from Air Force Careers Officer, Defence Force Recruiting Centre, Central Square Building, 323-339 Castlereagh Street, Sydney, 2000—telephone 212 1011.

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<sup>1</sup>Correct as at May 1981.

# 6 Postgraduate study

## Requirements for postgraduate degrees

There are four postgraduate degrees in the Faculty of Medicine. They are:

MS	Master of Surgery
MPH	Master of Public Health
PhD	Doctor of Philosophy
MD	Doctor of Medicine

The regulations governing these degrees are set out in the specified chapters of the by-laws, which are printed in the Statutes section of the university *Calendar*.

## Degree of Master of Surgery

11. The degree of Master of Surgery shall not be conferred until the expiration of five academic years from the granting of the degrees of Bachelor of Medicine and Bachelor of Surgery.

12. Candidates for this degree must produce evidence that they have had special training in Surgery and that they have been engaged in a manner approved by the Faculty in the special full-time study and practice of Surgery, or of some special branch of Surgery, for a period of at least three years.

13. Candidates for this degree shall submit to the Registrar four copies of a thesis, not already presented as a thesis for any degree, on some surgical subject. This thesis shall be a record of special investigations undertaken by the candidate and show clearly by appropriate references the extent to which the candidate is indebted for any portion to any other person and be accompanied by a declaration signed by the candidate that the thesis is composed by him.

14. The Faculty, if it considers the thesis is *prima facie* worthy of examination for the degree, shall appoint at least three examiners of whom at least one shall be external. The degree will be awarded only if the thesis is regarded as an original contribution of distinguished merit adding to the knowledge and understanding of the subject.

15. Each candidate shall be required to pass a clinical examination in the branch of Surgery which he professes. In special cases the Faculty may by resolution exempt a candidate from this examination.

*Extract from  
Chapter XII of the  
by-laws*

## **Master of Public Health**

The MPH is unique in Australia and is comparable to similar degrees in the U.K. and the U.S.A. The first students were admitted to candidature for the degree in 1978.

The degree is to be open both to medical and selected non-medical graduates or equivalent. The course for the degree will ultimately provide general and specialist programmes in various fields of public health, including Tropical Public Health, Occupation and Environmental Health, Preventive Medicine, Health Administration, Community Medicine and their component specialist areas, but initially will offer a limited range of options based on present resources.

The course for the degree will comprise a full-time academic year of course work and a minimum of three terms in further studies under supervision (not necessarily in the University), together with an approved project and treatise thereon. Alternatively, the degree may be obtained through advanced research and thesis alone.

Further details about the degree may be obtained from the Academic Registrar of the Commonwealth Institute of Health.

## **Degree of Doctor of Philosophy**

The degree of Doctor of Philosophy is awarded in the Faculty of Medicine. Details of candidature for this degree can be obtained on application to heads of departments or to the Registrar or to the Dean. The degree regulations are set out in Chapter XIXD of the by-laws in the university *Calendar*, and in the resolutions of the Academic Board that follow it.

The degree of Doctor of Philosophy is a research degree awarded for a thesis considered to be a substantially original contribution to the subject concerned. Some coursework may be required (mainly in the form of seminars) but in no case is it a major component.

Applicants should normally hold a master's degree or a bachelor's degree with first or second class honours of the University of Sydney, or an equivalent qualification from another university or institution.

The degree may be taken on either a full-time or part-time basis.

In the case of full-time candidates, the minimum period of candidature is six terms (2 years) for candidates holding a master's degree or equivalent, or nine terms (3 years) in the case of candidates holding a bachelor's degree with first class or second class honours; the maximum period of candidature is normally fifteen terms.

Part-time candidature may be approved for applicants who can demonstrate that they are engaged in an occupation or other activity which leaves them substantially free to pursue their candidature for the degree. Normally the minimum period of candidature will be determined on the recommendation of the Faculty but in any case will not be less than nine terms; the maximum period of candidature is normally twenty-one terms.



Candidates work individually, on advanced study and research under the direction of a supervisor. Each candidate must consult his supervisor regularly concerning his proposed future work and the general planning of his thesis. All theses presented must be accompanied by a certificate from the supervisor stating whether in his opinion the form of presentation of the thesis is satisfactory.

Intending candidates should write well in advance for approval and advice from the Head of Department concerning their proposed study and research.

## Doctor of Medicine

The following are extracts from Chapter XII of the by-laws of the University. The by-laws appear in full in the university *Calendar*.

*Extract from Chapter XII of the by-laws*

6. The degree of Doctor of Medicine shall be awarded on the recommendation of the Faculty for an original contribution of distinguished merit adding to the knowledge or understanding of any subject with which the Faculty is directly concerned.
7. A candidate for the degree of Doctor of Medicine shall either—
  - (a) have held the degree of Bachelor of Medicine of the University of Sydney for at least five years; or
  - (b) (i) have held for at least five years the degree of Bachelor of Medicine or a degree or other qualification of another university or institution determined by the Academic Board on the recommendation of the Faculty to be equivalent to the degree of Bachelor of Medicine of the University of Sydney; and
  - (ii) have had such continuing association with the academic work of the University of Sydney and over such period as the Academic Board on the recommendation of the Faculty shall determine is appropriate.
8. (1) A candidate shall submit to the Registrar five copies of the thesis, thesis supported by published work, or published work alone, which he wishes to have examined. The work submitted shall be a record of original research undertaken by the candidate who shall state the sources from which his information was derived, the extent to which he has availed himself of the work of others and the portion of the work he claims as original.
  - (2) If the work submitted records work carried out conjointly, irrespective, in the case of published work, of whether it has been published in the candidate's sole name or under conjoint authorship, the candidate shall state the extent to which he was responsible for the initiation, conduct or direction of such conjoint research.
  - (3) Where the work submitted incorporates work previously submitted for a degree in this or in any other university, the candidate shall clearly indicate which portion of the work was so submitted.
  - (4) If published work is submitted either reprints or copies of such work shall be properly bound. The bound work shall

include an introduction describing the theme of the published work submitted, and stating how the various publications are related to one another and to the theme.

(5) To establish *prima facie* worthiness for examination of published work, a candidate may, before submitting published work, submit to the Faculty a list of publications and the introduction required by subsection (4).

9. On receipt of a report from the Faculty that the thesis or published work is *prima facie* worthy of examination for the degree, and of a recommendation concerning the examiners to be appointed, the Academic Board shall appoint at least three examiners, of whom at least one shall be an external examiner.

10. (1) A candidate shall not be recommended for admission to the degree unless the examiners report that the work submitted fulfils the conditions prescribed in section 6.

(2) A candidate may be required to undertake such written or oral examination in the subject of the thesis or published work as the Faculty may determine.

(3) A candidate for the degree of Doctor of Medicine who is resident abroad may, in exceptional circumstances, be examined in the subject of the thesis or published work at any Medical School approved by the Faculty, provided that any expense involved shall be met by the candidate.

10A. On the award of the degree, the Registrar shall lodge one copy of the published work or thesis with the Librarian.

## Postgraduate medical diplomas

There are five postgraduate diplomas in the Faculty of Medicine. They are:

DCP	Diploma in Clinical Pathology <sup>1</sup>
DDM	Diploma in Dermatological Medicine <sup>1</sup>
DDR	Diploma in Diagnostic Radiology <sup>1</sup>
DO	Diploma in Ophthalmology <sup>1</sup>
DipTPH	Diploma in Tropical Public Health

The regulations governing these diplomas are set out in the by-laws and Senate Resolutions of the University, and are printed in full in the Statutes Section of the University Calendar.

The following are faculty resolutions governing candidates for postgraduate medical diplomas:

If five years or more have elapsed since a candidate for a postgraduate diploma passed the Part I examination, he shall, before applying to the Registrar for admission to the Part II examination, obtain a certificate from the Dean of the Faculty of Medicine certifying that his knowledge is adequate for him to proceed.

If five years or more have elapsed since a candidate for a postgraduate diploma sat for, but did not pass, the Part II examination, he shall, before applying to the Registrar for re-admission to the examination, obtain a certificate from the Dean of the Faculty of Medicine certifying that his knowledge is adequate for him to proceed.

<sup>1</sup>These diplomas are no longer available to new candidates.

## Diploma in Tropical Public Health

The first candidates for this diploma were accepted in 1978. The DipTPH replaced the Diploma in Tropical Medicine and Hygiene.

The course includes studies in the following topics:

- The tropical world and its people
- Medical parasitology
- Medical entomology
- Microbiology and pathology
- Medical anthropology
- Clinical tropical medicine (including specialties)
- Introductory epidemiology demography biostatistics
- Epidemiology and control of tropical diseases
- Environmental sanitation
- Health services—general, special primary health care  
—including maternal and child health and family planning, mental health etc.
- Health project management
- Health economics in developing countries
- Health planning
- Teacher training
- Health education
- Nutrition
- Design of health facilities
- Research methodology

The course is, in fact, the coursework for MPH, majoring in Tropical Health. It is envisaged that some candidates wishing to study in this area may not be acceptable for a master's degree. Yet it is important that such training be available and that recognition of successful completion of the course given. This may be particularly relevant to some candidates from a number of developing countries where medical practitioners may not have completed a university degree course in Medicine. Again, it is possible that some candidates in the MPH course (majoring in Tropical Health) who have completed the coursework may not be able to carry out the necessary project to complete the requirements for the master's degree. These too, should receive recognition of successful completion of the coursework.

The following paragraphs contain the by-laws and the Senate resolutions relating to the diploma. The number preceding each paragraph refers to the appropriate by-laws or resolutions as contained in the *Calendar* of the University.

### Extract from the by-laws

**22E.** There shall be a Diploma in Tropical Public Health (Dip.T.P.H.)

**22F.** A candidate for the Diploma in Tropical Public Health shall complete such requirements for the Diploma as may be prescribed from time to time by resolution of the Senate on the recommendation of the Academic Board and of the Faculty.

### Resolutions of the Senate

**1.** An applicant for admission to candidature shall apply in writing to the Registrar for such admission to candidature.

2. Subject to Resolution 3, admission to candidature may be granted to—
  - (a) a graduate in Medicine of the University of Sydney; or
  - (b) any other graduate of the University of Sydney who has completed courses acceptable to the Faculty of Medicine; or
  - (c) a graduate of any other University or any other institution approved by the Faculty of Medicine and the Academic Board; or
  - (d) a person who has obtained such qualifications and completed such courses as are acceptable to the Faculty of Medicine and the Academic Board; or
  - (e) a person who furnishes such evidence of special fitness as satisfies the Faculty of Medicine and the Academic Board that he is qualified to enter upon systematic courses of study in Tropical Public Health.
3. An applicant for admission to candidature shall have held the qualifications in respect of which he seeks admission for at least one year prior to the commencement of candidature.
4. A candidate shall—
  - (i) for a period of not less than three terms engage in full-time study and attend such courses of study and practice as the Faculty may prescribe, and
  - (ii) pass examinations in such subjects as the Faculty may from time to time determine.
5. The examinations for the Diploma shall be held at such times and in such manner as the Faculty may from time to time direct.
6. The award of the Diploma shall be subject to the completion of the coursework, the essay and the examinations to the satisfaction of the Faculty on the recommendation of the Commonwealth Institute of Health.
7. The Faculty may deem time spent or work done towards the degree of *Master of Public Health* to be time spent or work done towards the Diploma, provided that the candidate has ceased to be a candidate for the degree of *Master of Public Health*.

## Boards of Postgraduate Studies

Pursuant to section 12 of Chapter VII of the by-laws the Faculty has resolved to appoint the following Boards of Postgraduate Studies.

### Postgraduate Degrees Board

1. The Faculty of Medicine shall appoint annually a Postgraduate Degrees Board which shall be responsible for the conduct of examinations in respect of postgraduate degrees.
2. The Board shall consist of the Heads of Departments within the Faculty.
3. The Dean of the Faculty or his representative shall be *ex officio* chairman of the Board.

## **Board of Examiners for Postgraduate Diplomas**

1. The Faculty of Medicine shall appoint annually Boards of Examiners which shall be responsible for the conduct of examinations for diplomas of the Faculty.
  2. The Boards shall be known respectively as the Board of Examiners for the Diploma in Clinical Pathology; the Board of Examiners for the Diploma in Dermatological Medicine; the Board of Examiners for the Diploma in Diagnostic Radiology; the Board of Examiners for the Diploma in Ophthalmology; and the Board of Examiners for the Diploma in Tropical Public Health.
- . The Boards shall consist of the examiners approved for the diplomas by the Dean and confirmed by the Faculty. The Dean or his nominee shall be *ex officio* chairman of each Board of Examiners.

