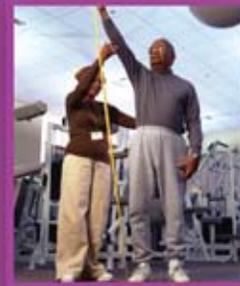




The University of the West Indies  
Cave Hill Campus



The Faculty of Medical Sciences

# Graduate Information Guide 2012-2013







# THE UNIVERSITY OF THE WEST INDIES

CAVE HILL CAMPUS

## FACULTY OF MEDICAL SCIENCES

GRADUATE INFORMATION GUIDE

2012-2013

[WWW.CAVEHILL.UWI.EDU/GRADSTUDIES](http://WWW.CAVEHILL.UWI.EDU/GRADSTUDIES)

Every attempt has been made to ensure that the information in this booklet is accurate at the time of printing. It is intended for students entering programmes in academic year 2012-2013.

Continuing students must refer to the programme regulations in force in their year of entry

Students should consult their Programme Coordinator where clarification is required.

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### **MISSION**

To advance education and create knowledge through excellence in teaching, research, innovation, public service, intellectual leadership and outreach in order to support the inclusive (social, economic, political, cultural, environmental) development of the Caribbean region and beyond.

### **VISION**

By 2017, the University will be globally recognised as an innovative, internationally competitive university, deeply rooted in all aspects of Caribbean development and committed to serving the diverse people of the region and beyond.

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## Message from the Dean

On behalf of the Faculty of Medical Sciences, I bid you a warm welcome to the Faculty at Cave Hill. As a proud graduate of the UWI who undertook part of his early training at the Queen Elizabeth Hospital, I look forward to working with you during your stay with us.

The UWI was founded more than 60 years ago, at the Mona Campus in Jamaica, on the site of an old sugar estate, used as the Gibraltar Camp for refugees in the Second World War. In 1948, a mere 33 students entered the university's first ever class. They were selected from some 600 applicants across the Caribbean and many have distinguished themselves and the University, as specialists, consultants, lecturers, family practitioners, public health leaders and professors in our alma mater.

In 1967-68 the teaching programme was expanded to include satellite clinical training sites at the Queen Elizabeth Hospital in Barbados and the Port of Spain Hospital in Trinidad.

It is now over 40 years since teaching began at Cave Hill and the Queen Elizabeth Hospital. In looking back we take pride in the splendid achievements of our alumni, and the progress made in health care, teaching and research. Our own Cave Hill alumni are leading in these successes, as evidenced by outstanding research work and a growing number of specialty graduate programmes.

The UWI now teaches medicine at four sites - Mona, St. Augustine, Nassau and Cave Hill - where the School of Clinical Medicine and Research recently became a full Faculty of Medical Sciences with entry of the first year class in September 2008.

The Cave Hill campus also offers nine postgraduate programmes – including Accident and Emergency Medicine and Surgery. Recently, emphasis has been placed on training in Primary Care and Public Health in response to the expressed needs of our Governments, and the need for development in the region.

The Faculty is committed to providing high quality facilities both at Cave Hill and at the Queen Elizabeth Hospital along with strong teaching and support services. Each graduate programme has an assigned Coordinator and there are staff advisors and counseling services to support you during your period of study.

***Professor Joseph M. Branday  
Dean, Faculty of Medical Sciences  
The University of the West Indies***

## About the Faculty of Medical Sciences

The Faculty of Medical Sciences at Cave Hill offers Doctor of Medicine (DM) programmes in the following specialties:

- Anaesthesia & Intensive Care
- Accident and Emergency Medicine
- Family Medicine
- Internal Medicine
- Obstetrics and Gynaecology
- Ophthalmology
- Orthopaedic Surgery
- Paediatrics
- Psychiatry
- Surgery (General)

There is a Diploma and Master of Science programme in Family Medicine offered to persons who do not have a post at the Queen Elizabeth Hospital, and since 2008-2009 the Faculty has offered a Master in Public Health.

The Faculty also offers research degrees in Epidemiology, Immunology, Medical Microbiology and Public Health. Entry to a research degree depends on the area of the applicant's research interest, funding and the availability of appropriate faculty supervision.

## FACULTY OFFICE & OFFICERS

### Cave Hill

**Telephone:** (246) 417-4694  
(246) 417-4703  
**Fax:** (246) 438-9170  
**e-mail:** [fms@cavehill.uwi.edu](mailto:fms@cavehill.uwi.edu)  
**Website:** <http://www.cavehill.uwi.edu/fms/>

### Queen Elizabeth Hospital

**Telephone:** (246) 429-5112  
**Fax:** (246) 429-6738

**DEAN:** **Branday, J. Michael**  
*Professor of Surgery*  
MBBS, MS (Surgery) (UWI), MSc  
Wales.

**GRADUATE STUDIES  
COORDINATOR** **Rosin, David**  
*Professor of Surgery*  
MS, FRCS, FRCS(Ed), FICS, FCCS  
(Hon), DOHM

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

### PROGRAMME COORDINATORS

DM Anaesthesia &  
Intensive Care **Kumar, Areti Yasodananda**  
MBBS, Dip (Anaes), MD (Anaes)

DM Accident &  
Emergency **Watson, Harold**  
MBBS, MSc (Emer Med), DM (Emer  
Med) (UWI)

DM Internal Medicine **Hennis, Anselm**  
*Professor of Medicine  
& Epidemiology*  
MBBS (UWI), MSc, PhD (Lond),  
FRCP, FACP

DM Family Medicine **Adams, Peter**  
MBBS, MSc, DM (Fam Med), (UWI)

DM Psychiatry **Emmanuel, Maisha**  
MBBS, DM (Psych) (UWI), Sc. (Birm)

DM Paediatrics **Lashley, P. Michele**  
MBBS, DCH, DM (Paed) (UWI),  
FRCP Edin

DM Surgery **Rosin, R. David**  
MS, FRCS, FRCS(Ed), FICS, FCCS  
(Hon), DOHM

DM Ophthalmology **Gibbons, D. Clive**  
MA, MB BCh Camb, LRCP, DO Lond,  
MRCS, MRCP, FRCS Ed

DM Obstetrics &  
Gynaecology **McIntyre, Garth**  
MBBS FRCOG

DM Orthopaedic Surgery    **Jones, Jerome**  
MD (Cornell)

MPH  
*Professor of Public Health  
& Epidemiology*    **Unwin, Nigel**  
BA BM BCh (Oxon) MSc (Manc.)  
MSc Epid., DM (Oxon) FRCP (Ed)  
FFPH (UK)

MPhil/ PhD Epidemiology    **Hennis, Anselm**  
*Professor of Medicine  
& Epidemiology*    MBBS (UWI), MSc (Lond), PhD  
(Lond), FRCP, FACP

**and**

*Professor of Public Health  
& Epidemiology*    **Unwin, Nigel**  
BA BM BCh (Oxon) MSc (Manc.)  
MSc Epid., DM (Oxon) FRCP (Ed)  
FFPH (UK)

MPhil/ PhD Medical    **Gittens-St. Hilaire, Marquita**  
Microbiology    BSc, PhD (UWI)

MPhil/ PhD Immunology    **Landis, R. Clive**  
PhD

MPhil/ PhD Public Health    **Unwin, Nigel**  
*Professor of Public Health  
& Epidemiology*    BA BM BCh (Oxon) MSc (Manc.)  
MSc Epid., DM (Oxon) FRCP (Ed)  
FFPH (UK)

# GENERAL INFORMATION FOR GRADUATE STUDENTS

The official regulations handbook for all Graduate Degrees and Diplomas is found on-line at [www.cavehill.uwi.edu/gradstudies/documentlibrary](http://www.cavehill.uwi.edu/gradstudies/documentlibrary)

Students should familiarize themselves with the regulations, a few of which are highlighted here, and also note the following administrative information:

## **Pre programme workshops/seminars**

If a candidate has been accepted to a graduate programme but, in the opinion of the Department, his/her academic background is deficient in an essential area, he/ she may be required to undertake pre-programme workshops/ seminars/ courses.

The Programme Coordinators will notify all candidates to whom this requirement applies.

## **Registration**

Every student is required to register within the first 3 weeks of **every** semester until his/her degree has been awarded.

Registration is a two-part process:

1. The selection of courses on-line through Cave Hill On-Line (CHOL), and
2. The payment to the Bursary of all fees generated.

## **Electives**

All programme electives are **not** offered every academic year and students are required to select from those on offer.

## **Re-registration for Research Paper/ Internship/ Practicum**

The requirement to register every semester continues while students are doing the Thesis/ Research Paper/ Practicum/ Internship programme element. If a student registers for the Research Paper/ Internship /Practicum and does not complete this in the first semester of registration, regulations require him/ her **to re-register** every subsequent semester until the Paper/ Report has been submitted and graded.

If a student experiences any difficulty registering or re-registering it is his/ her responsibility to inform the School for Graduate Studies and Research within the first 3 weeks of the semester by email to [gradstudies@cavehill.uwi.edu](mailto:gradstudies@cavehill.uwi.edu) so that problems can be resolved.

