

Guest Editor:
Northern Clinical School

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Welcome

Associate Professor Tessa Ho, Associate Dean, Medicine

Welcome, to all of you! It is heartwarming to welcome so many enthusiastic first year medical students commencing their studies in Medicine and Dentistry at our world renowned University. I am deeply honoured and exhilarated to find myself at the helm of the Office of Medical Education at such a distinguished institution, with a truly august history.

You are joining the University of Sydney Medical Program at a particularly exciting time: we are in the middle of a journey of discovery in biomedical research, making significant strides in translating insights in basic science to meaningful advancements in patient care. In the midst of this 'Renaissance', we are committed to and focussed on providing you, our medical students, with the best possible student experience.

Let me share with you some of the milestones and highlights of the past year so that you will have a sense of the tremendous energy and excitement we feel, and will share the direction of the course we are charting and the "Compass" by which we all steer towards common goals and aspirations.

First, to say a few more words about the curriculum. We are now in the second year of our revised curriculum. You will benefit from many exciting innovations, including anatomy dissection classes; more integrated basic science courses; and a series of completely new course offerings in Indigenous

health, two day intensives in ethics, personal and professional development; medical humanities; complementary and alternative medicine; global health.

In addition, we have created a research stream, in which students may spend unconflicted periods of time for in-depth scholarly research within the Medical Program through the Honours, Independent Learning Activity, Electives components and the Master of Philosophy.

We have re-engineered the 3rd and 4th years (Stage 3) to rotate all students to medicine and surgical terms in their final years to provide practical preparation for our students' imminent residencies.

Most of all, the experiences you will have in the University of Sydney Medical Program will bring you close together in friendships that will last a lifetime and a student experience which will prepare you well for your professional life. I wish you all happiness and success during your time with us.



ASSOCIATE PROFESSOR TESSA HO

Associate Professor Christopher Peck, Pro-Dean Dentistry

On behalf of the Dean, staff and students of the Faculty of Dentistry, I'd like to wish everyone a happy, healthy and successful 2009.

Our Faculty is one of the few around the globe that has such close ties with the Faculty of Medicine. In the first two years our Bachelor of Dentistry curriculum is closely integrated with Medicine's curriculum. This provides the opportunity for students from both faculties to interact both professionally and socially and is often the beginning of life long friendships. From an interprofessional learning perspective, this collaboration can only lead to better health professionals and better outcomes for our patients and society. This integration is sadly lacking in many parts of our community and here, at Sydney, we are continually looking at ways to improve this. This is helped enormously by the Office of Medical Education which establishes and coordinates the combined medical-dental educational activities, and provides a

foundation for both Faculties to work closely together.

Our Faculty has recently commenced a curriculum review to strengthen further the dental course. Importantly, as users of the curriculum, students have an important role to play in this review and constructive input is strongly encouraged.

An overriding Faculty goal is to develop oral health practitioners of the highest calibre with outstanding clinical and academic skills who pursue a career of life long learning, and, together with uncompromising ethics, become prominent leaders in the community. During the course, there are opportunities to undertake important research to help advance the oral health field. The course is challenging, however, well worth the effort, and as Thomas Edison said "Genius is 1% inspiration and 99% perspiration".

Northern Clinical School

Welcome!

Professor Michael Field, Dr Kirsty Foster

We are delighted to be guest contributors to this edition of 'Curriculum Matters,' the theme of which is "Innovation in teaching and learning". Northern Clinical School begins 2009 based in state of the art, brand new headquarters: the Kolling Building for education and research at Royal North Shore Hospital. We have also continued to develop our teaching programs across a wide range of hospitals and practices in our area and further afield. Add to that the strong ethos of teaching and learning which has grown over many years, the enthusiasm, energy and expertise

of our clinical tutors, and a good working relationship between the Area Health Service and the University, and we have a recipe for good clinical learning experiences for medical students, doctors and other health professionals. Moving into a new building often inspires activity and innovation, and this is well underway at Northern. In this issue, we will introduce key staff and highlight some of the innovative activities in medical education which take place at Northern Clinical School and which will be enhanced by our new facilities.