## **The Postgraduate Committee in Medicine**

Chairman: Professor R. S. Gye

Director: Emeritus Professor C. R. B. Blackburn

The Postgraduate Committee in Medicine administers the Victor Coppelson Memorial Institute of Postgraduate Medical Studies which was formed for the promotion of postgraduate education, study, work and research in medicine, and advancement of the art and science of medicine.

All enquiries concerning postgraduate diplomas and courses and programmes of continuing education in medicine should be made to: The Director, Postgraduate Committee in Medicine, University of Sydney, N.S.W. 2006.

The following are faculty resolutions governing the Postgraduate Committee in Medicine:

1. There shall be a Committee of the Faculty of Medicine to be known as the Postgraduate Committee in Medicine, for the promotion of postgraduate education, study, work and research in medicine and the advancement of the art and science of medicine.
2. In particular, the objectives of the Committee shall be as follows:
  - (a) to foster the development of postgraduate education in cooperation with the Health Commission of New South Wales and teaching hospitals of the University of Sydney, learned colleges and other institutions;
  - (b) to maintain the role of the Victor Coppelson Memorial Institute of Postgraduate Medical Studies in furthering continuing education in the community and in supporting medical research and postgraduate training;
  - (c) to encourage awareness among undergraduate medical students and graduates of the need for postgraduate and continuing education.
3. The Committee shall administer the Victor Coppelson Memorial Institute of Postgraduate Medical Studies and undertake such duties and responsibilities as are prescribed by the

Resolutions of the Senate governing the activities of the Institute.

4. (i) The committee shall comprise the following persons:
  - (a) The Dean of the Faculty of Medicine *ex officio*, or his nominee who shall be eligible for election as Sub-Dean (Postgraduate and Continuing Education);
  - (b) the Director of Postgraduate and Continuing Education *ex officio*;
  - (c) the immediate past Chairman, immediate past Director of Postgraduate Medical Studies and immediate past Honorary Treasurer of the Postgraduate Committee in Medicine, in accordance with the Resolutions of the Senate in force prior to 1 April 1980, *ex officio*;
  - (d) not more than ten (10) persons elected by the Faculty every three years;
  - (e) not more than two (2) co-opted persons who shall be appointed by the Faculty on the recommendation of the Chairman in consultation with the members of the committee appointed under paragraphs (b) to (d), inclusive.
  - (ii) The members of the Committee appointed under Resolution 4(i)(c), (d) and (e) shall hold office for a period of one term and may be eligible for reappointment by the Faculty for not more than three (3) successive terms.
  - (iii) A term, referred to in Resolution 4(ii), shall be a period of three (3) years.
5. Any person who is appointed a member of the Committee and who is not a member of the Faculty in accordance with Chapter XII of the By-laws, shall be nominated for appointment to membership of the Faculty, in accordance with Section 1(a)(1) of Chapter XII of the Bylaws.
6. (i) If any member (other than an *ex officio* member) is absent without leave of the Committee from three consecutive meetings or for more than half the total in any one year, the Committee may recommend to the Faculty that his office be declared vacant.
  - (ii) Except in the case of an *ex officio* member, the committee may recommend to the Faculty that the office of any member be terminated.
  - (iii) In any case in which it thinks fit the Faculty may declare the office of any member to be vacant, or direct that he shall cease to hold office.
  - (iv) Any member (other than an *ex officio* member) may resign his office in writing addressed to the Dean.
7. Any vacancy occurring by the death, disqualification or resignation of an elected or co-opted member of the Committee may be filled by the appointment of a member by the Faculty on the nomination of the Dean, to hold office for the balance of the term of the member being replaced.
8. The Committee shall appoint annually the following sub-committees:
  - (i) A Finance Subcommittee;
  - (ii) a Courses Subcommittee;

- (iii) a Grants Subcommittee;
  - (iv) a Coordinating Subcommittee, which may include representatives from:
    - (a) The following teaching hospitals of the Faculty of Medicine:
      - The Royal Prince Alfred Hospital;
      - The Sydney Hospital;
      - The Royal North Shore Hospital;
      - The Repatriation General Hospital, Concord;
      - The Lidcombe Hospital;
      - The Parramatta Hospitals/Westmead Centre;
      - The Royal Alexandra Hospital for Children;
      - The Women's Hospital, Crown Street;
      - St Margaret's Hospital for Women;
      - The Mater Misericordiae Hospital, Crows Nest;
 and such other hospitals as the Committee may, from time to time, recommend.
    - (b) The New South Wales Branch of the Australian Medical Association.
    - (c) The Medical Board of New South Wales.
    - (d) The Health Commission of New South Wales.
    - (e) The Heads of the Departments of the Faculty of Medicine, or their nominees, who are not members of the Committee by virtue of Resolutions 4(i)(d) and (e).
    - (f) The New South Wales State Committee of the Australian college of Obstetricians and Gynaecologists.
    - (g) The Royal Australian College of General Practitioners, New South Wales Faculty.
    - (h) The New South Wales State Committee of the Royal Australasian College of Surgeons.
    - (i) The New South Wales State Committee of the Royal Australian College of Physicians.
    - (j) The New South Wales State Committee of the Royal College of Pathologists of Australia.
    - (k) The Australasian College of Dermatologists, New South Wales Faculty.
    - (l) The New South Wales Branch of the Royal Australian College of Ophthalmologists.
    - (m) The New South Wales Branch of the Royal Australian and New Zealand College of Psychiatrists.
    - (n) The New South Wales Branch of the Royal Australasian College of Radiologists.
    - (o) Such other statutory bodies, learned colleges, or institutions as the Committee may, from time to time, recommend.
    - (v) Such other Sub-Committees as the Committee may, from time to time determine.
- 9.** The Dean of the Faculty, or his nominee (referred to in Resolution 4(i)(a)) shall be the Chairman of the Committee.
- 10.** Meetings of the Committee shall be convened by the Chairman and for any meeting five members shall form a quorum.
- 11.** The Committee shall lay before the Faculty of Medicine a report of its proceedings each term.

# Postgraduate scholarships and prizes

## Available to postgraduate medical students

The following postgraduate fellowships and scholarships in the Faculty of Medicine are awarded on the recommendation of the Medical Research Committee:

Reginald Maney Lake and Amy Laura Bonamy Scholarship for Research in Pathology and Bacteriology

Anderson Stuart Memorial Research Fellowship

Marion Clare Reddall Scholarship

Henry Langley Scholarship

Liston Wilson Fellowship

Ewan Staunton McKinnon Scholarship

Sister Sanders Scholarship

Norman Haire Fellowship

Vernon Barling Memorial Fellowship

Joseph Goodburn-Smith Scholarship—awarded in conjunction with one or more of the above scholarships or fellowships

In 1978 the value of these awards, with the exception of the Sister Sanders Scholarship, was between \$10 145 per annum and \$11 598 per annum, according to the qualifications and experience of the appointee. The income from the various Fellowship and Scholarship funds is supplemented by grants from the Consolidated Medical Research fund.

In September of each year a list of the scholarships which will be available for award on 1 January in the following year is circulated to heads of departments in the Faculty of Medicine and the various teaching hospitals.

Scholarship or prize	Value \$	Closing date	Qualifications
<b>1. Tenable at University of Sydney</b>			
<i>(a) Restricted to medical graduates</i>			
Phyllis Anderson Research Fellowship	11 000—13 000		Research in any branch of medical science
Anthony Pierre Balthazar Scholarship in Anaesthetics	Varies		Research in anaesthesia
Peter Bancroft Prize	950		Best research work in any subject published or completed in previous year
Nina Annie Campbell Medical Scholarship	10 145—11 598		Research in any branch of medical science
James and Margaret Claffy Research Fellowship	Either research fellowship, travelling fellowship or grant-in-aid		Research in ophthalmology



Scholarship or prize	Value \$	Closing date	Qualifications
Cedric Cohen Memorial Prize	20		Best candidate in final Diploma in Ophthalmology examination
Cottees General Foods Prize for Nutrition	100		Best candidate MPH for proficiency in human nutrition.
Dr Gordon Craig Fellowship	1300		Research in Urology
Foundation for Research and Treatment of Alcoholism and Drug Dependence of N.S.W. Prizes	63 and 42		Essay on medical aspects of alcoholism and drug dependence
Joseph Goodburn-Smith Scholarship	10 145—11 598		Research in any branch of medical science
Agnes Guthrie Prize	Varies		To assist in continuing medical research already commenced—preference for research into arteriosclerosis
Norman Haire Fellowship	10 145—11 598		Research in sex
Garnet Halloran Prizes	400		Thesis on cancer of head and/or chest
Reginald Maney Lake and Amy Laura Bonamy Scholarship	10 145—11 598		Research in pathology
Henry Langley Scholarship	10 145—11 598		Research into rheumatoid arthritis
Herbert J. Marks Memorial Prize	400		Original work on diseases of ear, nose and throat
Ewan Staunton McKinnon Scholarship	10 145—11 598		Medical research
John Brooke Moore Scholarship in Surgery	—		Medical research
Marion Clare Reddall Scholarship	10 145—11 598		Research in any branch of medical science
A. J. Reynolds Prize	50		Essay on causes, prevention or cure of spondylitis in human beings
Edith Mary Rose Travelling Scholarship			Preclinical medical research
Sister Sanders Scholarship	10 145—11 598		Presearch into diseases of children
Anderson Stuart Memorial Research Fellowship	10 145—11 598		Research in any branch of medical science
Ethel Talbot Memorial Scholarship	Varies		Research in medicine
T. B. Walley Fellowship	Varies		Research in obstetrics
Liston Wilson Fellowship	10 145—11 598		Research in spastic paralysis

Scholarship or prize	Value \$	Closing date	Qualifications
<i>(b) General</i>			
Commonwealth Post-graduate Research Awards	4620	31 Oct.	Permanent residents of Australia with <i>hons I</i> , <i>hons II div. I</i> or equivalent qualification—for research in any field
University of Sydney Postgraduate Research Awards	4620	31 Aug.	Graduates of any university with <i>hons I</i> , <i>hons II div. I</i> or an equivalent qualification—for research in any field
A. E. & F. A. Q. Stephens Research Fellowship	4620	As advertised	Graduates of any university other than the University of Sydney with postgraduate research experience—for research in any field
Gowrie Postgraduate Research Scholarships	3500	31 Oct.	Descendants of members of Forces—for research in any field
<b>2. Tenable overseas</b>			
<i>(a) Restricted</i>			
Baillieu Research Scholarship	4620	As advertised	Graduates in Medicine, Law, Economics or Architecture
Vernon Barling Memorial Fellowship	10 145—11 598		Clinical surgical training overseas
Thomas and Ethel Mary Ewing Scholarships in Medicine	2500—5000	As advertised	Graduates in Faculty of Medicine—for research overseas
Charles Gilbert Heydon Travelling Fellowship in Biological Sciences	7150	As advertised	For research in biological sciences
G. H. S. and I. R. Lightoller Scholarship	4620	As advertised	Graduates in Arts, Science, Medicine, Veterinary Science, Agriculture and Engineering
Hugh Massie Travelling Scholarship in Ophthalmology	Varies		Ophthalmology
Nuffield Foundation Dominion Travelling Fellowships	Travel and living allowances	Feb.	Graduates with master's or doctor's degree with at least one year's research or teaching experience

Scholarship or prize	Value \$	Closing date	Qualifications
(b) <i>General</i>			
Caltex Woman Graduate of the Year Scholarships	7500	30 Sep.	Female graduates completing a degree or diploma in year of application
Commonwealth Scholarship and Fellowship Plan Awards	Return fare plus living allowance	Mid Sept.	Graduates who are Australian citizens under 35 years of age—for research in any field in British Commonwealth countries
Gowrie Postgraduate Research Scholarships	3500	31 Oct.	Descendants of members of Forces—for research in any field
Herbert Johnson Travel Grants	Up to 400	31 May	Graduates who hold travelling scholarships—for assistance with fares
James King of Irrawang Travelling Scholarship	4620	As advertised	Graduates of not more than four years' standing
Rhodes Scholarship	Fares, fees and living allowance	1 Oct.	Age limit 25. For tenure at University of Oxford
Rotary Foundation Scholarship	Fares and living allowance		Graduates between 20 and 28
University of Sydney Postgraduate Research Travelling Scholarships (2)	4620	31 Oct.	Graduates of not more than four years' standing
J. B. Watt Travelling Scholarships	4620	As advertised	Hons I graduate in any faculty
Eleanor Sophia Wood Travelling Fellowships	7150	31 Mar.	Graduates with at least three years' teaching or research at University of Sydney

# 7

## Teaching hospitals

### University administrative units in the teaching hospitals

At the beginning of 1967 university administrative units were established in each of the teaching hospitals of the Faculty of Medicine. A senior medical administrator is in charge of each unit and acts as a university representative in the hospital.