## **Withdrawal**

If at the end of the published registration period in Semester 2 our records show that a student has not completed a registration for the academic year, and that student is not on approved Leave of Absence, he/ she will be *Deemed to have Withdrawn* from the programme and his/ her name will be removed from the student register.

To be considered for re-entry to a programme after withdrawal requires re-application to the programme.

## **Examinations**

Unless otherwise stated, examinations for courses in all programmes will be held at the end of the semester in which the courses were taught.

# GRADUATE PROGRAMMES IN MEDICAL SCIENCES

## MPhil/PhD EPIDEMIOLOGY

### Introduction

The aim of the MPhil/PhD programme is to support the development of epidemiologists who are capable of assuming leadership roles in academia, the health sector, government, industry and private enterprises nationally and internationally.

They will be expected to have a sound knowledge of epidemiological concepts, principles, methods, sources of data and relevant ethical issues; be able to work with and interpret existing data, read and understand and evaluate the scientific literature relevant to epidemiology and their areas of expertise, develop testable hypotheses and set out relevant research questions and design and develop a feasible research proposal, exhibit practical skills - including participant selection, data collection, study logistics, construction of a data set, data analysis skills and scientific writing skills.

### Objectives

The overall goal is to increase capacity in the Caribbean and wider region of individuals who through their expertise in epidemiology will contribute to the control and prevention of disease and the promotion of health.

### Entry Requirements

#### **To the MPhil Programme**

Candidates will normally require a Masters degree completed within the past 5 years. This could be from a range of relevant programmes, including Epidemiology, Public Health, Nutrition, Social Sciences and Family Medicine. The applicant must have successfully completed, with a grade of B+ (UWI) or equivalent, Masters courses in at least two of the following:

1. Epidemiology -1 (Basic concepts of Epidemiology)
2. Epidemiology - 2 (Detailed study designs, critical appraisal and

synthesis of epidemiological evidence)

3. Quantitative research methods
4. Introduction to biostatistics and use of analytical statistical software

Potential applicants who do not have a Masters degree will be encouraged to register for a Masters in Epidemiology or in Public Health and to reapply on its successful completion.

Exceptionally there may be applicants who completed the Masters courses more than 5 years before their application but who are able to demonstrate (providing suitable evidence) that they have maintained competency in two or more of the above areas, such as through teaching and/or through involvement in research.

#### **Direct Entry to the PhD Programme**

To be admitted *directly* to the PhD programme, applicants must have completed at a recognized university the following Masters courses to at least a grade B+ (UWI) or equivalent within the past 5 years:

1. Epidemiology -1 (Basic concepts of Epidemiology)
2. Epidemiology - 2 (Detailed study designs, critical appraisal and synthesis of epidemiological evidence)
3. Quantitative research methods
4. Introduction to biostatistics and use of analytical statistical software
5. Completion of a quantitative research project and paper, contributing at least 25% to the total credit rating of the Masters.

It is expected that most applicants who have completed these courses will have done so as part of a Masters in Epidemiology, or a Masters in Public Health. However, applicants may have undertaken other Masters programmes that included these or equivalent courses. Possible examples of such programmes include MSc in Nutrition and Family Medicine and the MPhil in Biomedical or Social Sciences. The curricula for these candidates' programmes as well as their transcripts will be examined and a determination made as to the necessary qualifying courses on an individual basis. In some cases it may be recommended that these candidates complete an MSc in Epidemiology or MPH and reapply to the programme.

Note that in many taught Masters degrees the research project contributes less than 25% of the overall credit rating, and even if the Masters is in a highly relevant area (e.g. Epidemiology or Public Health) this would not enable direct entry to the PhD programme.

Thus it is anticipated that most candidates wishing to undertake the PhD will register initially for the MPhil.

The MPhil degree normally takes a minimum of two years of intensive research on a full-time basis. A PhD degree usually takes a minimum of three years full-time. Part-time studies may also be pursued

### **Course of study**

Students in the MPhil and PhD degree programme are required to successfully:

1. Complete a minimum of six (6) credits of coursework for MPhil nine (9) credits of coursework for PhD,
2. Present seminars (2 for MPhil/3 for PhD), and
3. Submit a thesis.

### **Courses**

All students must have completed, with a minimum grade of B+, Masters courses in Epidemiology 1, Epidemiology 2, Quantitative Research Methods, and Biostatistics (including use of statistical software). Those students who did not fully meet this requirement on admission must complete these courses before being able to progress.

In addition, MPhil candidates are required to complete 6 credit hours of taught courses, and PhD candidates 9. Candidates, in liaison with their supervisor(s), are able to choose from all relevant Masters courses offered within the University of the West Indies. They may also count towards these credit hours relevant approved courses and training seminars offered by other educational institutions.

### **Compulsory Seminar Presentations**

Candidates are required to write and present one departmental seminar each academic year on a topic arising out of their research, as well as to field questions put to them afterwards.

### **Thesis**

Candidates are required to present and defend a Thesis of acceptable scope and quality for the degree. The Thesis must follow the guidelines set out in the University's Thesis guide.

### **Award of the Degree**

The successful completion of the required coursework, the compulsory Seminar presentations and the Thesis will lead to the award of the Degree.

The final grade in the MPhil / PhD programmes is Pass / Fail

## **LIST OF COURSES**

### **As determined necessary**

PBHE 6100	Biostatistics
PBHE 6200	Epidemiology 1
PBHE 6210	Epidemiology 2
PBHE 6900	Research Methodology

### **Core for all students depending on their programme**

GRSM 7001	MPhil Research Sem 1
GRSM 7002	MPhil Research Sem 2
EPDM 7000	MPhil Epidemiology Thesis
GRSM 8001	PhD Research Seminar 1
GRSM 8002	PhD Research Seminar 2
GRSM 8003	PhD Research Seminar 2
EPDM 8000	PhD Epidemiology Thesis

Other courses as approved by the students' supervisors.

# MPhil/PhD IMMUNOLOGY / MEDICAL MICROBIOLOGY

## Entry Requirements

MPhil Candidates require at least an Upper Second Class Honours degree with a strong background in the discipline into which entry is being sought. All research students must register initially for the MPhil degree but may later, with suitable progress, be upgraded to register for the PhD degree. In cases where the candidate already has an MPhil degree (or equivalent), direct entry to the PhD is possible.

## Availability of Expertise and Resources

Admission is contingent upon whether candidates have a thesis proposal compatible with the expertise and resources available in the Faculty of Medical Sciences.

## Course of study

Students in the MPhil and PhD degree programme are required to successfully:

1. Complete a minimum of six (6) credits of coursework for MPhil nine (9) credits of coursework for PhD,
2. Present seminars (2 for MPhil/3 for PhD), and
3. Submit a thesis.

## Courses

Students in the MPhil and PhD degree programme should discuss with their supervisor suitable courses which would satisfy the credit requirements. Courses should be completed in the first year.

## Compulsory Seminar Presentations

For each seminar, candidates are required to write and present a paper to be photocopied and distributed before hand on a topic arising out of their research, as well as to field questions put to them afterwards.

## Thesis

Candidates are required to present and defend a Thesis of acceptable scope and quality for the degree. The Thesis must follow the guidelines set out in the University's Thesis guide.

## Award of the Degree

The successful completion of the required coursework, the compulsory Seminar presentations and the Thesis will lead to the award of the Degree.

The final grade in the MPhil / PhD programmes is Pass / Fail

## LIST OF COURSES

### Core for all students depending on their programme

GRSM 7001 MPhil Research Sem 1

GRSM 7002 MPhil Research Sem 2

IMMU 7000 MPhil Immunology Thesis

MEDC 7100 MPhil Medical Microbiology Thesis

GRSM 8001 PhD Research Seminar 1

GRSM 8002 PhD Research Seminar 2

GRSM 8003 PhD Research Seminar 2

IMMU 8000 PhD Immunology Thesis

MEDC 8020 PhD Medical Microbiology Thesis

Other courses as approved by the students' supervisors.

# MPhil/PhD in PUBLIC HEALTH

## Introduction

Public Health is the science and art of preventing disease, prolonging life and promoting health through the organized efforts of society. Public health draws on a broad range of disciplines and as such the research needed to inform, guide and evaluate public health measures is broad, including both qualitative and quantitative methods.

The MPhil/PhD programme has been designed to provide advanced training in Public Health Research methods and contribute new knowledge to help guide Public Health interventions within the region. Candidates will initially register for the MPhil degree, and those who wish to progress to a PhD will be allowed to do so on evidence of satisfactory progress, which includes assessment at an upgrade seminar as per University regulations.

## Objectives

The overall aim of this programme is to support the further development of leadership in Public Health research within the Caribbean and wider region. This overall aim will be achieved through meeting the following objectives.