A new headquarters for Northern Clinical School

The new Kolling Building at Royal North Shore Hospital is the largest and most modern research and education facility on a hospital site anywhere in Australia. The \$99 million project also represents a landmark



in co-funding of academic facilities on a State Health Service site. With \$67 million provided by the NSW Government through NSW Health and \$32 million from the University of Sydney, the strong collaboration established over many years between Royal North Shore Hospital and the Faculty of Medicine is very apparent.

The building provides an excellent learning environment for medical students and other health professionals. The first four floors house a variety of teaching and learning spaces and the staff who run them.

The ground floor (Level 4): The Douglas Piper Library where light airy desk areas, wireless access to the University of Sydney and Area Health Service networks, meeting rooms and printing and photocopy facilities make it a

joy to study and research. This level houses the Medical Illustrations Department and the support staff for audio-visual and information technology services. A spacious foyer contains a reception desk and information station. The student common room area on this floor gives students 24 hour access to a computer suite/study area, kitchen and comfortable seating facilities, lockers and table football!

The first floor: All the main teaching spaces are on level 5 including:

- an auditorium with seating for 202 and double-screen projection;
- two large multipurpose rooms each seating 50 in traditional lecture format and which can be used separately or together;
- a 70-seat interactive lecture theatre in horseshoe configuration;
- 11 small tutorial or break-out rooms, each equipped with a computer workstation and digital projection facilities;
- a 30-seat seminar room;
- a computer learning centre, with 10 workstations;
- the Pathology Museum.

The second floor (Level 6) is totally occupied by the Sydney Clinical Skills and Simulation Centre. This state-of-the-art facility for clinical skills and procedural training incorporates:

- a 90 sqm training lab, with a teaching table monitored by closed-circuit video, and 10 laparoscopic towers
- five skills laboratories, each 30-55 sqm
- two immersive learning suites,



providing high-fidelity simulations of operating theatre and emergency room environments

- a communication skills room;
- a debriefing room;
- seminar rooms;
- staff offices;
- extensive audiovisual and video-conferencing facilities.

The third floor (level 7) provides accommodation for the administrative staff of the Northern Clinical School and the Area's Organisational Education and Learning Unit. The floor also houses the Pam McLean Communication Centre, specialising in teaching clinical communication skills, a boardroom, and offices for the key academics overseeing the research and education programs in the building.

Laboratory research is housed on the upper floors of the building. Each of levels 8 to 13 is designed and configured similarly, including over 100 metres (cont'd overleaf...)

Northern Clinical School

of bench space for general laboratory procedures, separate laboratories housing specialised equipment and accommodation for heads of research groups, postdoctoral scientists, research assistants and postgraduate research students.

Each research floor accommodates some 50 research staff, giving a total of around 300 in the building. The top floor of the building (level 14) is not yet fitted out internally, allowing flexibility for emergent uses in the future.

A particularly advanced feature of the building is the sophisticated

IT and audio-visual installation. Video-conferencing from most of the larger teaching venues, as well as some of the meeting rooms, will allow great flexibility for conducting educational sessions and administrative meetings within the University, across the Area and to interstate and international venues. As the Royal North Shore Hospital redevelopment progresses, there is provision for a bridge link at level 5 connecting the Kolling Building teaching spaces directly with the main hospital building. This will cement further the already close links between clinical services, research and education.



A wealth of different experiences

Dr Narelle Shadbolt, Dr Kirsty Foster

In addition to their tertiary hospital experience, students at Northern Clinical School are exposed to delivery of health care in other settings. Hornsby, Manly, Mona Vale Hospitals, Ryde Hospital, the Ryde Rehabilitation Centre, Mater Hospital, the Sydney Adventist Hospital and the Northern Rivers University Department of Rural Health all provide clinical teaching for Northern students. Because of the smaller size of these units, students report a friendly environment which they very much enjoy. They are also often sources of innovation in teaching. Read on . . .