In five of the major hospitals a Warden of the Clinical School has been appointed to head the unit and is assisted by one or more members of the part-time teaching body of the hospital. In the case of the Westmead Centre, a Sub-Dean has been appointed to head the Clinical School. The Sub-Dean is assisted by an Administrative Officer. In the special hospitals a Clinical Supervisor is in charge of the unit, under the general direction of the professor concerned with that specialty.

The units are designed to ensure that the most effective use is made of a student's clinical years, to act as a focal liaison point between the hospital and the university, and to provide high-level assistance in university policy and planning.

*Warden of the Clinical School*

#### **The Royal Prince Alfred Hospital**

J. A. Burgess, MB BS, FRACP

*Clinical Supervisors*

Aet Joasoo, BSc(Med) MD BS FRACP

B. P. Morgan, MB BS, FRACS

*Warden of the Clinical School*

#### **Sydney Hospital**

A. R. Brown MB ChB, FRCS FRACS

*Clinical Supervisors*

S. Colagiuri, MB BS, MRACP

S. J. Hazelton, MB BS FRCS FRACS

*Warden of the Clinical School*

#### **The Royal North Shore Hospital of Sydney**

G. A. Bauer, MB BS, FACC FRCP FRACP

*Clinical Supervisors*

C. P. Bambach, MB BS, FRACS

R. C. Edwards, Mb BS, FRACP MRCP

<i>Sub-Dean</i>	<b>The Westmead Centre</b> John Miles Little, MD MS, FRACS
<i>Administrative Officer</i>	Christine F. Samojluk, BA
<i>Warden of the Clinical School</i>	<b>The Repatriation General Hospital, Concord</b> S. G. Koorey, MB BS, FRACS FRCS
<i>Clinical Supervisor</i>	O. Peiris, MD BS <i>Ceyl.</i> , FRACP MRCPEd MRCP
<i>Warden of the Clinical School</i>	<b>Lidcombe Hospital</b> P. F. Thursby, MB BS, FRACS
<i>Clinical Supervisor</i>	<b>The Mater Misericordiae Hospital</b> R. F. O'Reilly, MB BS, FRACP
<i>Clinical Supervisor</i>	<b>The Women's Hospital (Crown Street)</b> A. Boogert, MB BS, FRANCOG
<i>Clinical Supervisor</i>	<b>St. Margaret's Hospital for Women</b> D. H. McGrath, MB BS, FRCOG FAGO
<i>Clinical Supervisor</i>	<b>The Royal Alexandra Hospital for Children, Camperdown</b> G. L. Serfontein, MB ChB MMed (Paed) <i>Stell.</i> , FCP(SA) FRACP
<i>Clinical Supervisor</i>	<b>Rozelle Hospital</b> .....
<i>Clinical Supervisor</i>	<b>Macquarie Hospital</b> M. D. McGrath, MB ChB <i>Leeds</i> DPM, MRCPsych FRANZCP
	<b>University of Sydney, Faculty of Medicine</b> Students attending teaching hospitals, 1981

	<i>Third Year</i>	<i>Fourth Year</i>	<i>Fifth Year</i>	<i>Total</i>
Royal Prince Alfred Hospital	67	66	66	199
Sydney Hospital	37	36	28	101
Royal North Shore Hospital (with Mater Misericordiae)	63	58	57	178
Repatriation General Hospital, Concord	45	46	34	125
Westmead Centre	33	27	—	60
Lidcombe Hospital	21	21	21	63
<i>Total students in year:</i>	266	254	206	726
				107

## Regulations

### **Allocation of third year medical students to the teaching hospitals**

The following are faculty resolutions governing the allocation of students to teaching hospitals.

1. At the commencement of the Third Year students shall submit to the Registrar of the University applications for allocation to a Teaching Hospital, indicating their order of preference for the hospitals concerned and stating their place of residence.
2. The Dean of the Faculty of Medicine shall determine the number of students to be allocated to each hospital and this number shall in general be determined by the number of beds available for general teaching purposes in each hospital each year.
3. Students shall be allocated to the most appropriate hospital on a geographical basis (according to their stated place of residence) in accordance with guidelines determined from time to time by the Staff/Student Liaison Committee, taking into account:
  - (i) the need to ensure that all major teaching hospitals receive an approximately equal proportion of the best students as well as those of lower grades;
  - (ii) the student's stated preference for hospitals;
  - (iii) the accessibility of the hospital from the student's place of residence.

The allocation shall be undertaken by the Dean assisted by the Sub-Dean (Student Affairs) and students in Third Year Medicine.

4. For the purpose of allocating students to hospitals on a geographical basis, the metropolitan area of Sydney shall be divided into five regions, to be known as the Central, Northern, Eastern, Southern and Western regions. The regions shall be defined from time to time by the Staff/Student Liaison Committee.
5. Students whose stated place of residence is within the Northern region shall mainly be allocated to the Royal North Shore Hospital. Students in the Eastern region shall mainly be allocated to Sydney Hospital or to the Royal Prince Alfred Hospital. Students in the Western region shall mainly be allocated to Lidcombe Hospital, the Repatriation General Hospital, Concord or the Parramatta Hospitals/Westmead Centre. Students in the Southern region shall mainly be allocated to the Royal Prince Alfred Hospital or to Sydney Hospital. Students in the Central region shall be allocated to any appropriate hospital.
6. Students allocated to one hospital may be permitted to exchange forthwith with students allocated to another hospital, provided they make immediate application to and obtain the approval of the Sub-Dean (Student Affairs) or the Dean. Students shall not subsequently be permitted to exchange a hospital other than to which they have been first allocated except with the express permission of the Dean of the Faculty of

Medicine granted only for special reasons and with the concurrence of the Wardens, Clinical Supervisors or Sub-Deans of the Hospitals concerned.

Students with approval of the Faculty, may be permitted to receive clinical training in two or more Teaching Hospitals.

### **Appointment of junior resident medical officers to the teaching and non-teaching hospitals**

1. Graduands in Medicine of the University of Sydney shall be allocated as Junior Resident Medical Officers to teaching and non-teaching hospitals by a Committee set up by the Health Commission of New South Wales, which includes representatives of the Universities of Sydney and New South Wales and their teaching hospitals and of non-teaching hospitals as determined by the Commission.
2. Candidates for the Final Degree Examination in Medicine shall complete a form indicating their order of preference for Junior Resident Medical Officer positions at the various hospitals.
3. A list of graduands in order of merit shall be prepared, based on the aggregate loaded marks used to determine the award of Honours at graduation (see Section 3). Any concession allowed under paragraph 3 of the Faculty Resolutions on Honours at Graduation shall be taken into account in preparing such a list. The list shall also show the aggregate loaded mark, expressed as a percentage, for each candidate.
4. The list referred to in paragraph 3 shall be forwarded confidentially to the Health Commission of New South Wales, who will prepare a combined order of merit list of graduands from the Universities of Sydney and New South Wales based on the aggregate loaded percentage marks of each graduand. In the case of ties, position in the combined list shall be determined by lot.
5. Graduands shall be allocated to Junior Resident Medical Officer posts, in accordance with their order of preference, in the order in which they appear in the combined order of merit list.
6. The University of Sydney shall make its choice of appointees to Professorial Units at the several teaching hospitals, and transmit the names of these graduands to the Hospitals Commission of New South Wales at the time of submitting its order of merit list.
7. The above procedure shall operate for the allocation of Junior Resident Medical Officers for the years 1976 and 1977 and shall then be subject to review.

In 1972 the Faculty of Medicine recommended to the Hospitals Commission of New South Wales that in the appointment to hospitals of junior resident medical officers, students married to other students in the same year may apply to be considered for allocation to the same hospital provided it is the hospital to which the student with the lower aggregate would have been allocated.

Enquiries should be addressed to The Secretary, Committee for Placement of Resident Medical Officers, C/- Health

## Boards of Medical Studies in the teaching hospitals

1. (a) A Board of Medical Studies shall be established at each of the following teaching hospitals and shall consist—
  - (i) in the case of the five general teaching hospitals of—
    - The Dean or Pro-Dean of the Faculty, *ex officio* (Chairman).
    - The Professors of Medicine, Surgery, Obstetrics, Psychiatry, Anaesthetics, Ophthalmology and Eye Health and Community Medicine, *ex officio*, or their deputies.
    - The Clinical Teacher who is most senior on the active hospital staff in Surgery, *ex officio*.
    - The Clinical Teacher who is most senior on the active staff in Medicine, *ex officio*.
    - The Medical Superintendent, *ex officio*.
    - Two members elected by the honorary medical staff. A surgical and medical tutor, elected by the Board.
    - The Warden of the Clinical School, *ex officio*.
    - The Clinical Supervisors, *ex officio*.
    - The full-time members of the Professorial Units based on the hospital.
  - (ii) In the case of the Lidcombe Hospital of—
    - the same members as for the five general hospitals, plus the Regional Director, Western Metropolitan Health Region *ex officio*, or his deputy;
    - two members elected by the sessional consultant staff;
    - and two members elected by the full-time Specialist staff.
  - (iii) in the case of the Women's Hospital (Crown Street), of—
    - the Dean of the Faculty, *ex officio* (Chairman);
    - the Head of the University Department of Obstetrics and Gynaecology, *ex officio* or his nominee;
    - the members of the academic staff of the University located at or directly associated with the Hospital;
    - the Chairman of the Medical Board of the Hospital, *ex officio*;
    - the Medical Superintendent of the Hospital, *ex officio*;
    - not more than six members of the Medical Board of the Hospital who are involved in undergraduate teaching, elected by the Medical Board.
  - (iv) in the case of St Margaret's Hospital for Women, of—
    - the Dean of the Faculty, *ex officio* (Chairman);



the Head of the Department of Obstetrics and Gynaecology, *ex officio*, or his nominee;  
the members of the academic staff of the University located at, or directly associated with, the Hospital;

the Chairman of the Medical Board of the Hospital, *ex officio*;

the Medical Superintendent of the Hospital, *ex officio*;

not more than four members of the Medical Board of the Hospital, who are involved in undergraduate teaching, elected by the Medical Board.

- (v) in the case of the Royal Alexandra Hospital for Children of—

The Dean or Pro-Dean of the Faculty, *ex officio* (Chairman).

The Professor of Child Health, *ex officio*, or his deputy.

The Clinical Lecturer in Surgical Diseases of Children, *ex officio*.

The Professor of Medicine, *ex officio*, or his deputy.

The Professor of Surgery, *ex officio*, or his deputy.

The Professor of Obstetrics, *ex officio*, or his deputy.

The Professor of Psychiatry, *ex officio*, or his deputy.

The Professor of Anaesthetics, *ex officio*, or his deputy.

The Medical Superintendent, *ex officio*.

The first Assistant to the Professor of Child Health.

The Clinical Supervisor.

A surgical and a medical tutor, elected by the Board. Two members elected by the honorary medical staff. Provided that if a Professor or Associate Professor in Paediatric Surgery be appointed, he shall be a member.

- (vi) in the case of the Parramatta Hospitals/Westmead Centre of—

the Dean of the Faculty, *ex officio* (Chairman);

the Sub-Dean (Westmead Centre), *ex officio*;

the full-time members of the academic staff of the University located at the hospital;

the Heads of the University Departments of Medicine, Surgery, Obstetrics and Gynaecology, Psychiatry, Anaesthetics, and Community Medicine, *ex officio*, or their nominees;

the Professor of Child Health, *ex officio*;

those persons on whom the Senate has conferred the title Clinical Professor, Clinical Associate Professor, Clinical Senior Lecturer or Clinical Lecturer, and who are located at the hospital, *ex officio*;

- the General Superintendent, *ex officio*;  
 the Director of Medical Services, *ex officio*;  
 the Director of Teaching and Research Resources,  
*ex officio*;  
 three members of the Medical Board nominated  
 by the Chairman of the *Medical Board*;
- (b) A Board of Medical Studies shall be established for the  
 three Psychiatric hospitals and shall consist of—  
 The Dean or Pro-Dean of the Faculty, *ex officio*  
 (Chairman).  
 The Sub-Dean (Clinical) of the Faculty, *ex officio*  
 (Deputy Chairman).  
 The Professor of Psychiatry, *ex officio*.  
 The Head of the Department of Medicine, *ex*  
*officio*, or his deputy.  
 The Director of State Psychiatric Services, *ex*  
*officio*, or his deputy.  
 The Director of the Division of Establishments,  
 Department of Public Health, *ex officio*.  
 The Director of the Intellectually Handicapped,  
 Department of Public Health, *ex officio*.  
 The Medical Superintendents of the three hospi-  
 tals, *ex officio*.  
 The Clinical Supervisors, *ex officio*.  
 The full-time members of the Professorial Units  
 based on the hospitals.  
 Three members elected by the specialist staff of the  
 hospitals.
- (c) Each Board shall have the power to co-opt other  
 members of the teaching staff of the hospital concerned.
- (d) At its first meeting each year Board shall elect a  
 secretary. In the case of The Parramatta Hospitals/  
 Westmead Centre the administrative officer of the  
 Clinical School shall be appointed secretary.
- (e) Sydney Hospital students may nominate three members  
 of the student body at Sydney Hospital to be members of  
 the Board of Medical Studies at Sydney Hospital.
- (f) Royal Prince Alfred Hospital students may nominate  
 three members of the student body at the Royal Prince  
 Alfred Hospital to be members of the Board of Medical  
 Studies at the Royal Prince Alfred Hospital.
- (g) Repatriation General Hospital, Concord, students may  
 nominate three members of the student body at the  
 Repatriation General Hospital, Concord, to be  
 members of the Board of Medical Studies at the  
 Repatriation General Hospital.
- (h) Lidcombe Hospital students may nominate two  
 members of the student body at Lidcombe Hospital to  
 be members of the Board of Medical Studies at  
 Lidcombe Hospital.
- (i) Students at the Parramatta Hospitals/Westmead Centre  
 may nominate three members of the student body at the  
 Centre to be members of the Board of Medical Studies of  
 the Parramatta Hospitals/Westmead Centre.