- 1) To provide world class training in the application of quantitative and qualitative research methods to Public Health
- 2) To increase capacity in Public Health leaders within academia, government and private sectors who individually are:
  - a) Expert in the application of one or more research methodologies relevant to public health
  - b) Expert in the critical evaluation of a breadth of research methodologies that are relevant to public health;
  - c) Capable of initiating, designing and leading research programmes to address Public Health problems
- 3) To generate new knowledge to guide Public Health interventions within the Caribbean. In meeting this aim and objectives we will be responding to national and regional needs identified by Governments and Intergovernmental Organizations for strengthening capacity in Public Health.

## Entry Requirements

All candidates will initially register for the MPhil degree, and those who wish to progress to a PhD will be allowed to do so on evidence of satisfactory progress, which includes assessment at an upgrade seminar.

The entry requirements to this programme are a Masters degree in a relevant health related area, ideally an MPH, completed within the previous 5 years. The Masters degree must have included a research project in which the applicant obtained a B plus average, and have included courses in at least one of: quantitative research methods, qualitative research methods, biostatistics, basic epidemiology, advanced epidemiology, in which they also obtained a B plus average.

## Duration

The minimum period of full time study for an MPhil degree is 2 years with up to an additional one year to write up, and for a PhD degree is 3 years with up to an additional 2 years to write up

## Programme Structure / Course of Study

Students in the MPhil and PhD degree programme are required to successfully:

1. Complete a minimum of six (6) credits of coursework for MPhil nine (9) credits of coursework for PhD,
2. Present seminars (2 for MPhil/3 for PhD), and
3. Submit a thesis.

## Courses

Candidates are required to complete the following courses: epidemiology 1 (PBHE 6200) and 2 (PBHE 6210), biostatistics (PBHE 6100), quantitative and qualitative research methods (PBHE 6900 and PBHE 6930 respectively). The programme entry criteria require that candidates must have completed at least one of these courses (or their equivalent), prior to acceptance. They will be required to complete the courses they have not already taken. Candidates who have completed most or all of these courses prior to programme entry will be able to choose, in liaison with their supervisor, other courses to study that are relevant to their PhD topic and will make up the taught course requirement.

### **Compulsory Seminar Presentations**

Candidates are required to give at least one departmental seminar per year on a topic arising out of their research, as well as to field questions put to them afterwards.

### **Thesis**

Candidates are required to present and defend a Thesis of acceptable scope and quality for the degree. The Thesis must follow the guidelines set out in the University's Thesis guide.

### **Award of the Degree**

The successful completion of the required coursework, the compulsory Seminar presentations and the Thesis will lead to the award of the Degree.

The final grade in the MPhil / PhD programmes is Pass / Fail

## **LIST OF COURSES**

### **As determined necessary**

PBHE 6100	Biostatistics
PBHE 6200	Epidemiology 1
PBHE 6210	Epidemiology 2
PBHE 6900	Research Methodology
PBHE 6930	Qualitative Research Methods

### **Core for all students depending on their programme**

GRSM 7001	MPhil Research Sem 1
GRSM 7002	MPhil Research Sem 2
PBHE 7000	MPhil Public Health Thesis
GRSM 8001	PhD Research Seminar 1
GRSM 8002	PhD Research Seminar 2
GRSM 8003	PhD Research Seminar 2
PBHE 8000	PhD Public Health Thesis

Other courses as approved by the students' supervisors.

## **GENERAL REGULATIONS FOR THE DOCTOR OF MEDICINE (DM) DEGREE**

1. The Doctor of Medicine (Specialist) graduate programme is offered by the Faculty of Medical Sciences and is designed to produce doctors with the skills and knowledge in the discipline at the academic level of Lecturer and the professional level of Consultant. It is offered in several specialities.
2. The applicant should be:
  - i. a graduate in Medicine of a University or Medical School recognized by the University of the West Indies
  - ii. registerable in the territory or territories in which the programme is being done (Criteria for registration should be obtained from the relevant medical council)
3. Applicants will be eligible for entry after completing their internship.
4. Subspecialties may have specific requirements – see individual regulations.
5. The length of the programme ranges from 4 to 7 years depending on the discipline and is pursued through an academic and clinical programme specific to the discipline.
6. For all disciplines it is necessary to be attached to a certified hospital or service requiring regular contribution to patient care. The general regulations of the Graduate School apply, but there are also specific regulations governing the programme in each discipline.
7. Award of the degree is made after satisfactory completion of the final examination which usually requires the presentation of a research based project(s) and case book or research paper along with satisfactory performance in written and practical/oral examinations. Candidates may elect to do either the research paper or case book.
8. Entry into the final examination is dependent on satisfactorily completing the intermediate stages and project and case book/paper requirements and as detailed in the individual regulations.
9. The intermediate stages vary by programme but generally consist of a Part 1 and Part 2 with some having a 3rd Part and 4th Part. Part 1 is devoted to the upgrading of the basic knowledge and skills required to proceed to the more advanced part of the course and the acquiring of more

- advanced academic and research skills. Part 1 is of varying duration.
10. Entry to the Part 2 will be dependent on satisfying the requirements of the Part 1. The date of entry will normally be January or July and is determined by the date when the candidate begins to work in a recognised post in an accredited hospital.
  11. Application to enter the programme may be made before securing such a post. The applicant may then receive from the School of Graduate Studies and Research, on the recommendation of the Faculty Committee for Graduate Studies, provisional acceptance for entry to the programme contingent on the obtaining of an accredited post. After the successful applicant has secured an accredited post, the date of entry will be fixed by the School of Graduate Studies and Research.
  12. The applicant will be informed of the date of entry by the relevant Campus Registrar.
  13. For purposes of the above two paragraphs, the successful applicant a candidate must furnish evidence of being in a recognised post.
  14. The programme will normally take place at the University Hospital of the West Indies or at institutions in the contributing territories recognised by the University for this purpose; but up to one year's elective period may be spent at institutions in or out of the Caribbean (approved by the appropriate Specialty Board) provided prior approval is obtained from the Board.
  15. Institutions may be recognized for all or part of the programme. The Dean of the Faculty of Medical Sciences will keep a list of approved institutions and appointments for the guidance of candidates.
  16. Details of the programmes may be obtained from the Chairmen of the Specialty Boards.
  17. Students who have completed studies in recognised hospitals or institutions may apply to the Specialty Board for exemption from the appropriate section of the programme where such exemptions are provided for in the regulations.
  18. All students will be assessed semi-annually, the results of which must be transmitted through the Faculty committee to the Campus committee for Graduate Studies in January and July each year.
  19. Students with unsatisfactory records will be encouraged to improve; but if poor performance persists they will not be allowed to complete the programme.
  20. Candidates pursuing graduate degrees shall be examined by means of one or more of the following:
    - Written examinations;
    - Coursework as set out in the individual regulations,
    - Oral examinations; and/or
    - Clinical examinations
  21. Before admission to any Examination, candidates must be certified by their supervisors as having completed the relevant part of the programme.
  22. The Part 1 Examination must be completed within one calendar year of the first attempt.
  23. No candidate will be allowed more than two attempts at any one examination.
  24. Where these are included in the Examination process of any Specialty, the regulations for their presentation will be those of the University which govern the preparations of these reports and those specified in the specialty regulations.
  25. A candidate who has been absent from the programme for more than six weeks in any one year will be considered to have failed to fulfill the programme's requirements for that year and will be required to extend the time for completion of their programme.
  26. A candidate may apply for leave of absence from the programme for academic or personal reasons. Application for leave of absence should be addressed to the Chairman of the Campus Committee, through the Faculty Committee for Graduate Studies after approval by the Specialty Board. The application must be accompanied by a statement of the reason for the application.
  27. Leave of absence shall not be granted for more than one academic year in the first instance. A candidate may apply to the Campus Committee for Leave of Absence for a second year, but further extensions will be at the discretion of the Board.
  28. Students who absent themselves without permission may have their names removed from the register of graduate students.
  29. Each DM student must spend 46 weeks each year in the programme and may have a total of six weeks vacation leave per annum (3 weeks in every 6 months) except when rotating through subspecialties. During rotations (second year) students can only take one week out of every rotation.

# DM (ACCIDENT AND EMERGENCY MEDICINE)

## Introduction

The postgraduate Accident and Emergency Medicine Programme is a four-year residency programme consisting of two parts. The programme takes place either at the University of the West Indies or at institutions in the contributing territories recognised by the University for this purpose.

The specialty board in Surgery is in overall charge of the programme under the general supervision of a Programme Coordinator, nominated by the Head of Department and appointed by the Specialty Board in Surgery. Each student will be assigned to a supervisor who will advise the student as to choice or assignment of rotations, the elective period, direction in the conduct of their research and all other relevant matters.

## Entry Requirements

The applicant must be:

- A graduate in Medicine of a University or Medical School recognized by the University of the West Indies.
- Fully registerable in the territory or territories in which the programme of study will be undertaken. (Criteria for registration should be obtained from the relevant medical council.)

Candidates are required to submit a written application and may be required to attend an interview to be eligible for selection to the programme.