The Hornsby Campus, also known as the Albert Himmelhoch Academic GP Unit, is based in a mid-sized urban hospital with a strong focus on community-based care. The staff at Hornsby have always sought to develop innovative ways of delivering clinical teaching that utilises this unique clinical environment.

Students at Hornsby are able to take advantage of early exposure to hospital and community based services through the 'mini-elective' program. Students in Years 1 and 2 can opt to spend a morning in the labour ward, an ENT practice, blood rounds, a morning in General practice or with the radiologist in the Radiology department – just to name a few of the posts on offer. This program also runs at Manly with out of hours visits with the mental health team and ambulance experience with a paramedic team as examples of mini-electives.

The health and well-being of doctors and medical students are a special area of research interest for the Academic GP Unit. Associate Professor Simon Willcock and Dr Narelle Shadbolt have extensive experience in this area. The Hornsby Unit has been instrumental in the development of University wide policies, processes and curriculum

in the area of student support health and well-being. The new role of Associate Dean (Student Support) held by Dr Shadbolt establishes this area as core to the Faculty's postgraduate and undergraduate student support system.

Dr Carol Kefford's "GP's in schools program" is a unique and popular program started in Hornsby. General practitioners visit local high schools to talk to senior school students. Medical students in their Community Rotation have the opportunity to participate in this program with an intensive communications skills workshop and can join the GPs in the schools groups. Students who participate rate the program highly.



JOE DUNCAN, KRUTHIKA NARAYAN AND ALISON MUMME - ON THEIR WAY TO A TUTORIAL AT HORNSBY



Challenging simulations for Pre-Interns

Dr Adam Rehak, Staff Specialist in Anaesthetics, Senior Instructor

In November, 2008, Pre-Intern medical students were among the first to experience the new Sydney Clinical Skills and Simulation Centre (SCSSC). Located in the brand new Kolling Building, this amalgamation of the Northern Clinical Skills Centre and the Sydney Medical Simulation Centre is led by Dr Leonie Waterson (Director, Simulation) and Dr Peter Cosman (Director, Clinical Skills).

The theme of the day was “The Deteriorating Patient”, but communication and teamwork issues relevant to managing an acutely unwell patient were also explored. The participants rotated through four different simulation workshops which focused on 1) the cardiovascular system and resuscitation, 2) airway management, 3) teamwork, and 4) communication, including



STUDENTS PRACTISING CLINICAL SKILLS AT THE SCSSC

graded assertiveness.

Pre-Interns attending the training day were able to use the impressive technical facilities provided by the new SCSSC. The workshops incorporated various high-fidelity human simulators that accurately replicate many physiological parameters and responses, including pulses, blood pressure, breathing movements and breath sounds. Monitors can also be applied to the simulators allowing participants to assess and monitor the simulated patients as they would a real one.

The simulated problems the participants faced on the day included severe asthma, decreased conscious states, shock, arrhythmias and cardiac arrest. Thrown in for added realism were some simulated unco-operative work-mates and situations making effective communication difficult.

This pre-intern training day focusing on the deteriorating patient forms part of a new vertical curriculum on the same theme provided by the SCSSC and integrates with an introduction to the theme provided to medical students during the Stage 3 Critical Care/Surgery Core Block, further exploration during the intern orientation and ongoing re-enforcement with the resident medical officers. The most intensive training about management of unstable patients is for residents and registrars who attend the Cardiac Arrest and Medical Emergencies Course at the SCSSC.

Hopefully, this focus on the deteriorating patient, combined with the state-of-the-art facilities at the Sydney Clinical Skills and Simulation Centre, provides our pre-interns with a solid practical grounding in this critical facet of their hospital work.