2. The members shall hold office for one year, but shall be eligible for re-election.
3. In the cases of the six general teaching hospitals the Board shall meet at least once each term. In the cases of the other hospitals, the Board shall meet at least once per year.
4. The Board shall arrange all the details in connection with the students' work and, subject to confirmation by the Board of Directors or controlling body, shall make rules in regard thereto, and, in general, carry out the recommendations of the Faculty of Medicine in each Clinical School.
5. The Board is empowered to call upon any member of the honorary staff or any student, for information concerning timetable, attendances, or student work generally, the results of such enquiry to be reported to the Board of Directors where deemed advisable.
6. The Board shall make representations to the Board of Directors or controlling body in respect of additional facilities that may be deemed necessary for the improvement of undergraduate education, or to carry out the requirements of the Faculty of Medicine.
7. The Board shall report from time to time to the Board of Directors or controlling body and to the Faculty of Medicine upon the results of its deliberations and its actions.
8. The Board shall constitute the normal means of communication between the Faculty of Medicine and the hospital in all matters referring to the education of students. It shall refer any difficulty encountered to the Faculty to which it shall be deemed responsible for the conduct of student education at each hospital.

### **Affiliated hospitals**

In 1971, the Senate adopted a number of recommendations made by the Faculty of Medicine concerning affiliation of hospitals for teaching purposes. Under these recommendations:

- (1) The University of Sydney recognises affiliated teaching hospitals in addition to its present recognised teaching hospitals.
- (2) Hospitals desirous of and suitable for affiliation shall be considered on a regional basis wherever possible, in association with one of the existing teaching hospitals or proposed regions.
- (3) There shall be formed three teaching regions:
  - (i) a *central region*, with Royal Prince Alfred Hospital, Sydney Hospital and the Repatriation General Hospital as central clinical schools;
  - (ii) a *northern region*, centred on the Royal North Shore Hospital;
  - (iii) a *western region* centred on the Westmead Hospital.
- (4) The Royal Newcastle Hospital and the Lidcombe State Hospital shall each become affiliated hospitals, separate from the regional concept proposed in paragraph (3).
- (5) The regional groupings of teaching hospitals and affiliated hospitals shall be used for both undergraduate and postgraduate medical education.

It is understood that there will be no cost involved to the University in the development of the proposed affiliated hospitals.

It is envisaged that the Warden or Clinical Supervisor in charge of the Clinical School of the parent hospital will, under the direction of the Board of Medical Studies of the hospital and in conjunction with the appropriate university department, be responsible for establishing and maintaining teaching arrangements with the affiliated hospitals.

Lidcombe Hospital has been used to supplement clinical teaching in General and Community Medicine and in 1976 became a provisional clinical school.

The Senate has recognised the following hospitals and institutions as affiliated hospitals in terms of the recommendations adopted by the Senate in 1971:

Rachel Forster Hospital for Women  
 Western Suburbs Hospital  
 Marrickville District Hospital  
 Parramatta District Hospital  
 Auburn District Hospital  
 Balmain Hospital  
 Blacktown District Hospital  
 Mona Vale District Hospital  
 Ryde District Hospital  
 The Royal Ryde Rehabilitation Hospital  
 Australian Army Malaria Research Unit

## The seven general teaching hospitals

### **Lidcombe Hospital**

In 1879 the New South Wales Government purchased some 1340 acres of land in what was then known as the District of Rookwood and in 1884 a portion of this area was cleared for a proposed Reformatory for boys and a model farm. During 1885, plans were drawn up and in 1887, four brick dormitories, a dining hall and a residence for the Superintendent were erected and a large orchard and a vegetable garden were planted. For the next six years, however, these buildings remained unoccupied except for a caretaker/manager and in 1893, during a period of widespread unemployment and destitution, the buildings and land were transferred to the control of the Charities Department and an institution known as the Rookwood Asylum for the Aged and Infirm was established.

Initially, some 80 men were transferred from Parramatta and the institution was provided with a staff of four—a matron/superintendent, a clerk, an attendant and a carpenter. Over the ensuing years, the inmate population grew to 317 and an additional attendant, a nurse, a storekeeper, two gardeners and two chaplains were added to the staff establishment. By 1896, the inmate population had risen to 581 and the government decided that Rookwood Asylum should be developed as the main institution for the state's aged male poor and that its development and administration should be modelled on the

Newington Home for Women. In 1899 the available accommodation was increased to 800 beds.

In 1906 Dr R. A. Fox who had been the Asylum's visiting medical officer for the previous three years was appointed medical superintendent. By this time a staff of thirty-six were employed to care for more than thirteen hundred inmates accommodated, and gradually over the first few years of Dr Fox's superintendship, the hospital side of the institution's activities began to assume a much greater importance. By 1913, clinical departments under honorary medical staff had been established in the fields of dermatology, ophthalmology, E.N.T., surgery, neurology and general surgery and in keeping with these developments the 'Asylum' name was replaced by the more appropriate 'State Hospital and Home'. At this time also the name of the district was changed from Rookwood to Lidcombe.

Over the next fifteen years further buildings were added and by the time of Dr Fox's retirement in 1929 a staff of 138 was employed to care for a total of 988 hospital and nursing-home patients and 732 inmates. Through the superintendships of Drs McMaster, Baret, Brooks and Procopis, developments continued with the new wards and dormitories being added in 1938 and 1940, a new nurses home being opened in 1940, a recreation building being provided for home section residents in 1946, a new ward being constructed for tuberculosis patients in 1955 and finally eight new wards being provided to house long-stay nursing-home patients during 1956 and 1957.

The next major phase of the hospital's development took place in the early 1960s. A programme of dormitory conversions was started which was to see the modernisation of wards over a period of eight years, and it was during the early part of this programme that decisions were taken to establish a comprehensive geriatric service for both male and female patients and to define areas for which the hospital would be primarily responsible. Concurrently the general medical and surgical services of the hospital were upgraded with the employment of staff specialists in a number of fields and in 1971 the construction of stage I of the long-awaited new hospital block was begun. This building provided new operating theatres, a large modern C.S.S.D., an 11-bed intensive care unit and a new Department of Diagnostic Radiology, and is linked to the stage II building, which provides a further 152 beds, administrative offices and some additional diagnostic services.

For the greater part of its existence, Lidcombe functioned as a chronic diseases hospital catering for the aged and the indigent. However, in contrast to most other similar institutions, it provided most of the required acute medical and surgical services, and from this base the hospital has been developed into a large modern complex providing a full range of medical and surgical services together with a comprehensive geriatric service.

Lidcombe Hospital commenced as a clinical school of the University in May 1976, when 14 students began instruction at the hospital. Prior to that students from other teaching hospitals had undergone instruction in general medicine and geriatrics at

the hospital. There are about 60 students training at the clinical school. The clinical school is under the supervision of a Board of Medical Studies. Lidcombe Hospital is now the site for the Cumberland College of Health Sciences; the Division of Analytical Laboratories; Air Pollution Control Branch; and other government agencies.

### **Mater Misericordiae Hospital, North Sydney**

The Mater Misericordiae Hospital, North Sydney, began operations as a cottage hospital in Willoughby Road on 21 January 1906. On this date it was blessed and declared open by the then Cardinal Archbishop of Sydney, His Eminence Cardinal Moran.

In 1912, the Sisters purchased and occupied the former residence of the Honourable R. E. O'Connor, then a Member of Parliament, and began using it as a private hospital. This cottage stood on the site where the present private hospital of 136 beds now stands. With the acquisition of surrounding properties, the Sisters proceeded to build a public hospital adjacent to the private hospital, and the public hospital on its present site was first opened in March 1915.

From their beginnings in the treatment of a limited number of medical and surgical patients and a small children's ward in Willoughby Road, the Sisters expanded with the opening of the General Hospital on Pacific Highway into the fields of Casualty and Out-patients Departments, Pathology Department and the developing specialties.

In 1941 the Sisters opened the Maternity Hospital on the corner of Sinclair Street and Rocklands Road, opposite the General Hospital.

The public hospital at present comprises 266 beds, including 57 obstetric beds, and offers services in all disciplines of medicine and surgery.

In 1968 the hospital became affiliated with the University for the purpose of clinical undergraduate teaching, in which activity it now works in close cooperation with and under the direction of the established Clinical School at the Royal North Shore Hospital, which is situated nearby. The hospital began undergraduate teaching in January 1969 when it welcomed eighteen fourth year undergraduates from the University to the wards of the hospital.

The hospital offers its services in all the specialties of medicine through organised departments, staffed by visiting medical officers and staff specialists. Departments of special interest are a Haemodialysis Unit which works in close cooperation with the Renal Transplant Units of the Sydney and Royal Prince Alfred Hospitals and the Community Health Services, staffed by multi-disciplinary health professionals and fully trained nurses who provide home care to patients in the surrounding municipalities, under the direction of family doctors. The hospital also offers a comprehensive geriatric and rehabilitation service in cooperation with the nearby Greenwich Hospital.

The hospital is associated with the Lourdes Hospital, Killara, conducted by the Missionary Sisters of the Society of Mary. This hospital, of 21-bed capacity, was closed as a special hospital for patients suffering from tuberculosis at the end of 1966 and re-opened shortly thereafter as an acute after-care hospital serving patients from the Mater Hospital. This association has proved very fruitful and the serenity and peace of the Lourdes Hospital has been extremely beneficial to patients recovering from severe acute illnesses.

The hospital's visiting medical staff, 130 when required for undergraduate teaching, are appointed for a term of five years by the Reverend Sister Administrator on the recommendation of a Conjoint Board consisting of representatives of the Senate of the University and the hospital.

In addition, there are 31 full-time medical officers (inclusive of resident medical officers), employed in the hospital's service.

### **Repatriation General Hospital, Concord**

The Repatriation General Hospital, Concord, was built during World War II and was opened in 1942 as a Base Hospital for the Army in New South Wales; it was then known as the 113th Australian General Hospital. In 1947 the hospital was handed over by the Army authorities to the Repatriation Commission and now is the major hospital for the Department of Veterans' Affairs in New South Wales. The hospital has a present capacity of 900 beds, and is staffed by 150 visiting and 45 full-time specialists as well as by resident and non-resident medical officers.

An auxiliary hospital (Lady Davidson Hospital) of 235 beds for chest diseases, medical rehabilitation and short term post-operative surgical convalescent cases is also conducted by the department at Turramurra. In 1967 an outpatients department commenced in the hospital (previously located in the city at Grace Building) and a casualty department opened in 1976, serving the needs of the community in general as well as ex-servicemen and their dependants.

The present clinical school was established in 1963, when 16 male and female students began their clinical years at the hospital. A further step forward was taken with the commencement of duties of an Associate Professor in Surgery in August 1966. Professorial wards and units in Medicine, Surgery and Psychiatry have now been established in the Clinical School. Senior lecturers in Medicine and Surgery have also been appointed.

The Repatriation General Hospital, Concord had previously undertaken undergraduate teaching responsibilities in the late 1940s and early 1950s to help cope with the increased volume of medical students due particularly to the great numbers of C.R.T.S. students.

The full potential of teaching material available from about 900 in-patients is open to the clinical school, including about 220 female patients. The hospital contains large departments of medicine and surgery, as well as the specialties, including gynaecology, and also a dental clinic.

A clinical sciences block located within the hospital grounds and adjacent to the present quarters was opened in 1973. It provides office accommodation for the warden and clinical supervisor, two large lecture/demonstration rooms and tutorial rooms, a large lecture theatre to accommodate approximately 150 people, offices for the professorial units and eventually research laboratories including an animal research laboratory and operating theatre. A library building was completed in 1967 and this now houses a comprehensive range of textbooks and journals.