## Programme Structure/ Course of Study

Six months each year are spent in Emergency Room(A&E) rotations. The other six months are spent rotating through relevant subspecialty areas including anaesthesia, child health, internal medicine, surgery, orthopaedics, obstetrics and gynaecology, family medicine, ENT, ophthalmology, radiology, Emergency Ambulance Services and psychiatry. Anaesthesia is mandatory as an early rotation in the first year. However, there is flexibility in the sequence of the rotations in the other disciplines.

Candidates are encouraged to do one of the two three-month A&E periods in the fourth year at an approved emergency room in a regional or international teaching hospital. A maximum of 6 months maybe spent outside of the Caribbean (A&E and elective). Overseas elective rotations can be undertaken with the approval of the Coordinator of the Accident and Emergency Medicine Programme.

## Yearly rotations for DM Accident and Emergency Medicine programme

Year 1	Year 2	Year 3	Year 4
A&E (6)	A&E (6)	A&E (6)	A&E (6)
Anaesthetics (3)	Psychiatry / O&G (3)*	Paediatrics / PICU / NICU (3)#	Family Medicine / ENT / Ophthalmology (3)#
Surgery / Orthopaedics (3)*	Medicine / MICU / Cardiology (3)#	EAS / Radiology (3)*	A&E Elective (3)

# rotation of 4 weeks each area

\*rotation of 6 weeks each area

In addition, all Accident and Emergency Medicine residents should complete American Heart Association Advanced Cardiac Life Support (ACLS) and American College of Surgeons Advanced Trauma Life Support (ATLS) courses by the end of their first year of training. The Paediatric Advanced Life Support (PALS) or Advanced Paediatric Life Support (APLS) course should be completed during the second year of the programme.

## Exemption

(Should be read in conjunction with the general DM regulations)

Candidates who have completed periods of work experience in relevant areas at recognized hospitals or Institutions may apply to the specialty board for exemption. This experience may be in Accident & Emergency Medicine, Psychiatry, Internal Medicine, Orthopaedic Surgery, Family Medicine, Surgery, Child Health / Paediatrics, Obstetrics and Gynaecology and Anaesthesia. Exemption is not automatic and should not be assumed.

### Method of Assessment

Student performance will be assessed (by observation, orally or in writing) at the end of each rotation and will be recorded on prescribed forms. A satisfactory standard of in-course assessments is mandatory prior to taking the Part I and Part II examination.

Those with unsatisfactory records will be encouraged to improve and a warning letter issued; counselling and or remedial work may be recommended. An unsatisfactory performance in a rotation may require that it is repeated. If poor performance persists, the student will not be allowed to complete the programme and will be required to withdraw.

Entry to Part II is dependent on satisfactory completion of the Part I.

The following two requirements must also be met before the Part II examination.

1. Reach satisfactory standard in on-going assessments.
2. Submission of a casebook and a research report

All DM Accident and Emergency Medicine candidates must submit both of the following to the Specialty board or Coordinator of the postgraduate programme at least six months before the final Part II examination:-

- 1) A case book of ten cases - these cases should reflect the range of pathology seen in the practice of Accident and Emergency Medicine, and up to three may be rare cases of unique relevance that may have important educational content for journal publication **AND**
- 2) A research project - this must be discussed with the Programme coordinator by the start of the second year of the residency programme.

The format of the case book/research project report should conform to the University regulations dealing with the preparation of projects and dissertations. Each submission book or project should not exceed 15,000 words but must not be less than 10,000 words.

The cases /research project must be typewritten and printed on one side only of good quality white bond paper 8½" x 11" (standard letter size) with left hand margin of 2". The top, bottom and right hand margins should not be less than 1". The same grade paper

should be used throughout the research project. Case reports should follow the format of case reports submitted for journal publication, namely: introduction, case history, discussion, conclusion and references. References should follow the format of the West Indian Medical Journal. The case reports should be of high quality suitable for publication in a peer reviewed journal.

Following submission of the work, the examiners may:

- i) Accept the work allowing the student to proceed to the examination, **OR**
- ii) Reject the work, with recommendations regarding changes additions or revisions necessary for acceptance. The examiners will indicate a deadline for resubmission of the work.

The casebook/project report should be submitted for assessment at least six months before the date of the final examination. If the work is found to be unsatisfactory and requires major revision the student will not be allowed to sit the final examination and a new date will be set. A final decision on acceptance of the casebook/research project will be communicated to the candidate at least 6 weeks before the final examination.

### Examinations

Before admission to any examination, candidates must be certified by the Programme Coordinator as having completed relevant parts of the programme.

There are two examinations, one each at the end of the Part I and the Part II. The clinical exam must be passed in all sections for the candidates to be awarded the DM degree in Accident and Emergency Medicine. Persistent demonstration of dangerous behaviour during the clinical or oral examination is an absolute ground for failure irrespective of grades up to that point.

### Completion of the Programme and award of Degree

Students will be considered as having completed the programme and eligible for the award of the DM degree when the following requirements are met

- 1) Satisfactory performance of all rotations
- 2) Acceptance of the Case book and research project
- 3) Satisfactory performance in the Part I and Part II examinations

The final grade in the DM Accident and Emergency is Pass / Fail

## LIST OF COURSES

### Recommended

MEDC 6900 Essential Health Research Skills

### Compulsory

MEDC 6705 DM Accident and Emergency Part I

MEDC 6710 DM Accident and Emergency Part II

## DM (ANAESTHESIA AND INTENSIVE CARE)

### Introduction

The DM Anaesthesia and Intensive Care programme is a four year graduate course which aims to provide the graduate with the knowledge and skills to function as a consultant anaesthetist and intensivist, equipped for independent practice in hospital-based and stand-alone facilities.

The programme is run under the general supervision of a Director, nominated by the Head of the Department and appointed by the Committee for Graduate Studies. The Director will normally be the chair of the Specialty Board in Anaesthesia and Intensive Care. Each student will be assigned to a supervisor, who is a member of the Specialty Board in Anaesthesia and Intensive Care. The supervisor will provide academic guidance as to the choice or assignment of rotations, the elective period and direction in the conduct of their research and all other relevant matters.

The Specialty Board in Anaesthesia and Intensive Care is in overall charge of the programme. The sole and final authority on all matters concerning the programme is the Campus Board for Graduate Studies and the University Senate.

### Entry Requirements

(See general regulations – Doctor of Medicine)

Applicants will be eligible for entry after completing their internships. Candidates will be required to submit a written application and may be required to attend an interview to be eligible for selection to the programme.

On acceptance to the programme there will be a six month probation period during which the candidate's performance will be assessed at regular intervals. Any candidate who fails the overall assessment during this period of probation will be required to withdraw from the programme.

### Programme Structure/ Course of Study

The programme will be a minimum of four years (see Exemptions) from the date of entry. At least three years of the programme must be spent in the Commonwealth Caribbean. Throughout the

programme, candidates must hold recognised posts in accredited hospitals or be on an 'elective' approved by the Board for Graduate Studies and Research through the Faculty Committee for Graduate Studies or "equivalent bodies". A minimum of three (3) months in the first two (2) and three months in the last two (2) years must be spent at the University-affiliated hospital of the campus territories. The remaining time may be spent in accredited hospitals.

The programme consists of TWO parts:

### **Part I**

The first Part is of TWO year's duration. During the FIRST year a candidate working in those hospitals where only adults are treated, must spend no less than three months in an accredited paediatric hospital. Conversely, for candidates working in a hospital where only paediatric patients are treated, no less than six months must be spent in an accredited adult multi-disciplinary hospital. There must be a minimum of three months exposure to obstetric anaesthesia during the first year. At the end of the FIRST year the candidate will have to take an internal exam. Only after successful completion of this exam the candidate will be allowed to progress to the SECOND year.

Provided the in-course assessments are satisfactory, the Part I examination is taken at the end of the SECOND year. Admission to the second part depends on a satisfactory assessments and performance in the Part I Examination.

### **Part II**

The second part is of TWO year's duration. It may include a period not exceeding one year, in the penultimate year only, spent as an elective, providing that approval has been obtained from the Faculty Committee for Graduate Studies and the Board for Graduate Studies and Research beforehand. Such approval must be obtained at least six months prior to the commencement of the elective period. The elective year may be spent in a hospital, which can provide the candidate with experience not readily available in the hospital to which he/she is employed.

A maximum of three (3) months may be spent in a course of study in an affiliated area e.g. research methodology, epidemiology, teaching methods, medical administration etc. provided that prior approval has been obtained from the Specialty Board in Anaesthesia and Intensive Care.

During the SECOND part, rotations through all anaesthesia subspecialties must be undertaken. These include cardiothoracic, faciomaxillary, otorhinolaryngology, paediatric, obstetric, ambulatory and neuroanaesthesia. Rotation through intensive care, preanaesthetic services, acute and chronic pain services are also a requirement. Teaching and training in teaching methods and research methodology are integral components of the programme. All trainees should appreciate the need for ongoing research in the field and are encouraged to cooperate with research efforts of department/division members.