A student's perspective

Dr Darryl Raley

It's a strange place, the end of medical school. Four years in the making, though looking back now, it seems like a glimpse. At Northern I was fortunate to be part of a fantastic group of students who shared an excellent camaraderie and were a great support for each other. We were warmly welcomed into the hospital community at Royal North Shore Hospital (RNSH) and felt this especially during our clinical years. It was inspiring to see some of the excellent doctors at this hospital doing what they do best, to learn from them and be a part of their team. Being a student at this hospital has offered a world of opportunities in research and clinical medicine, helping to set our career paths.

Becoming known at the hospital is not always advantageous for a student. Being

put on the spot in front of the hospital's prominent physicians at Grand Rounds can be terrifying and traumatic, and for some complicated physiological reason, leads to a temporary cognitive dysfunction that makes it hard enough to remember your own name, never mind answer the medical question. It's a situation familiar to every medical student when asked a question by their consultant during ward rounds.

Patient-Doctor tutorials were an absolute highlight of the program, not only by virtue of the exposure to interesting cases and the learning opportunities afforded, but also because the doctor always wanted to teach us. This desire to teach and engage the students is a fundamental component of a good clinical exposure. As a result, many of us found a mentor amongst these tutors. To

those who took on this responsibility and gave their time to teach us, we can't thank you enough.

As I look to the near future, when I'll finally be a real doctor, and not just a pretend one, I consider my role as a doctor (the Latin origin of which is “teacher”) very seriously. I'll apply the lessons I've learned during my apprenticeship at Northern, and one day, I'll pass them on too. I'll look forward to asking questions of the medical student during ward rounds, and I'll probably enjoy it when they stutter and make a fool of themselves... All in the name of tradition, of course.

Dr Darryl Raley completed his medical course as one of Northern Clinical School's Class of 2008 and started as an intern at Prince of Wales Hospital, Sydney in January 2009.

Northern Clinical School

Pam McLean Cancer Communication Centre



FROM LEFT: A/PROF FRAN BOYLE, JOANNE SHAW, DR PAUL HEINRICH, JENNIE DIBLEY, PROF STEWART DUNN

PROFESSOR STEWART DUNN, DR PAUL HEINRICH

In 1997, the Northern Clinical School established a centre to translate into clinical practice the extensive worldwide databank of research

findings in patient-doctor communication. As director of the centre, Professor Stewart Dunn undertook to find creative, effective ways to improve the standards and teaching of medical communication. In doing this, he could draw on substantial experience in research and teaching in medical education with the University of Sydney Medical Psychology Unit.

In 2001, the centre became the Pam McLean Cancer Communication Centre (PMC) named after the late wife of a donor. The PMC develops innovative educational programs to teach students, doctors, nurses and counsellors better ways to communicate with their patients and with each other. Dr Paul Heinrich, the PMC's Creative Director, designs creative and detailed learning environments, and trains professional actors to play the role of patients, drawing on his PhD in theatre and drama and extensive experience as a teacher and theatre practitioner. Medical Oncologist, Associate Professor Fran Boyle, networks with professional groups to identify emerging needs, and maintains links with the creative team

to ensure clinical integrity of the scenarios.

The standard of the centre's work is continually developing and is now widely regarded as national best practice in training in medical communication. The PMC now provides mandatory communication skills training for registrars in medical oncology and palliative care. Demand for the PMC's services has grown internationally, with our actors and facilitators travelling as far afield as Perth, Darwin, Hong Kong, Singapore, Europe and New Zealand. The centre has at this time, 36 professional actors trained to play the roles of patients and medical professionals.

The PMC presents a wide range of educational workshops and seminars that explore the communication challenges confronting specialists in the changing world of medicine, informed by our recent research on clinical trials consent, high cost therapies, complementary medicines and multidisciplinary teams. University of Sydney Medical Program students are fortunate to have access to this expertise as the team leads communication sessions at all clinical schools.