The visiting specialists are appointed for a term of three years and are eligible for reappointment. The clinical school is under the direction of the Board of Medical Studies and is administered within the hospital by the clinical supervisors with the guidance of the Dean of the Faculty of Medicine.

### **The Royal North Shore Hospital of Sydney**

During the year 1885 the first practical attempt to found a public hospital for the North Shore community was made by Mr and Mrs F. B. Treatt of Chatswood. Sir Henry Parkes, in 1888, laid the foundation stone of the North Shore Hospital on land in Willoughby Road presented by David Berry, Esq., and the hospital was opened in 1889 with accommodation for fourteen patients. In 1902 the foundation stone of a new hospital was laid by Sir Harry Rawson on a site of three and a quarter hectares in St Leonards. In that year, also, permission was granted by King Edward VII for the institution to be designated 'The Royal North Shore Hospital of Sydney'. Its first pavilion, together with an administration block, was opened for the reception of patients in 1903.

Since that date the size of the site has been increased progressively until at the present time it has an area of 10 hectares, including the acquisition of a block of over two and a half hectares contiguous to Gore Hill Oval. With the completion of Stage 2 of the new hospital, an additional 600 beds were added situated on the highest ground in the vicinity, surrounded by a green belt or non-residential area aggregating about 32 hectares. The old cottages which were in temporary use for very many years have been removed and the student living-in quarters have been increased to 42 beds. The Hospital comprises 945 beds, and includes departments in all major specialties. University departments on site include Medicine, Surgery, Obstetrics and Gynaecology, Orthopaedics and Psychiatry. Research activities are conducted by the university departments, the Kolling Institute of Medical Research and a number of clinical hospital departments.

In addition to its role as a teaching hospital, the hospital provides the major regional resource for the Northern Metropolitan Region, as well as certain supra regional specialties catering for a population of nearly one million. Undergraduate education in the Allied Health services is undertaken in conjunction with the Cumberland College of Health Sciences.

The hospital's long history of medical service to the community was recognised by the University in 1948, when a



clinical school for medical undergraduates was inaugurated in the presence of the Chancellor, Sir Charles Bickerton Blackburn. In 1969 the teaching strength of the Royal North Shore Hospital was enhanced by the affiliation with the Mater Misericordiae Hospital, North Sydney.

The clinical school is under the direction of the Board of Medical Studies and the warden of the clinical school. In addition clinical supervisors are appointed in Medicine and Surgery.

### **Royal Prince Alfred Hospital**

In 1868 an attempt was made on the life of H.R.H. Prince Alfred, a son of the reigning Queen Victoria, at the Sydney suburb of Clontarf. The public conscience was so stirred by this unfortunate event that a charitable fund was opened to honour the name of the prince and to give thanks for the saving of his life. Out of this fund arose the Prince Alfred Hospital in Sydney and the Alfred Hospital in Melbourne. Prince Alfred Hospital was opened for the treatment of patients in September 1882. It was designed as a general hospital for the care of the sick, as a teaching hospital for the University and as a training school for nurses. Its site immediately adjacent to the University, between St John's and St Andrew's Colleges, was ideal for its function as a teaching hospital. The hospital was incorporated by an Act of Parliament in 1902 and the appellation Royal was added in 1904.

Originally comprising the centre administrative block and the 'Prince's block' which housed wards, lecture and operating theatres, it was soon completed by the addition of the C and D blocks and the Victoria and Albert Pavilions to give it the facade that it has today. More recent additions included Gloucester House, a private and intermediate block, in 1936 and the Psychiatry Pavilion in 1938. The Dame Eadith Walker Convalescent Hospital (Yaralla) was acquired in 1940 and King George V Memorial Hospital devoted to obstetrics and gynaecology was opened in 1941. The Page Chest Pavilion was built primarily for the treatment of tuberculosis and financed by the Commonwealth Government. Since opening in July 1957 it has come to embrace also non-tuberculosis chest diseases and cardiology. The Blackburn Pavilion, opened in 1962, houses medical and surgical professorial units, operating theatres and a central sterilising service for the whole hospital.

The hospital is unique in Sydney in having had a clinical school from its inception. There were no full-time professors in clinical subjects in those days, but the association with the Faculty of Medicine of the University had always been close. The early part-time professors of medicine and surgery were honorary physicians and surgeons respectively of the hospital. The appointments of full-time professors of medicine and surgery in 1931 saw the setting up of professorial units in medicine and surgery at the hospital. These were originally housed in the Prince's block, but since 1962 have been in the Blackburn Pavilion. The proximity of these units to the Departments of Medicine and Surgery of the University has enabled the

academic staff to remain in close contact with their wards in the hospital. Professorial units in obstetrics and gynaecology and in cardiology and university departments of psychiatry and anaesthesia are also housed in the hospital.

The hospital is a large one with a total bed capacity of 1532. It offers facilities for undergraduate teaching in general medicine, general surgery, psychiatry, obstetrics and gynaecology and in all the generally recognised specialties. It also provides post-graduate teaching in all these fields. Its regular seminars and grand rounds are highlights of Sydney's postgraduate activities. The hospital sends senior resident medical officers or registrars to work in the Bathurst District Hospital, Dubbo Base Hospital, Port Moresby General Hospital, Orange Base Hospital, and Lewisham, Marrickville and Rachel Forster Hospitals. This provides a loose affiliation with these hospitals and benefits all concerned.

It is staffed by approximately 350 honorary and visiting medical officers, 60 full-time specialists and 140 full-time medical officers in various training and resident posts. Honorary medical officers are appointed by a conjoint board composed of members of the Hospital Board of Directors and of the Senate of the University. The management of the hospital is in the hands of the Board of Directors. The 22 directors include the Chancellor of the University and the Dean of the Faculty of Medicine (*ex officio*), 10 directors appointed by the Government of New South Wales and 10 elected by hospital governors and subscribers. The general superintendent, a medical graduate, is the chief executive officer. He is responsible to the Board of Directors for the whole administration of the hospital and works in consultation with the honorary medical staff through the Medical Board and with the Faculty of Medicine through the Board of Medical Studies and the warden of the clinical school.

### **Sydney Hospital**

The first hospital in Australia was established at Dawes Point shortly after the arrival of the first fleet in 1788. It was transferred to the Sydney Hospital site in Macquarie Street in 1811 when Governor Macquarie built the 'Rum' Hospital. In 1826 the general hospital was known as the 'Sydney Dispensary' and became the 'Sydney Infirmary and Dispensary' in 1845. In 1881 the Sydney Hospital Act was passed and it is under this Act that the present Board of Directors is constituted.

The first Nurses' Training School in the Florence Nightingale tradition was established in 1868 after negotiations between the N.S.W. Government and Miss Nightingale.

*The Sydney Eye Hospital* at Wolloomooloo had its beginning in the establishment of an Ophthalmic Ward in 1878 and now houses the Department of Ophthalmology and Eye Health of the University.

*The Clinical School* of Sydney Hospital was established in 1909 under the direction of the Board of Medical Studies and it affords a full course of instruction in accordance with the curriculum of the University. Since then 3074 undergraduates have entered this school. Instruction in obstetrics is arranged in

conjunction with the Women's Hospital, Crown Street; instruction in Paediatrics is arranged in conjunction with the Royal Alexandra Hospital for Children. In addition, undergraduate clinical tuition is conducted in a number of affiliated suburban hospitals. The facilities of the clinical school include a large Pathology Museum, a comprehensive library and students' quarters, which have facilities for 21 students in residence at the hospital.

The University is represented in the hospital by the Professorial Departments of Medicine and Surgery.

The medical staff is appointed by the Board of the hospital. It comprises about 117 honorary medical officers, 30 staff specialists, 28 clinical assistants and 130 resident medical staff.

The hospital comprises a general hospital of 325 beds and an eye hospital of 75 beds.

*The Institute of Urology*, which represents the initial phase of a National Kidney Foundation, has headquarters at Sydney Hospital.

*The Kanematsu Institute for Medical Research* was established in 1933 and has an international reputation. Two Nobel Prize winners are included amongst its distinguished list of former directors.

### **Westmead Centre**

A major teaching hospital has been established at Westmead. The Westmead Centre, which was commissioned in 1978, has 965 beds and 17 operating theatres and is one of the largest medical centres in Australia. It will become a major teaching hospital for the University, providing clinical schools for both medical and dental students.

The Westmead Centre complex serves the Western Metropolitan Health region of Sydney, which has a population of 1.2 million. The centre provides a comprehensive health care service to this important and fast-growing area.

The Centre provides services in general medicine and surgery and related specialties, obstetrics and gynaecology, paediatrics, a special baby care unit, intensive care, acute psychiatry, and a unit for emotionally disturbed children and adolescents. The centre functions not only as a district hospital but also as a major referral centre within the region. There is a full range of diagnostic and therapeutic services, including a large radiotherapy department. In addition there are an accident and emergency service, full out-patient facilities, and a geriatric unit providing both in-patient and day care. There also is a large dental unit, providing general and specialist dental health care.

The New South Wales Institute of Clinical Pathology and Medical Research has been moved from its former site at Lidcombe Hospital and has been re-established as part of the Westmead Centre complex. The Institute of Dental Research will be transferred from the United Dental Hospital to the Westmead Centre. The Westmead Centre library, which has a capacity to hold 65 000 volumes, is intended to be the largest health sciences library in Australia.

In addition to its clinical schools for medicine and dentistry, the centre will provide clinical training for students of the Cumberland College of Health Sciences, and clinical training for nurses.

Professors of Medicine, Surgery, Obstetrics and Gynaecology, Paediatrics, and Geriatric and Community Medicine have already been appointed at the Westmead Centre, together with senior lecturers in each of these disciplines. The Director of Dental Services of the hospital is also Professor of Dentistry. In addition, there will be a large number of part-time clinical lecturers based at the centre. The Senate has conferred the title of Clinical Professor of Radiotherapy on the Director of Radiotherapy of the hospital, the title of Clinical Professor of Pathology on the Director of the Institute of Clinical Pathology and Medical Research, and the title of Clinical Professor of Psychiatry on the Director of Psychiatry of the hospital.

## The six special hospitals

### **The Rozelle Hospital**

In July 1976 Broughton Hall Clinic and Callan Park Hospital were amalgamated and called the Rozelle Hospital. This hospital now provides a comprehensive psychiatric service to communities served in the Inner Metropolitan Health Region and the Southern Metropolitan Health Region. The hospital has some 600 beds.

Broughton Hall has had a long association with the University. The original building, known as Broughton House, was built in 1840 as a gentleman's residence on the land that had been a Crown grant to John Austen in 1819. This building was first used as a hospital and convalescent home by the Army during World War I.

Broughton Hall was established as a psychiatric hospital in 1921. Dr Sydney Evan Jones was appointed as the first medical superintendent and continued to develop the hospital until his death in 1948. Dr Jones was a member of the teaching staff of the University, and Broughton Hall rapidly became an important centre of teaching both in neurology and psychiatry.

In 1955 Professor W. H. Trethowan was appointed to the chair of psychiatry, and he also became clinical director of Broughton Hall. Similar appointments have been held by Professor D. C. Maddison until 1974, and by Professor P. J. V. Beumont. These appointments have stimulated further development, most particularly in the form of teaching programmes for undergraduates and psychiatrists-in-training. The psychiatric postgraduate unit for the University was opened at the clinic in 1957 and a greatly expanded outpatients service, day hospital, and the Evan Jones Lecture Theatre began functioning in 1963. The New South Wales Institute of Psychiatry was opened within Broughton Hall in 1968. The undergraduate teaching unit was officially opened in 1973 and is now in constant use. A professional ward was opened in 1976.

In addition to acute inpatient admission services, the hospital has special units for the treatment of alcoholics and geriatrics, and a comprehensive rehabilitation programme for chronically disturbed patients. All units of the hospital have close links with the community health centres within the Region.

### **Parramatta Psychiatric Centre**

Parramatta Psychiatric Centre is an establishment of the N.S.W. Health Commission, and is located in the Western Metropolitan Region.

The medical staff consists of 11 psychiatrists and 18 medical officers. Twelve of the medical officers were involved in a post-graduate course preparing them for the examination for membership of the Australian and New Zealand College of Psychiatrists. Half of their programmed educational time is spent at the N.S.W. Institute of Psychiatry and half in a well-established clinical training programme at the centre.

The centre was established as a mental hospital in 1848, occupying buildings originally designed by Francis Greenway for the Female Factory. Additional buildings were constructed from 1860 onward and the original structure was abandoned in 1883. In its first century of existence the hospital grew steadily to reach a maximum population of over 1500 patients.