A list of accredited hospitals may be obtained from the Graduate Studies Section in the Dean's Office. Some are accredited only for the first part of the course; others are accredited to provide training in the second part of the course for a specified time. To gain credit for such a period the candidate must submit a satisfactory assessment report from their supervisor.

### **Exemptions**

Candidates who have completed periods of study or work experience in recognized hospitals or institutions in non-Commonwealth Caribbean territories may apply to the Campus Committee for Graduate Studies for exemption from an appropriate part of the course. Exemptions in the programme can be recommended by the Specialty Board in Anaesthesia and Intensive Care only after a period of review and assessment of the student's performance within the programme. Candidates must have achieved the level at which proposed exemptions will put them.

Students having completed at least TWO year training in anaesthesia and hold the Primary FRCA, Primary FRACI, or equivalent may apply and be granted exemption from Part I. Students who hold the Fellowship in Anaesthesia of the British, Irish or Australian college, or the certificate of the American Board of Anaesthesiology or the Fellowship in Anaesthesia of the Royal College of Physicians in Canada or such other degrees or diplomas as the University (the Faculty Committee for Graduate Studies) may accept, may be exempted from the Part 2 of the programme.

In order for such students to be eligible to sit the Part II examination, they are required to spend a minimum of TWO (2) yearS in the programme and fulfill all the requisite aspects of the Part II of the programme i.e. an acceptable research project submitted six (6) months prior to the final examination, an acceptable case log/minimal competencies and satisfactory assessments.

All requests for exemptions should be made in writing by the student to the University Registrar through the Chairman of the Faculty Committee for Graduate Studies. This request will then be forwarded to the Board of Graduate Studies and Research through the Campus committee.

### **Assessment**

Continuous assessment of the candidate's performance is carried out by his/her supervisor and recorded every 6 months. The supervisor will be a member of the Specialty Board in Anaesthesia and Intensive Care.

If the assessments are found to be unsatisfactory, the Specialty Board may recommend one or more of the following:

- a) Counseling/academic warning in writing
- b) Remedial work
- c) Repeating the unsatisfactory rotations
- d) Withdrawal from the programme, if poor performance persists

### **Case Book / Research Report**

All students must submit to the Campus Committee for Graduate Studies through the Director of the Postgraduate programme, at least six months before the final (Part II) examination,

- a) A research project. This should form a distinct contribution to the knowledge of the subject presented. It must be of satisfactory literary standard and should attain standards suitable for publication in a peer reviewed journal. It should not exceed 20,000 words but must not be less than 8,000 words and must follow the University's Guide for the Preparation of Theses, Research Papers and Project Reports.

The cases/research project/project report must be typewritten and printed on one side only of good quality white bond paper (usually of 20lb. weight) 8½" 11" (Standard Letter Size), with left hand margin of 2". The top, bottom and right hand margins should not be less than 1". The same grade of paper should be used throughout the report.

Students are advised to discuss the preparation of research reports with their Supervisor(s) while the book is in preparation and not wait until it is completed. These research reports could provide the opportunity for the student to put his/her clinical experience in the form of a research project which could be later developed for publication. From these records, the examiners will assess the critical faculties, powers of observation and the level of evaluation of various techniques used in anaesthesia & intensive care by the students.

Following the submission of the work, the examiners may:

- i) Accept the work and the student proceed to the examinations, **OR**
- ii) Accept the work with modification, which must be carried out in the time specified and resubmitted, **OR**
- iii) Reject the work with recommendations regarding changes, additions, or revisions necessary for acceptance. A date for re-submission will be determined by the examination board in Anaesthesia and Intensive Care.

The research project should be submitted for assessment at least six months before the date of the final examination. If the work is found to be unsatisfactory and requires major changes, the students will not be allowed to sit the final examination and a new date will be set. The Part II examination must be attempted for the first time within one year of the acceptance of the research project.

### **Case log & minimal competencies**

Students are required to keep a record of all anaesthetics and procedures performed. In addition they are required to complete a predetermined list of minimal competency in cognitive and procedural skills felt to be fundamental to the training of specialists in anaesthesia and intensive care.

The following three (3) requirements must be completed before the Part III examination:

- A satisfactory standard of in-course assessments
- Case log & minimal competencies
- Research Project

## **Examinations**

Before admission to any examination, candidates must be certified by their supervisors as having completed the relevant parts of the programme.

There are three examinations, end of FIRST year Internal Assessment Exam, Part I and Part II (DM Anaesthesia & Intensive Care). They are normally held twice per year in May/June and November/December and rotate amongst the three university campuses.

The end of first year internal assessment examination is held at the end of the first year and comprises a multiple choice paper

On successful completion of the end of first year exam, continuation in the training programme will be dependent on the recommendation of the Specialty Board based on its continuous assessment and the results of the end of first year examination. The candidate must sit the Part I examination within 2 years after progressing to the second year.

Students are normally expected to present themselves for the first examination being held following completion of the various Parts. In exceptional circumstances (such as ill health), a student may request permission from the Board for Graduate Studies and Research to defer the date of the first sitting. Candidates must register for the examination at the appropriate time.

Should any candidate fail the examination of any Part at the first attempt, completion of this part must be within one calendar year of the first attempt.

No student will be allowed more than two attempts at any one examination.

Failure after the second attempt will necessitate withdrawal from the programme. A third attempt may be granted by the board of graduate studies in accentuating circumstances based on the recommendation from the Programme Director for DM (Anaesthesia and Intensive Care) Re-admission of candidates will be in accordance with the University regulations for Graduate Diplomas and Degrees.

Candidates must conform with the University Regulations on Examinations for Higher Degrees

## **Completion of the Programme**

Students will be considered as having successfully completed the programme when the following FOUR requirements have been met:

- Satisfactory performance of all rotations
- Acceptance of their certified case log/minimal competencies
- Acceptance of the Research Project
- Satisfactory performance in the Part I and II examinations

Failure to complete the programme in the prescribed times will require withdrawal from the programme.

The final grade in the DM Anaesthesia and Intensive Care is Pass/ Fail

## **LIST OF COURSES**

### **Recommended**

MEDC 6900 Essential Health Research Skills

### **Compulsory**

MEDC 6623 DM Anaesthesia and Intensive Care Part I

MEDC 6624 DM Anaesthesia and Intensive Care Part II

# DIPLOMA, MSc AND DM (FAMILY MEDICINE)

## **Introduction and Objectives**

The objectives of this programme are

- 1) To train postgraduate students of medicine in a wide range of knowledge, skills and attitudes appropriate to the practice of Family Medicine in the Community.
- 2) To impart and enhance knowledge in the personal, family and social aspects of health, illness and disease.
- 3) To enhance professional competence, values and behaviours that are inherent to the speciality of family medicine.
- 4) To enhance the skills of critical reflection and assessment of professional activities, enabling them to meet the changing health needs of patients, families, and their communities, and the changing demands of health care in modern societies.
- 5) To promote skills in effective, continuing medical education, to revise past knowledge, and to keep abreast of advances in medical science and technology appropriate to primary care.
- 6) To enhance knowledge and skills in health promotion, prevention and risk management.

## **Entry Requirements**

### ***Diploma and MSc***

To be eligible applicants must fulfill the entry requirements of the Faculty of Medical Sciences, University of the West Indies, Cave Hill. Applicants are expected to have completed their internships. Further applicants are expected to be employed in General Practice/ Family medicine for the duration of the programme.

### ***DM***

Candidates must be fully registered medical practitioners in one of the territories of the Commonwealth Caribbean or in any country associated with the University of the West Indies where the facilities are approved by this institution for a part or the whole of the period of training.

## **Programme Structure/ Course of Study**

### ***Diploma***

The Diploma is a 2-year course. Students failing at the first attempt are allowed an additional attempt making 3 years the maximum time to complete the Diploma. Twelve modules are completed during the Diploma. These are delivered by distance education methods. Assignments are completed and graded for each module. Students must attend both Family Medicine and Specialist clinic sessions. They are expected to have a job in a suitable Family Practice setting (public sector or private) for the duration of the course. The student keeps a portfolio containing all assignments and activities.

### ***MSc***

Students will not be allowed to proceed to the MSc until the Diploma has been obtained. The MSc requires the completion of additional year. Students who do not successfully complete the MSc year at first attempt will be allowed one additional attempt. Four modules and assignments, as well as a research proposal are completed during the year. Students attend both Family medicine and Specialist clinic sessions, and are expected to have a job in a Family Practice setting for the duration of the course (public sector or private). The student keeps a portfolio containing all assignments and activities.

### ***DM***

The DM in Family Medicine is a four year residency programme. Students may apply for entry directly into the DM, and are expected to work under supervision in an approved post. Currently there are posts at the Queen Elizabeth Hospital reserved for such students. Successful students are awarded the MSc after 3 years and the DM after 4 years. Students who successfully complete the Diploma and MSc as individual programmes may be considered for entry into the final year of the DM programme Admission is not automatic.