Relocation to level 7 of the new Kolling Building means the start of a new era for the PMC. The move has added much-needed resources, such as seminar and break-out rooms, and facilities for the video recording of training sessions. In collaboration with the Sydney Clinical Skills and Medical Simulation Centre, we have already expanded our research programs exploring psychophysiological responses of doctors to challenging communication tasks, and extended our scope for workshops that combine technical and communication aspects of medical care.



Staff Profile: Kay Worrell

Kay is an Executive Officer extraordinaire! Holding a Bachelor of Arts (Honours) degree in Linguistics from the University of Sussex and a postgraduate Diploma in Administration, she worked

at the University of Hertfordshire and in Central Administration at the University of Reading in the UK before emigrating to Australia in 1999 with her husband Mark.

Kay took a position as Admissions Officer at the University of Technology, Sydney, where her ability was quickly recognised and she progressed rapidly to the post of Admissions Manager and then Manager of the University Graduate School. She joined Northern Clinical School as an Education Support Officer in 2001, was appointed as Executive Officer in 2003 and is responsible for the organisation, running and educational administration of clinical teaching for all 280 of the school's medical students and for around 300 elective students annually.

The administration and education support team at Northern functions efficiently and smoothly because of Kay's exceptional managerial and

leadership skills, and her sound advice on operational matters is highly valued by academic staff both locally and in central Faculty.

Kay is expecting her second baby in May 2009 - a brother or sister for Luke aged 3, and we wish her well.

caption corner winner



Our caption corner winner is John Dodson with: 'It helps if you can dance to get into this gear.' John won a \$50 book voucher. Congratulations!

Tips & Traps

10 Tips for first year students

Social

1) Meet new people. The diversity in the Medical Program is one of its great strengths, so make the most of it and get to know the fascinating people who will make up your year. If you're not socially confident, throw yourself into situations that force you to meet people. Med Revue is hands down the best way to get to know your cohort, so when the producer starts asking for writers, actors, dancers, tech staff - stick your hand up! The more the merrier and it doesn't matter if you can't do any of those things, that's the beauty of Med Revue. First Year Camp is a great way to meet your cohort Friday 13th February at Heathcote Scout Camp.

2) Treasure your first PBL group, if a good one (most are) becomes your med family :-). No other PBL group ever compares!!

3) No-one outside of Med knows what it's like to be a Med student. Always keep this in mind, and don't let them harass you about the amount of social things you aren't doing.

Hospital

4) At hospital, seek out the enthusiastic tutors who love teaching

– they are absolutely invaluable!! First year is a great year to see absolutely anything in hospital, go to surgery/clinics/rounds with doctors, and throw yourself into a specialty that grabs you. And when asked difficult questions by consultants you can say "I'm just in first year." Brilliant!

5) Fancy pants for hospital days. Ties-optional. Shoes that show toenails - never.

Health

6) Keep fit. Exercise is a great way to relieve stress, and to get a natural high from endogenous endorphins! Participate in the Inter-Faculty Sports, held on Wednesday and teach those darn Education students a lesson.

7) Sleep is important! You can accomplish a lot more study without a sleep debt hanging over your head.

8) Medical Student Syndrome: As you move through your PBL cases, you may become aware of a condition widely known as "medical student syndrome", in which medical students find themselves diagnosing themselves with various conditions... conditions which tend to have an uncanny

resemblance to the case of the week.

However, if you really are concerned, get it checked out by someone a little further advanced along the medical path than you. GET A GP (General Practitioner)!

Study

9) Harrison's is THE BEST general medical text out, and if you invest in it, you won't need to buy as many Block-specific texts. Spend time using the textbooks in the library, work out which ones work for you, and then invest. The MedSoc Bookshop has a range of book lists for first year, gives a 25% discount to medical students and can order in any book you want (www.medsocbookshop.com.au)

10) Summarise! When you are studying a new topic as the case of the week, you can spend as much time as you want on it. But when you are revising for the exam, you will have two hours for each case. What you need is a compact summary of the topic that contains all the main points (e.g. definition, epidemiology, risk factors, pathogenesis, clinical features, investigations, treatment, and prognosis).

caption corner



WIN \$50 book voucher!