With the advent of modern psychiatric concepts patients were allowed voluntary admission as early as 1921. An admission centre was established in 1963 offering outpatient and community services as well as inpatient care to people residing in the western suburbs of Sydney, Parramatta and the Blue Mountains.

Various aspects of clinical psychiatry offered by the centre include diagnosis and treatment of short, intermediate and long stay inpatients, outpatients and community services, psycho-geriatrics, intensive psychotherapy, alcohol and addiction services.

The centre staffs a well-established network of community based mental health services, which are based at the Eric Hillard Centre, Parramatta; the Polyclinic at Mount Druitt; and the Health Centres at Blacktown, Baulkham Hills, Granville, Nepean, Merrylands and Katoomba.

The medical staff works with other professional staff including psychiatric nurses, psychologists, social workers, occupational therapists and chaplains.

The centre operates a 3-year training school for psychiatric nurses and an exchange programme for nurses with Parramatta and Blacktown District Hospitals. Clinical experience and tuition are offered to undergraduate students of psychology, social work and theology, and field placements are provided for students of occupational and recreational therapy.

### **The Macquarie Hospital, North Ryde**

The Macquarie Hospital, North Ryde, formerly known as North Ryde Psychiatric Centre provides a variety of services including an Acute Admission Service, a Rehabilitation Service, and Emotionally Disturbed Children's Services for the Psycho-geriatric patient and the Intellectually Handicapped Service.

The Macquarie Hospital also provides surgical and medical services for psychiatric patients all over New South Wales.

The Macquarie Hospital is situated on 40 hectares of land in Cox's Road, North Ryde, and is under the authority of the Health Commission of New South Wales. Building began on the site in 1956 and the first patients took up residence in January 1959. The hospital was originally conceived as one that would provide special facilities to deal with particular problems that other psychiatric hospitals were not equipped to handle.

In October 1961 the Wallace Wurth Clinic (Wards 10 and 11) was opened as an admission centre and replaced the almost century-old Reception House at Darlinghurst. Its initial function was mainly as an admission and diagnostic unit, patients being discharged after diagnosis and short-term treatment or transferred to other psychiatric hospitals for further treatment if this were indicated.

The Centre became a teaching hospital of the University in 1967 with the opening of a sub-professorial unit in 1969.

With the development of regionalisation of psychiatric services within the metropolitan area, other psychiatric hospitals opened their own admission centres, and the hospital became opened for the care and treatment of those patients living in the northern metropolitan region of Sydney. Sub-regionalisation evolved within the North Ryde Centre, and the various adult psychiatric units then began to function as admission and treatment units for their own specified sub-region.

The acute admission service is in Wards 12 and 13; Ward 10 and The Lodge are used for long-stay patients.

A full-time consultant physician supervises the medical and psychogeriatric service (Wards 1 and 14).

A full-time consultant surgeon directs the surgical unit in the Cameron Block.

A children's unit provides residential accommodation for the treatment of disturbed children of both sexes. A special school staffed by teachers of the New South Wales Department of Education has been incorporated into the unit. Teachers are also provided to the Intellectually Handicapped Persons Service.

Wards 7, 8 and 9 are used as a major inpatient facility for the Intellectually Handicapped Persons Service of the Northern Metropolitan Region.

Community Health centres relate directly to Macquarie Hospital. These include those for the Lower North Shore Area, Ryde Hunters Hill Area and Manly-Warringah Area.

In addition to providing specialised services (surgery, T.B. and children) to the Northern Metropolitan Region, Macquarie Hospital provides these, if required, to the whole state.

### **Royal Alexandra Hospital for Children, Camperdown**

This hospital was founded in 1879 and incorporated under The Royal Alexandra Hospital for Children Act, 1906. Its plans and objects are:

1. The reception and treatment as inpatients of children of both sexes up to the age of 13 years suffering from disease.

deformity or accident and whose condition warrants treatment in hospital.

2. The maintenance of a department where children, not needing treatment in hospital, may be attended as outpatients.

3. The maintenance of convalescent units.

4. Provisions for the systematic instruction and practical training of nurses.

5. Provision for the systematic instruction and practical training of medical students of the University of Sydney in diseases of children.

6. Provision for the systematic instruction and practical training of physiotherapists, occupational therapists, speech therapists, almoners, dietitians, and others as may be determined by the Board from time to time.

The establishment of a clinical school was agreed upon in 1924. The first students attended under this arrangement in 1927.

The main hospital is situated in Bridge Road, Camperdown, with a bed capacity of 510. The John Williams Memorial Hospital, a convalescent unit, is situated in Water Street, Wahroonga, and accommodates 70 patients. The total bed capacity is 580. In addition there are large casualty, special and outdoor departments.

The hospital is controlled by a board of management and a house committee. The honorary medical officers are appointed by a conjoint board consisting of representatives of the Senate of the University and of the board of management of the hospital. Clinical lecturers in medicine and surgery are appointed by the board of medical studies consisting of representatives of the hospital and of the Faculty of Medicine.

### **St Margaret's Hospital for Women**

This hospital was established in 1894, and has been under the care of the Sisters of St Joseph of the Sacred Heart since 1937.

In 1964 the hospital became a teaching hospital in obstetrics for the University and in 1967 a clinical supervisor was appointed. In 1970 St Margaret's became a full teaching hospital in both obstetrics and gynaecology. As well, it is also a recognised training school for midwifery.

The hospital has 120 beds with approximately 3000 births per year and 3000 gynaecological operations, and has a very well equipped Intensive Care Unit for the newborn.

In March 1967 St Margaret's Children's Hospital, a full care paediatric hospital of 150 cots and beds, was opened adjacent to the obstetric hospital: it had a full intensive care ward for neonates and saw approximately 12 000 outpatients per year.

St Margaret's Hospital for Women has a full medical staff covering all specialties, as well as a full-time medical and administrative staff to assist the Sisters of St Joseph's in conducting the hospital. The University's Professor of Obstetrics and Gynaecology is an honorary consulting lecturer in obstetrics at the hospital.

**The Women's Hospital, Crown Street**

The Women's Hospital, Crown Street, was founded in 1893, and since 1900 has taught obstetrics to University of Sydney undergraduates.

The hospital is controlled by a board of management. The honorary medical officers are appointed by a conjoint board, consisting of representatives of the hospital board of management and the Senate of the University.

Since 1965 there has been an Associate Professor in Obstetrics and Gynaecology based at the hospital. Clinical lecturers in obstetrics and gynaecology are appointed by the board of medical studies.

The hospital is the major teaching unit in obstetrics and gynaecology for the University, teaching some 800 students annually.

The hospital has 300 beds, 200 obstetrics and 100 in the gynaecology section. Some 5500 to 6000 children are born annually. Besides obstetrical and gynaecological clinics, there are outpatients sessions in urology, psychiatry, infertility, malignancy, and family planning.

Resident medical officers are appointed only after they have completed at least a 12-month residency in a general hospital. Sixteen medical officers are appointed each year. The majority of these officers, after training, go into general practice, but several remain for a further three-year intensive training programme in the specialty of obstetrics and gynaecology. The Royal College of Obstetricians and Gynaecologists fully recognises the Women's Hospital, Crown Street, as a training hospital in the specialty.

A University teaching block, including student quarters, lecture halls and library, was completed in 1973.





# MAP GUIDE 1982



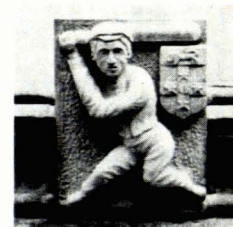
The codes in this list are grid references, not building numbers

Accountant's Office 17D  
Accounting 18P  
Administration 17D  
Admissions (undergraduate) 16E  
Adult Education 12B  
Aeronautical Engineering 26N  
Agricultural Annexe 11C  
Agricultural Botany 11C  
Agricultural Chemistry 10C  
Agricultural Economics 11C  
Agricultural Glasshouses 11C  
Agriculture Faculty Office 11C  
Agronomy & Hort. Science 12E  
Alma Street Glasshouse 23N  
Anderson Stuart Building 17H  
Anatomy 17H  
Animal Husbandry 7E  
Anthropology 16F  
Archaeology 16F  
Architectural Science 22L  
Architecture Faculty Office 22M  
Art Workshop 20N  
Arts Faculty Office 16E  
Bacteriology 8L  
Badham Building 14D  
Banks 15D, 13C, 14G, 19N  
Basser Dept Computer Science 17M  
Behavioural Sciences in Med. 8L  
Biochemistry 20P  
Biological Sciences 12C, 16C  
Biometry 10C  
Blackburn Building 8L  
Bookshop 16K  
Bookshop Medical 8L  
Bookshop, SRC Secondhand 19N  
Bosch Building 8M  
Bosch Lecture Theatres 9M  
Botany 16C  
Botany Annexe and Glasshouse 16C  
Brennan, C. Building 15F  
Carslaw Building 19L  
Cashier 15D  
Careers & Appointments Service 12A  
Caretaker's Cottage, Vet Area 6C  
Central Stores 21S  
Chemical Engineering 23Q  
Chemical Store 21S  
Chemistry 17K

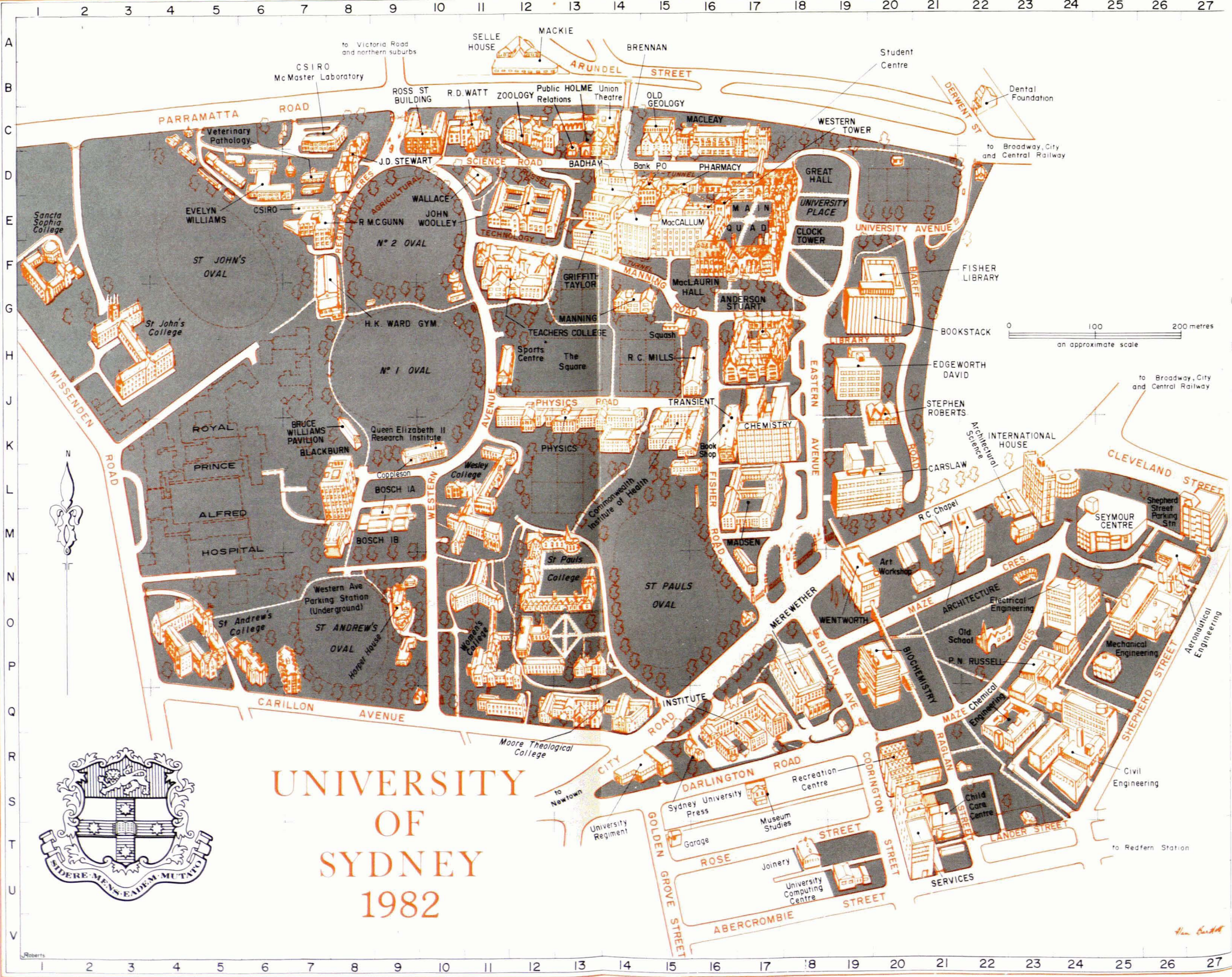
Child Care Centre 21S  
Child Health (RAHC)  
Civil Engineering 24R  
Clock Tower 18E  
Community Health (at Croydon)  
Computing Centre 19U  
Commonwealth Institute of Health 15K  
Coppleson Postgrad. Med. Inst. 9K  
Counselling Service 16R  
CSIRO 7C, 7E  
Darlington Sports Centre 20R  
Dental Health Educ. & Res. Fdn 22B  
Dentistry (at United Dental Hospital)  
Dentistry Faculty Office 16E  
Divinity 9O  
Economic Statistics 18Q  
Economics Faculty Office 18P  
Edgeworth David Building 19J  
Education 16H  
Electrical Engineering 24O  
Electron Microscope 17L  
Engineering Faculty Office 24P  
Engineering Workshop 24S, 25P  
English 12E  
Enquiry Office  
admissions (undergraduate) 16E  
enrolments 16E  
examinations 16E  
general 17E  
Evelyn Williams Building 6D  
Extension Board 12A  
Fine Arts 16H  
Fisher Library 20F  
Fisher Library Bookstacks 20G  
French Studies 15E  
Garage 21T  
Geography 17Q  
Geology and Geophysics 19J  
Germanic Studies 15E  
Government & Public Admin. 18Q  
Grandstand No 1 Oval 8K  
Great Hall 17D  
Greek 17E  
Griffith Taylor Building 13F  
Gunn, R.M.C. Building 7E  
Gymnasium 8G  
Histology and Embryology 17H