The DM consists of three parts.

Part 1 of the DM programme is of two years duration. It is identical to the Diploma programme, except that students work in the Queen Elizabeth Hospital post. Students must successfully complete Part 1 before being permitted to advance to Part 2.

Part 2 of the DM programme is of one year's duration. It is identical to the MSc programme except that students work in the Queen Elizabeth Hospital post. It will last one year after attainment of Part 1. Students must successfully complete

Part 2 before being permitted to advance to Part 3. Students who do not successfully complete Part 2 at first attempt will be allowed one additional attempt. Students who successfully complete part 2 are awarded the MSc Family Medicine.

Part 3 is of one year's duration spent in an approved training area and includes the preparation of either:

- i) A project report; OR
- ii) A case book of twenty cases with commentaries.

The alternative must have been previously agreed on and the work carried out under the guidance of a supervisor appointed by the Board.

Candidates who have been fully registered as medical practitioners for more than one year may apply for exemption from the relevant parts of the course. Candidates who have been registered for five or more years may apply for modification of the training programme, but their practice organisation must be acceptable to the Board and they will be required to attend special courses (including attendance at approved hospitals) specified by the Board. Exemption is not automatic and should not be assumed,

The student is to keep a portfolio containing all assignments and activities.

### **MODULES - Diploma / DM Family Medicine**

(All modules are worth 2 credits and will last 10 weeks)

#### **Year 1**

- Teaching and Learning in Primary Care
- Evidence Based Medicine
- The Consultation and Communication
- Medical Ethics and the Doctor – Patient Relationship
- Health Promotion, Screening and Risk Assessment
- Chronic Disease in Primary Care

#### **Year 2**

- Human Sexuality and STDs
- Child Health
- Gender Issues / Women's Health
- Care of the Elderly
- Mental Health / Counselling
- Medico-legal issues

## **LIST OF MODULES**

### **Master of Science / DM Family Medicine Year 3**

#### **Compulsory**

(All modules are worth 2 credits and will last 10 weeks)

Research Methodology  
Statistics/ SPSS Training

Year-long supervised Research Project (6 credits). Candidates are required to submit a report with a maximum of 15,000 words on the project.

#### **Select 2 electives – one from each group:**

(All modules are worth 2 credits and will last 10 weeks)

Note that a module will usually only be offered if a minimum of 4 students request it.

- Evidence based medicine
- Teaching and Learning
- Management for Primary Care Physicians
- Counselling
- Minor Surgical Procedures
- Therapeutics
- Geriatric Medicine
- Epidemiology

#### **Portfolio**

A portfolio is to be kept.

This is a file in which students will keep

- 1) All assignments from the completed modules,
- 2) Evidence of attendance of clinic sessions,
- 3) Evidence of attending CME sessions, and a report of each session attended, and
- 4) Reflections

#### **Clinical sessions - Diploma, MSc Family Medicine**

The student should be working in an approved Family Practice for the duration of the course.

The student must complete 120 hours of Family Practice clinic sessions during the first two years for which 4 credits will be assigned. This would normally be made up of 30 four-hour sessions

(15 sessions per year). In year three, 30 four-hour sessions will have to be completed.

If available the student may opt to attend a weekly four-hour session in an approved Family Medicine Centre. The student sees patients and is supervised by an experienced qualified Family Physician.

Alternatively the student may opt to remain in his/her own practice. In this case the time allocated for clinic sessions will be spent meeting with his/her supervisor. A review of practice organization and patient management will be done. In addition the implementation of a Family Practice audit will be done. A presentation of the audit result will be made to the other students and be included in the portfolio.

### Specialist Clinic Sessions

The following 60 four hour sessions must be completed.

Sessions can consist of seeing patients in the outpatient clinic, attending ward rounds, night duty, and minor operations. An example is given below, but the exact order in which the sessions are done can vary. Supervisors where possible will be drawn from UWI faculty. Objectives for these sessions have to be worked out with the supervisors, so that the students can obtain the maximum benefit.

#### Year 1

Internal Medicine	8 sessions
Paediatrics	8 sessions
Dermatology	5 sessions
General surgery	4 sessions
Orthopaedics	3 sessions

#### Year 2

Obstetrics & Gynaecology	8 sessions
Psychiatry	6 sessions
Accident and Emergency	5 sessions
ENT	3 sessions

#### Year 3

Ophthalmology	3 sessions
Elective	7 sessions

### Clinical sessions DM family Medicine

During the 4-year residency programme students will spend 30 months working in Family Medicine (normally at the General Practice Unit of the Edgar Cochrane Ployclinic), and 3 month specialist rotations each in Medicine, Paediatrics, Surgery, Obstetrics and Gynaecology, and Psychiatry (normally the Queen Elizabeth Hospital). In addition there is a 3-month elective period where the student can work in a setting of his/her choice providing it has been approved by the programme coordinator. The student will also attend clinic sessions in Dermatology, ENT, Ophthalmology and Orthopaedics.

### ASSESSMENT

#### Diploma

This is assessed at the end of year 2.

Portfolio*	30%
Examination (OSCE)	40%
Examination (written)	30%
<i>Total</i>	<i>100%</i>

The final grade in the Diploma is Pass/Fail

#### MSc

The candidate would have successfully completed the diploma, and in addition at the end of year 3 is assessed as follows.

Module assignments	20%
Examination (written)	40%
Defence of project report	40%

The final grade in the MSc is Pass/Fail.

#### DM

Following the submission of the project report or case book at the end of the fourth year, the examiner may:

- Accept the work, the trainee being then eligible for the award of the degree of DM Family Medicine, OR
- Reject the work, and they will then indicate what additional or new work needs to be carried out and when the work must be resubmitted.

The final grade in the DM is Pass/Fail

### **\*Portfolio Grading Criteria**

#### *Module assignments - 80 marks.*

Each module will be given a mark. This will be determined by averaging the marks given for the assignments for that module. The marks for the individual modules will be then averaged, and converted to a mark out of 80 for the final Portfolio mark.

#### *Clinic sessions*

Clinic sessions will be assessed by means of an evaluation form that will record attendance and performance at clinic sessions. Assessment is Pass/Fail.

#### *CME sessions - 10 marks*

Evidence that the student has been attending well selected CME courses both local and abroad), which have relevance to primary care. – 6 marks

Evidence that there has been learning because of CME exposure. – 4 marks

#### *Reflections - 10 marks*

Evidence that students reflect on his/her learning, trying to relate learning to previous knowledge and experience, and evidence that the student is using reflective pieces as an instrument for growth. – 6 marks

Evidence that the student has experienced positive, expected change because of this course- change in attitude towards medicine, their learning, patients, and the health care system. – 4 marks

Students are expected to pass all modules and the OSCE to obtain the Diploma and the MSc

Upon completion of a module, if a student does not achieve a passing grade the student will be allowed to repeat the assignments of that module. If the student still does not achieve a passing grade, the student would be deemed to have failed the module and will have to repeat the module in another year.

Students who have failed three modules in one year will normally be required to withdraw from the programme.

Students can therefore fail up to 4 modules and remain in the two-year Diploma programme and a further 2 modules in the MSc year. They may sit the examinations, but will have to subsequently redo

the failed modules. They need to pass all modules to be awarded the Diploma and MSc

Students will not normally be allowed to continue the Diploma course beyond 3 years. They will not normally be allowed to continue the MSc year beyond 2 years.

## **LIST OF COURSES**

### **Diploma / DM Family Medicine**

#### **Diploma**

MDFA 6000 Diploma in Family Medicine

#### **Master**

MEDC 6642 MSc in Family Medicine

#### **DM**

MEDC 6667 DM Family Medicine Part I

MEDC 6668 DM Family Medicine Part II

MEDC 6669 DM Family Medicine Part III

# DM (INTERNAL MEDICINE)

## Introduction

The DM Internal Medicine is a 4 year programme aimed at doctors who have obtained an undergraduate degree in Medicine from a recognized University, who have successfully completed their pre-registration training and have post internship experience in Internal Medicine. The programme is under the general supervision of the Head of the Department or his nominee who will provide guidance as to the choice or assignment of rotations, the elective period and direction of the conduct of their research, and all other relevant matters.

The aim of the D.M. in Internal Medicine is to train doctors in the specialty of Internal Medicine to a level that allows them to provide clinical and academic leadership, and administrative support to their respective Medicine Departments. Successful D.M. candidates will practice at the level of consultants in General Internal Medicine.

The Specialty Board in Internal Medicine is in charge of the programme.

## Entry Requirements

(See general regulations for DM degree)

Graduates of Medical Schools approved by the Medical Council of Barbados are eligible for entry. Candidates must have successfully completed their internship and be fully registered with the Medical Council of Barbados.

The date of entry will normally be January or July as determined by the date when the candidate begins to work in a recognized post at the Queen Elizabeth Hospital, Bridgetown. Admission to the programme is contingent on the candidate securing a post.