Can you think of a suitable caption? To enter this competition, please email your caption by 15 February 2009 to curriculummatters@med.usyd.edu.au.

WEB RESOURCES

- Sydney University Medical Society Homepage: <http://www.medsoc.usyd.edu.au/>
 - Sydney University's Library page: www.library.usyd.edu.au/databases
- Navigate your way to password access to the two most accessed, and in many instances required, online databases; Medline and the Cochrane Database of Systematic Reviews.
- E-books: <http://www.library.usyd.edu.au/subjects/medicine/links/etextsfull.html>
- Medical Textbooks available online by subject, including Harrisons.
- The Gnome Project: <http://thegnomeproject.com>

An interactive web resource for medical students created by a USydMP student. Share your internet study resources, create and share concept maps online.

MedSoc & SUDUA

MedSoc (Medical Society)



INEKE WEVER,
PRESIDENT



MICHAEL CATANACH,
DIRECTOR FUNCTIONS



RAHIL NAGPAL, 3RD
YEAR VICE PRESIDENT



SUSANNA LAM, 3RD
YEAR VICE PRESIDENT



HUGH HARRICKS, 4TH
YEAR VICE PRESIDENT



TIM COUGHLAN, 4TH
YEAR VICE PRESIDENT

What's the best thing about studying medicine?

That you get to make a difference to your patients and the broader community while doing an interesting and challenging job.

What's my advice for the new first years?

Get involved in the 'extras' of doing med - rural health, MedSoc, global health, Indigenous mentoring programs, Med Revue. This year will be crazy busy but

you'll love it.

Ineke Weber

Ineke's contact email:

iwev6767@gmp.usyd.edu.au

SUDUA (Sydney University Dentistry Undergraduate Association)



BREANNE KOTZ, SUDUA TREASURER, AND
MEREDITH OWEN, SUDUA PRESIDENT

On behalf of the 2009 SUDUA Committee, I would like to welcome all incoming dental

and medical students! I cannot believe that I have made it to my final year – seems as though my orientation was just the other week... I was the one who arrived late on the first day – giving me my first taste of Sydney Transport!

SUDUA, the dental students' association, has been in operation since before the 1930s and all students in the Faculty of Dentistry are members.

Committee members are elected each year and monthly meetings are held to discuss important academic and social matters.

For you first year dental students out there – this is your chance to get involved! Elections

for year and social representatives will be held in the upcoming weeks.

2009 promises to be an exciting year – and with the continued support of our sponsors, our social events will be better than ever.

I am looking forward to working with not only the entire SUDUA committee this year, but with the rest of my Senior Executive, Breanne Kotz, Treasurer (Email: bkot4609@usyd.edu.au), and Timothy Clipsham, Secretary (Email: tcli8263@usyd.edu.au).

Best of luck to everyone in the upcoming year!

Meredith Owen, SUDUA president, Contact email: eowe2816@usyd.edu.au

Important Dates 2009

2009 COMMENCEMENT DATES

Stage 1 Monday 9 Feb

Stage 2 Friday 13 Feb

Stage 3 Wed 21 Jan

Stage 4 Mon 23 March

* Please note that in Stage 3, there are assessments in the Specialty Blocks. The dates for these will be set by each Specialty Block at the beginning of each Term.

2009 ASSESSMENT DATES

Stage 1 Assessment Dates

Subject Date

GDMP1011 Tuesday 28 April

GDMP1021 Friday 21 August

GDMP1021 Thursday 26 November

Stage 2 Assessment Dates

GDMP2011 Friday 26 June

Subject Date

GDMP2022 Tuesday 17 & Wednesday 18 November

GDMP2021 Monday 30 November & Tuesday 1 December

Stage 3 Assessment Dates *

GDMP3022 Thursday 1 & Friday 2 October

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The University of Sydney