History 16E  
Holme Building 13C  
Horse stables 5D  
Housing Office 16D  
Illustration, Dept of 8L  
Indonesian and Malayan Studies 14E  
Information Services 13D  
Institute Building 17Q  
Internal Auditor 17Q  
Internal Mail 15C  
International House 23L  
Inventory 17Q  
Isolation Block—large animal and bull pen 4D  
Italian 15F  
Joinery 18T  
Language Study Centre 14F  
Latin 17E  
Law (at Law School)  
Linguistics 14F  
Mackie Building 12A  
MacLaurin Hall 16F  
Macleay Building 16C  
Macleay Museum 15C  
McMaster Animal Health Laboratory CSIRO-7C  
McMillan J.R.A. Building 11C  
Madsen Building 17L  
Main Building 17E  
Manning House 14G  
Mathematical Statistics 19L  
Mathematics, Applied 19L  
Mathematics, Pure 19L  
Mechanical & Aero. Eng. Bldg 26N  
Mechanical Engineering 25O  
Medicine Faculty Office 8M  
Medicine, Paraclinical & Clinical 8L  
Medicine, Preclinical 17H  
Merewether Building 18P  
Microbiology 20P  
Mills, R.C. Building 16H  
Mining Engineering 25O  
Moore Theological College 13Q  
Mungo MacCallum Building 15F  
Music 24M  
Nicholson Museum 16F  
Obstetrics and Gynaecology 10K  
Officer of Works 21T  
Old Geology Building 15C  
Old School Building 22P  
Oriental Studies 14E  
Overseer of Grounds Lodge 22D  
Pathology 8L  
Pathology Museum 8L  
Pharmacology 8L  
Pharmacy 15O  
Philosophy 17F  
Photography 21T  
Physics 13J  
Physiology 17H  
Plant Pathology & Agric. Entom. 11C  
Postgraduate Committee in Med. 9K  
Post Office 15D  
Preventive Medicine 15K  
Printing Service 21T  
Professorial Board Room 17F  
Psychology 15F  
Public Relations 13D  
Purchasing Office 15C  
Quadrangle 17E  
Queen Elizabeth II Research Inst. 10K  
Recreation Centre, Swimming Pool and Squash Courts 20R  
Regiment, University 15R

Registrar's Office 17D  
Registrar's Publications 16E  
Religious Studies 13F  
Ross Street Building 10C  
Round House 7D  
Russell, P.N. Building 23P  
St Andrew's College 5P  
St John's College 3H  
St Paul's College 12N  
Sancta Sophia College 1F  
Sand roll shed 4C  
Science Faculty Office 16E  
Selle House 12A  
Semitic Studies 18E  
Senate Room 18E  
Services Building 20T  
Services Garage 21T  
Seymour Theatre Centre 25M  
Sheep Building & Pens 5D  
Shellshear Museum 17H  
Shepherd Street Parking Station 27M  
Social Work 16H  
Soil Science 10C  
Sports Centre 12H  
Sports Union 8F  
Squash Courts 15G, 12H, 21R  
Staff Club 15F  
Staff Office 15C  
Stephen Roberts Theatre 20J  
Stewart J.D. Building 8D  
Student Centre 16E  
Student Health Service 17Q  
Students' Representative Council 19N  
Sub-station, Butlin Avenue 19Q  
Surgery 8L  
Swimming Pool 20R  
Sydney Institute of Education 12F  
Sydney University Press 16R  
Television Service 20L  
Tennis pavilion and women's tennis courts 20D  
Town & Country Planning 16K  
Transient Building 16K  
Tutorial Classes 12B  
Union Theatre 14C  
Veterinary Anatomy 8D  
Veterinary Clinic 6D  
Veterinary Hospital 6D  
Veterinary Medicine 8D  
Veterinary Operating theatre and animal house 7D  
Veterinary Pathology 7D  
Veterinary Physiology 7E  
Veterinary Science Faculty Office 8D  
Veterinary Surgery 6D  
Vice-Chancellor 16E  
Wallace Theatre 11D  
Ward, H.K. Gymnasium 8G  
War Memorial Gallery 17D  
Watt, R.D. Building 11C  
Welfare Association 15C  
Wentworth Building 19N  
Wesley College 11L  
Western Avenue Underground Parking Station 8N  
Western Tower 16E  
Wilson (Anatomy) Museum 17H  
Women's College 11O  
Women's Sports Association 12H  
Woolley Building 12E  
Workshop 17N  
Yeoman Bedell 17E  
Yeoman Bedell's Lodge 10G  
Zoology 12C





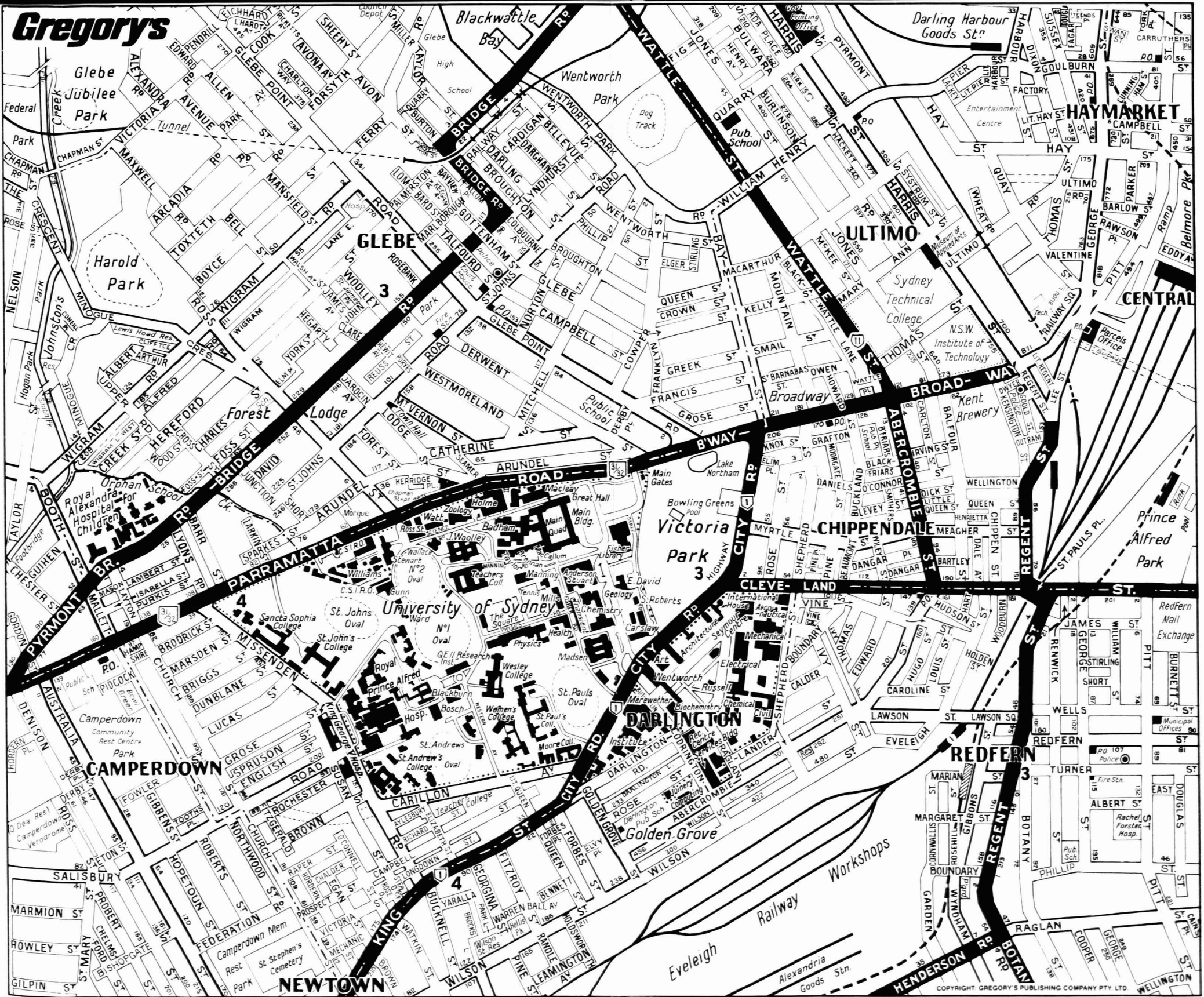


# UNIVERSITY OF SYDNEY 1982



*Van Benth*







# Compendium

## Facts about the University

*Founded:* 1 October 1850  
*Area of main site:* 68 ha  
*Height above sea level:* 40.3 m  
*Distance from city centre:* 3 km

## Emergency telephone numbers

Fire, police, ambulance, 0 000  
 Other emergencies: 3333  
 (Security Office, Main quadrangle, Superintendent, Griffith Taylor Bdg)

## Officers of the University

Chancellor: Sir Hermann David Black  
 Deputy Chancellor: The Hon. Mr Justice D.M. Selby  
 Vice-Chancellor and Principal: Professor J.M. Ward  
 Deputy Vice-Chancellor: Professor M.G. Taylor  
 Deputy Principal: Mr H. McCredie  
 Assistant Vice-Chancellor and Registrar: Dr Kenneth W. Knight  
 Librarian: Dr N.A. Radford  
 Accountant: Mr K.A. Shorten  
 Chairman, Academic Board: Professor N. Collis-George

## Enrolled students 1981

	Male	Female	Total
Postgraduate (including diploma)	2 462	1 364	3 826
Undergraduate	7 693	5 900	13 593
Non-degree	214	284	498
TOTAL	10 369	7 548	17 917
Less adjustment for multiple faculty enrolment			[112]
			17 805

## Bachelor degree abbreviations

Abbreviation	Field	Abbreviation	Field
BScAgr	Science in Agriculture	MB	Medicine
BAgrEc	Agricultural Economics	BS	Surgery
BArch	Architecture	BSc(Med)	Science (Medical)
BSc(Arch)	Science (Architecture)	BSc	Science
BLandStud	Landscape Studies	BPharm	Pharmacy
BA	Arts	BVSc	Veterinary Science
BDS	Dentistry	BSc(Vet)	Science (Veterinary)
BSc(Dent)	Science (Dental)	BD	Divinity
BEd	Economics	BEd	Education
BE	Engineering	BMus	Music
LLB	Laws	BSocStud	Social Studies

## Degrees conferred 1981 (to 30 Jun)

Faculties	Boards of Studies	Academic staff 1981 numbers
Agriculture 87	Divinity 6	Professor 136
Architecture 89	Education 146	Reader 180
Arts 946	Music 10	Associate professor 392
Dentistry 109	Social Work 89	Director 289
Economics 390	BACHELORS 2923	Senior lecturer 17
Engineering 200	MASTERS 341	Lecturer 39
Law 276	PhD 102	Principal tutor 201
Medicine 277	HIGHER DOCTORATES 8	Senior tutor 1254
Science 671	TOTAL 3374	Tutor/demonstrator 207
Vet. Science 78	TOTAL 343	part time staff 1461
		equivalent full time 207