## Programme Structure / Course of Study

The four-year D.M. programme is a full-time residency programme, of which approximately two thirds of this time is spent under the direct supervision of consultants in General Internal Medicine and related subspecialties. Other elements of the programme consist of rotations through acute care specialties of Internal Medicine.

The programme consists of two parts as follows:

### **Part 1**

This part is of two year's duration and includes one year in General Internal Medicine in approved institutions where the students will be working in both in-patient and an out-patient settings under the supervision of senior residents and consultants.

During the second year the resident is assigned to a rotation of sub-specialties at approved hospitals or institutions. The residents pursue 10 week rotations in the any of the following subspecialties: CNS/Neurology, Cardiology, ICU, Gerontology, Haematology, Gastroenterology, Pulmonology, Nephrology, Endocrinology, and HIV Medicine. While on secondment to the above specialties candidates will be under the direct supervision of the consultant in the specialty.

During the second year the Residents will formulate a research proposal under supervision.

### **Part 2**

During third year, candidates will have the opportunity to spend 12 months in an elective specialty of their choice in an approved training post in Barbados or abroad. Alternatively, candidates could undertake a research project under an approved supervisor. High level research leading to peer-reviewed publications is anticipated

During the fourth year (final year) the resident returns to the training Hospital for further intensive training in General Internal Medicine. The final year of training may be deferred by 1 year if the resident engages in a recognised research programme leading to a postgraduate academic degree in Medicine (MSc., MPhil, PhD)

### **Exemption**

Candidates who have completed all or part of another graduate course in Internal Medicine or who have gained relevant experience at this level in a recognized institution may apply for exemption from the first part of the D.M. programme. The relevant Board of the University will consider such applications on a case-by-case basis.

## Evaluation

Each resident in the DM (Medicine) programme will undergo formal assessment by Faculty **every 6 months**. Assessment will be based on attendance, performance and participation in patient care, teaching and learning opportunities, and satisfactory improvement in knowledge and skills (including clinical, communication, research and self-directed learning).

This appraisal process will include input from clinical supervisors, and criterion-referenced clinical and oral examinations. **Residents will not be allowed to progress in the programme unless their performances meet predetermined minimum standards.** After each assessment the Programme Leader will meet with each resident to provide feedback, identify weaknesses and suggest remedial action. Numeric, categorical and narrative assessment records will form the basis of this assessment.

Additionally, residents will be assessed by clinical consultants with whom they rotate using standardized qualitative instruments which will be included in the candidates' progress reports.

If the assessments are found to be unsatisfactory, the Specialty Board may recommend one or more of the following:

- a) Counseling
- b) Remedial work
- c) Repeating the unsatisfactory rotations
- d) Withdrawal from the programme, if poor performance persists

## Research Project

All Students will be required to do a research project or research thesis for publication. This project should have been previously agreed on by the Specialty Board during the Part I programme and the project commenced in the third year under the guidance of a supervisor appointed by the Specialty Board or the Head of the Department or the Director of the programme.

The research project report should not exceed 20,000 words and the format should conform to the University regulations dealing with the preparation of projects and dissertations. The project reports must be typewritten and printed on one side only of good quality white bond paper (usually of 20lb. weight) 8½" x 11" (Standard Letter Size), with left hand margin of 2". The top, bottom

and right hand margins should not be less than 1". The same grade of paper should be used throughout the thesis.

Following the submission of the work, the Head of the Department or Director of the programme will appoint reviewers or examiners who may:

- i) Accept the work allowing the student to proceed to the examination **OR**
- ii) Reject the work, with recommendations regarding changes, additions, or revisions necessary for acceptance. The examiners will indicate a deadline for re-submission of the work.

The research project should be submitted for assessment at least six months before the date of the Part 2 examination. If the work is found to be unsatisfactory and requires major revision the students will not be allowed to sit the final examination and a new date will be set.

## Examinations

The DM Internal Medicine Examination consists of two parts: Part I and Part 2.

The Part I examination is taken at the end of 2 years. Once the candidates have progressed satisfactorily through the first 2 years of the training programme (including satisfactory clinical and oral evaluations conducted at half yearly intervals), they are allowed to take the Part 1 DM examination.

This consists of:

- a) Written papers (essay and multiple choice questions)
- b) A clinical examination (objective structured format)

The candidate is required to pass both parts of this examination. Students will not be allowed to proceed to year 3 of the programme until they have passed the Part I Examination. Students are allowed two attempts at the Part I examination.

The Part 2 examination will be taken at the end of the year 4 of the programme. Having passed the Part 1 examination and then satisfactorily completed years 3 and 4 in a similar manner to years 1 and 2 above, the candidate progresses to Part 2 of the examination.

This examination consists of:

- a) Written papers (essay and multiple choice questions)
- b) A clinical examination (objective structured format)
- c) An oral examination.

Candidates must pass all parts of the examinations ie Paper I, Paper II, Clinical and oral. Candidates who fail to satisfy the examiners in Part 2 of the examination at the first attempt will be required to make one further attempt within a year and if unsuccessful will be required to withdraw.

The final grade in the DM Internal Medicine is Pass/Fail.

## LIST OF COURSES

### Recommended

MEDC 6900 Essential Health Research Skills

### Compulsory

MEDC 6655 DM Internal Medicine Part I

MEDC 6656 DM Internal Medicine Part II

# DM (OBSTETRICS & GYNAECOLOGY)

## Introduction

The DM Obstetrics and Gynaecology is a four year programme. The programme is under the general supervision of a Director, nominated by the Head of the Department. The Director will normally be Chair of the Specialty Board in Medicine. Each student will be assigned to a supervisor, who is a member of the Specialty Board. The supervisor will provide academic guidance as to the choice or assignment of rotations, the elective period and direction of the conduct of their research and all other relevant matters.

The Specialty Board in Medicine is in charge of the programme.

## Entry Requirements

(See general regulations – Doctor of Medicine)

In addition to the general regulations, candidates will not normally be eligible for entry until at least one full year after completing their internship and must have had at least six months' in post internship experience in general surgery and general medicine or child health in an approved hospital. Six months experience in Obstetrics and Gynaecology (post internship) will count for up to three months' experience in general surgery. Experience in Accident/Emergency/Casualty (post internship) will count for up to three months' experience in general medicine or surgery.

## Course of Study

The first part is of one year's duration and admission to the second part depends upon a satisfactory performance in the Part I Examination at the end of this period.

The second part is of three years duration and may include a period of six months in a related discipline or in an approved research project provided that approval has been obtained from the Specialty Board beforehand.

At least three years of the course must be spent in the Commonwealth Caribbean. Throughout the course, the student must hold recognised posts in accredited hospitals or be on an "Elective" approved by the Specialty Board.

### **Exemption**

No exemption will be given for training in a DGO Programme.

### **Assessment**

Students will be assessed (by observation, orally or in writing) at the end of each rotation and will be recorded on prescribed forms. A satisfactory standard of in-course assessments is mandatory prior to taking the apart I and Part II examination.

Those with unsatisfactory records will be encouraged to improve and a warning letter issued; counseling and/or remedial work may be recommended. An unsatisfactory performance in a rotation may require that it is repeated. If poor performance persists, the students will not be allowed to complete the programme and will be required to withdraw.

Entry to Part II is dependent on satisfactory completion of the Part I.

### **Case Book / Project**

All students must submit to the Specialty Board or Director of the Postgraduate programme at least six months before the final (Part 2) Examination, either:

- a) A casebook of twenty cases (ten Obstetrical and ten Gynaecological) and two major commentaries limited to 3,000 words each. The major commentaries should be based on a clinical research project approved by the student's supervisor and must include references to the literature. Students are advised to discuss the preparation of case records and commentaries with their consultant or supervisor, while the book is in preparation and not wait until it is complete. From these records, the examiners will assess the critical faculties of candidates, their powers of observation and their evaluation of various methods of treatment. The long obstetrical and gynaecological commentaries offer students the opportunity to study in detail, conditions of their own choice and to express views formed from personal investigation and on a study of the literature. These commentaries could provide the opportunity to conduct a research project on clinical material within the department to be later developed into a publication.

#### **OR**

- b) A project report or a research paper. The alternative must have been previously agreed on by the Specialty Board and

the work carried out under the guidance of a supervisor appointed by the Board.

Following the submission of the work, the examiners may

- a) Accept the work, and the candidate proceed to the examination, **OR**
- b) Reject the work, and they will then outline what additional or new work is required and when the work should be resubmitted.

### **Examinations**

Examinations are in two parts: Part I and Part 2 (Final). No candidate will be allowed more than two attempts at either examination.

The Part I Examination is held at the end of the first year and comprises: a written paper and an oral examination in Obstetrics and Gynaecology and related disciplines in the basic sciences.

The Part 2 Examination consists of:

- a) Two written papers
- b) A clinical examination which will include presentation and discussion of Obstetrical and Gynaecological cases
- c) An oral examination

The Part 2 Examination must be taken within one year of the submission of the project report or case book.