## Diplomas awarded 1981 (to 30 Jun)

DipEd	205
Other	138
TOTAL	343

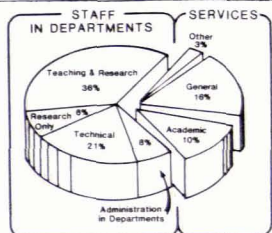
## Staff

*In departments*

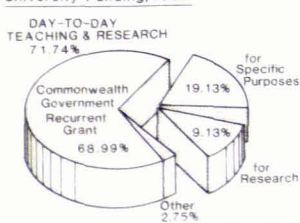
teaching and research	1460
research only	251
technical	864
administrative	333

*Services & independent operations*

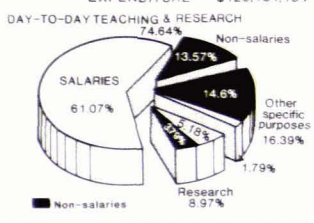
academic — e.g. library, computing	388
general — e.g. admin., works	642
other — e.g. Adult Ed., Press	116
TOTAL	4054



## University Funding, 1980



## EXPENDITURE \$120,101,104



## Addresses

**University**  
 University of Sydney  
 N.S.W. 2006 Tel.: 692 1122  
**Dentistry**  
 Faculty of Dentistry  
 United Dental Hospital  
 2 Chalmers Street  
 Surry Hills 2010 Tel.: 211 4322

## Law School

University of Sydney Law School  
 173-5 Phillip Street  
 Sydney 2000  
 Tel.: 232 5944; 692 1122, x3233/4  
**Farms**  
 University of Sydney Farms  
 Camden, N.S.W. 2570  
 Tel.: (046) 66 9311

## Term dates 1982

	Lent	Trinity	Michaelmas
Lectures begin	22 February	31 May	30 August
end	30 April	30 July	29 October
Term ends	8 May	7 August	4 December
AVCC Common week	10-14 May	23-27 August	
Easter recess	8-13 April	Annual exams begin: 8 November	

## Some places to see

	Map ref.	Open
Nicholson Museum	16F	Mon-Thu 10.4.30; Fri 10.4.15
Macleay Museum	16C	Mon-Fri 8.30-4.30
Power Gallery of	17L	Mon, Tue, Thu, Fri 2-4.30
Contemporary Art		Wed 10.30-4.30
Rare Book Library display	20F	when Fisher Library open

Tours of grounds are arranged by Chancellor's Committee including Quadrangle, Great Hall, MacLaurin Hall, Great Tower. Small charge. Enquiries: 692 3167

## Performances (during term)

Carillon recitals	Quadrangle	Tue 1-2; Sun (most) 2.45
Music Dept recitals (Free)	Great Hall	Wed 1.10-2
concerts (\$3 and \$1)	Old School	Thu 5.15-6.30
Organ recitals	Great Hall	Thu 1-2

## Courier services — pick-up point: Mail Room 15D

Town run: daily 10  
 (Dental Hospital, Law School, Eye Hospital, City Document Exchange & Sydney Hospital, Tue & Fri)  
 Hospitals: Mon, Wed, Fri — 8  
 (Rozelle, Concord, Macquarie, Westmead, Lidcombe, Western Suburbs)  
 University Farms, Camden: Tue, Fri — 1; Thur 10.30  
 N.S.W. Government Courier: daily — 11.3  
 University of New South Wales: daily — 11.30  
 Macquarie University: Mon, Wed, Fri — 11.30  
 Royal North Shore Hospital: daily (from Blackburn Building)

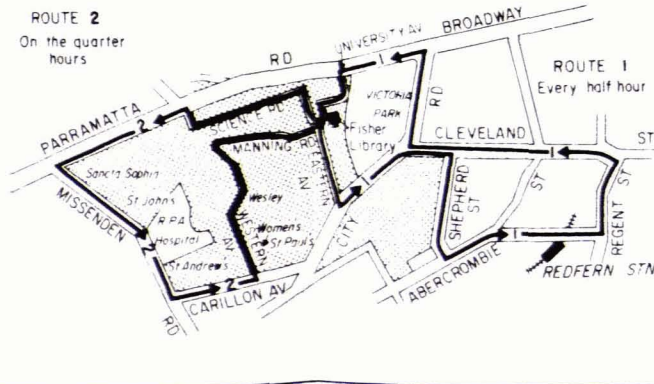
## University of Sydney Library hours

Fisher Library	Terms			Vacations		
	1st & 2nd	3rd	May, Aug	Dec	Jan, Feb	
Mon-Thu	8-10	8-11	8.30-9	9-5	9-9*	
Fri	8-8	8-9	8.30-5	9-5	9-5	
Sat	9-5	9-5	9-5	—	9-5	
Sun	2-6	2-6	—	—	—	*Mon: 9-5

22 other branch & departmental libraries:  
 most 9-5 Mon to Fri; some also evenings & weekends

## University Bus Service

Free evening service. Runs 5.45 pm to 6.30 pm inclusive, 15 min intervals Fisher Library direct to Redfern Station via Butlin Avenue. Then 6.45 pm to library closing time. *Route 1:* on the hour and 1/2 hour, to International House & Redfern Station; *Route 2:* 1/4 to & 1/4 past the hour, to colleges. Signal driver anywhere on the route.



## Publications (free unless otherwise indicated)

News — weekly during term  
 Gazette — 1 March, 1 September  
 Available from Student Centre  
 Calendar — 670 pp; \$10\*  
 Faculty handbooks (& Education) — \$4\*  
 Boards of Studies handbooks \$2.00\*  
 \*each, plus postage  
 Guide for New Students  
 Undergraduate Prospectus  
 Postgraduate Studies Prospectus  
 Some Annals of the University  
 MacLaurin Hall  
 Where to find that room  
 When to enrol: How to enrol  
 Futurity's Folly: The Great Hall \$3  
 The University of Sydney 1850-1975  
 from Union Exchange: about \$4

## Special locations

	Tel. extn	Map ref.
general academic and student enquiries	Student Centre	3013, 3023
public relations	Information Services	3167
lost property	Carlaw, main foyer	2952
parking office	Carlaw, past main foyer	3336
room bookings	Carlaw, main foyer	2949
security	Main Quadrangle, north end	2487

## Where to eat

Bosch 1A	8M	Services Canteen	21T
Bruce Williams		Sports Centre	12H
Pav. (No.1 Oval)	8K	Staff Club	
Fishery	20G	(members only)	15E
Holme	13C	Vet Science	8D
Madsen	17M	Welfare	15C
Manning	14G	Wentworth	19N

## Services available

	Ref.	Tel.
CAS (Careers & Appts)	12A	2566
Counselling	16Q	2228
Housing Office	17D	3312
Language Study Centre	14E	2688
Library	20G	2993
Student Centre	16E	3013
Student Health	18Q	3484

## Main student organisations

	Ref.	Fee	Telephone
Union	19N	\$72*	660 1355
SRC	Level 1	19N	\$14 660 5051-2; 2871
SUPRA	Old Rowing Hut	10G	\$14 692 3715
Sports Union	H.K. Ward Gymnasium	7G	\$46 — 2039
Women's Sports Association	Sports Centre	12H	\$46 — 2057

\*Joining fee \$20 extra

## Colleges

College	Telephone	Places	For	Principal
St Andrew's	51 1449	200	men	Rev. Dr H.C. Cairns
St John's	51 1240	186	men	Fr L. Cashen
St Paul's	51 2441	172	men	Rev. J.P. Bennie
Sancta Sophia	51 2467; 519 7123	150	women	Sr P. Toohy
Wesley	51 2024	210	both	Rev. Dr J. Udy
Women's	51 1195	250	women	Miss Val Street
International House	660 5364	190	both	Mr G.E. de Graaff

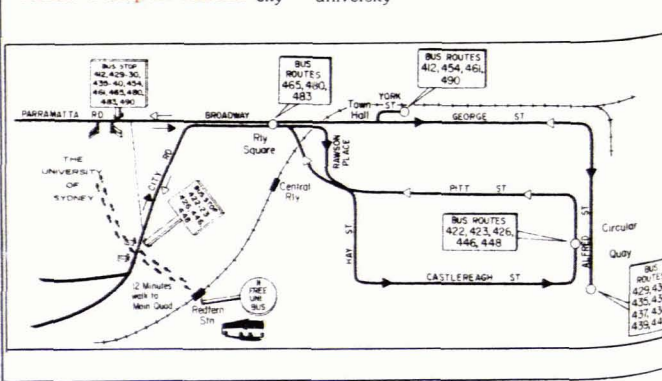
## Faculty offices

	Ref.	Tel. extn
Agriculture	ground flr, McMillan Bdg	11C 2685, 2936
Architecture	level 3 (rm 326) Architecture Bdg	21N 3248
Arts	middle flr, Western Tower	16E 2223
Dentistry	mezzanine flr, Western Tower	16E 2248
Economics	level 2, Merewether Bdg	18Q 3076; 3086
Engineering	level 3 (rm 327) P.N. Russell Bdg	23P 3237; 2212
Law	level 12, Law School, 173-5 Phillip St.	3233-4
Medicine	Dean's Office, level 3, Bosch Bdg	8M 3132; 3667
Science	mezzanine flr, Western Tower	16E 3021; 3274
Vet. Science	ground flr, J.D. Stewart Bdg	8D 3056

## Boards of Studies enquiries

	Ref.	Tel. extn
Divinity	middle flr, (rm N405) Western Tower	16E 2209
Education	rm G66, Madsen Bdg	17L 2634
Music	middle flr, (rm N405) Western Tower	16E 2209
Social Work	middle flr, (rm N405) Western Tower	16E 2209

## Public transport routes: city — university

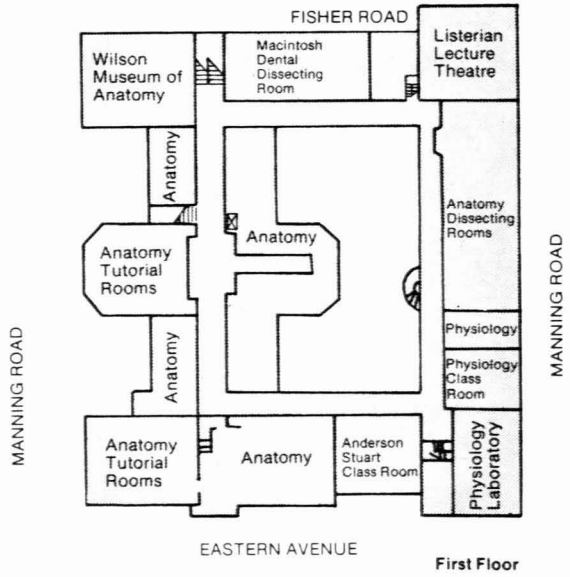
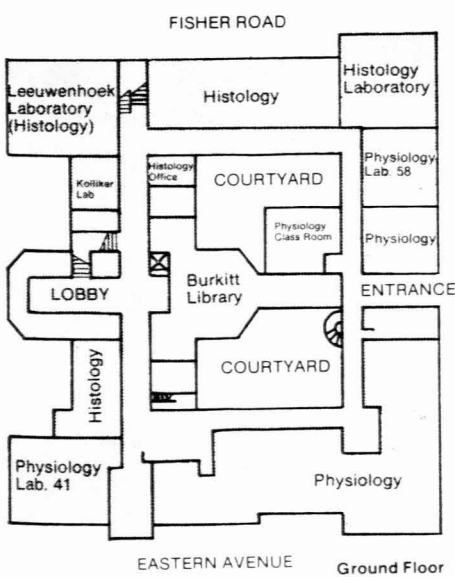




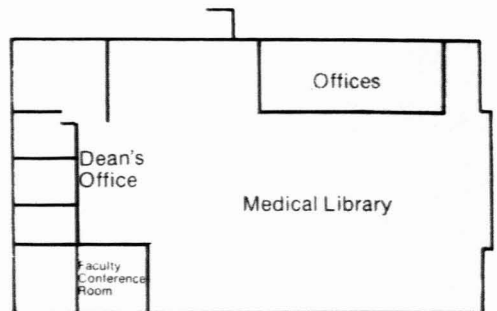
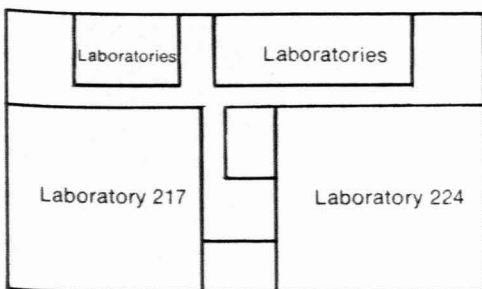


The original building to the left was erected in 1886, the northern wing added in 1912. Sir Thomas Anderson Stuart, the first professor of Anatomy and Physiology and foundation dean, was appointed in 1883.

**Anderson Stuart Building, the Old Medical School facing Eastern Avenue**



**Plan of the Anderson Stuart Building**



**BOSCH BUILDING LEVEL 2: Pharmacology LEVEL 3: Medical Library and Dean's Office**

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