The final grade in the DM Obstetrics & Gynaecology is Pass/Fail.

## **LIST OF COURSES**

### **Recommended**

MEDC 6900 Essential Health Research Skills

### **Compulsory**

MEDC 6630 DM Obstetrics & Gynaecology Part I

MEDC 6635 DM Obstetrics & Gynaecology Part II.

# DM (OPHTHALMOLOGY)

## **Introduction**

The DM Ophthalmology programme is a 3 part programme which is spread over a minimum of six years. Research will be an integral part of the programme. The candidate will be expected to cover all aspects of the medicine, therapeutics and surgery for the eye, adnexae and visual pathways.

The final year of the programme should be undertaken as an elective at an institution outside of the Caribbean.

## **Entry Requirements**

The regulations are similar to the DM Surgery (General) except for the course of study and examinations as indicated below.

## **Course of Study**

### **Part 1**

This will involve the Basic sciences studies with an emphasis on the eye. It will be a 2 year programme leading to an examination in which an adequate standard of performance is required before the candidate can proceed to the second part of the programme.

### **Part II**

During this period the candidate will continue to gain clinical and surgical ophthalmology skills leading to an examination in which an adequate standard of performance is required before the candidate can proceed to the third part of the programme.

### **Part III**

This final part consists of 3 years enhancing surgical skills, at least 2 of which must be spent locally and an elective one year period which must be spent overseas.

## **Examinations**

### **Part 1**

The Part 1 examinations will be undertaken after 2 years in the programme and consist of:

Section A: Principles of Ophthalmic Surgery  
Section B: Anatomy of Head and Neck (including Embryology and Neuro anatomy)  
Basic and Ocular Pathology including microbiology and biochemistry.  
Physiology of eye, adnexae, CNS including related general physiology.  
General Medicine in association with Ocular pathology

Candidates must pass Section A and pass all parts of Section B to qualify for entry into the second part of the programme.

Candidates who have not completed the Part 1 exam within one calendar year of the first sitting of the examination will normally be required to withdraw from the programme

Section A Exam consists of 4 Essay questions (3 hours)

Section B Exam consists of 3 papers of 100 MCQ's each (each paper will be 3 hours). The 3 papers shall be Anatomy (Head and Neck), Ocular Physiology, and Ocular Pathology.

### **Part II**

This exam will be undertaken at the end of the 3rd year of the programme

Section A: Basic Optics (Principles of Instrumentation) & Theory of Refraction (MCQs)

Section B: Practical Refraction exam & OCSE

### **Part III**

The Part III examination will be undertaken at the end of the fellowship. This will consist of 2 parts:

- 1) 2 Papers : MCQs/ Essay
- 2) Oral Examination

No candidate will be allowed more than 2 attempts at any one examination. Failure after the second attempt will necessitate withdrawal from the programme. The student may not reapply to the programme after withdrawal. The final Part III examination must be taken within one year of submission of the project or case book (20 cases).

## **Assessment**

(see regulations for DM Surgery (General))

### **Log Book**

All candidates must maintain a surgical logbook, which will be assessed quarterly

### **Casebook**

Each candidate must collect 20 cases for the case book. These cases must cover the breadth of Ophthalmology including at least one case from each sub specialty:

- 1) Cataract and Refractive Surgery
- 2) Cornea
- 3) Glaucoma
- 4) Paediatrics
- 5) Uveitis
- 6) Orbit, Oculoplastics, Adnexal and Lacrimal
- 7) Neuro ophthalmology
- 8) Ocular motility/ Strabismus
- 9) Medical Retina
- 10) Surgical Retina

See Regulations for DM Surgery (General) for details on case book.

Following the submission of the work, the examiners may

- i) Accept the work allowing the student to proceed to the examination OR
- ii) Reject the work, with recommendations regarding changes, additions or revisions necessary for acceptance. The examiners will indicate a deadline for re-submission of the work.

The casebook should be submitted for assessment at least six (6) months before the date of the final examination. If the work is found to be unsatisfactory and requires major revision the student will not be allowed to sit the final examination and a new date will be set.

### **Completion of the Programme**

Students will be considered as having completed the programme when the following FOUR requirements have been met:

- 1) Satisfactory performance for each year of the programme
- 2) Acceptance of certified list of operative procedure
- 3) Acceptance of the Case Book
- 4) Satisfactory performance in the Part I, Part II and Part III examinations.

Failure to complete the programme in the prescribed times will require withdrawal from the programme.

The final grade in the DM Ophthalmology is Pass/Fail.

## **LIST OF COURSES**

### **Recommended**

MEDC 6900 Essential Health Research Skills

### **Compulsory**

MEDC 6661 DM Ophthalmology Part I

MEDC 6662 DM Ophthalmology Part II

MEDC 6663 DM Ophthalmology Part III

# DM (ORTHOPAEDIC SURGERY)

## Introduction / Objectives

The objective of this programme is to provide the instructional framework which allows the candidate (Orthopaedic Resident) to acquire knowledge, understanding, skills, and attitudes to a level appropriate for an Orthopaedic Surgeon Specialist who has been fully prepared to begin his/her career as an independent orthopaedic surgeon.

The goals of the program are:

- i. To produce competent, dedicated and compassionate surgeons.
- ii. To produce effective communicators, capable of interacting with patients, parents, relatives, peers and other health care professionals.
- iii. To train to international standards and also to meet the needs of the Caribbean.

## Entry Requirements

To enter the DM Orthopaedic Surgery programme at the Cave Hill Campus the applicant must have successfully completed the 2-year DM Surgery (General) Part I. Eligible candidates will be invited to submit an application to the program, and selected candidates will be interviewed.

Note that DM Surgery (General) Part I is equivalent to DM Orthopaedic Surgery Part I so successful candidates will proceed directly to DM Orthopaedic Surgery Part II.

## Programme Structure/ Course of Study

The DM Orthopaedic Surgery residency is a four year program. Residents will be attached primarily to the Orthopaedic Service at the Queen Elizabeth Hospital (Barbados) and will be employed as house officers by the Queen Elizabeth Hospital. The 3rd year of the program is an elective year. With prior approval of the Orthopaedic Program director, the resident may spend all or part of this elective year at approved hospitals outside of Barbados.

The resident will be exposed to all aspects of adult and paediatric trauma and non-traumatic musculoskeletal conditions.

The assigned consultant will always be primarily responsible for the care of patients. At all levels, the orthopaedic resident will be supervised by consultants. For all surgical procedures there will be pre-operative discussion with a consultant.

Under the supervision of the orthopaedic consultants, residents will participate maximally in:

- a) Inpatient surgical and non-surgical management of orthopaedic conditions
- b) Orthopaedic out-patient clinics
- c) Core Orthopaedic Curriculum conferences
- d) Morbidity and mortality conferences
- e) CPC presentations
- f) Journal Club (once/month)
- g) Orthopaedic Department monthly audit

The Core Orthopaedic Curriculum will be covered through a sequence of conferences and Journal Club. These interactive conferences may include didactic presentations, case discussions, exam question reviews, and other topics.

DM Orthopaedic Surgery Residents will be required to thoroughly prepare and present topics, which are assigned by the Programme Director. These topics will be presented at the Core Orthopaedic Curriculum conferences and the Morbidity and mortality conferences.

## DM Orthopaedic Surgery, Year 1

During the first year, residents will be required to:

- attend sessions on Basic Statistics Research Methodology offered by the Faculty of Medical Sciences. Emphasis during this year will be on basic orthopaedic principles and all aspects of musculoskeletal trauma.
- under the supervision of a consultant, participate in a research project related to musculoskeletal trauma and present that research paper at the annual Professor E. R. Walrond Symposium (July, Queen Elizabeth Hospital).

- begin collection and writing up of cases for the Case Book of operative procedures that they have participated in.

The resident, upon completion of the 1st year will be expected to demonstrate a satisfactory level of knowledge, clinical and technical competence.

### **DM Orthopaedic Surgery, Year 2**

In year 2 emphasis will be on Paediatric Orthopaedics, Adult Reconstruction and Spine.

Upon completion of this year the resident will be expected to demonstrate a satisfactory level of knowledge, clinical and technical competence - verified by direct questioning and observation of clinical practice in specified areas, improvement in surgical skills (trauma) and by increased responsibilities through:

- Proper management of all of the patients on the service
- Co-ordination, if necessary of the patient's care with colleagues in other disciplines
- Supervision of junior residents and medical students
- Interaction with relatives, hospital administration and all members of hospital staff

Residents continue to compile a surgical log book and maintain their case book.

### **DM Orthopaedic Surgery, Year 3**

On completion of Year 3 the resident will be expected to demonstrate a satisfactory level of knowledge, clinical and technical competence verified by direct questioning and observation of clinical practice in specific areas, and assist/perform surgeries for specified conditions.

### **DM Orthopaedic Surgery, Year 4**

On completion of Year 4, the resident:

1. Should be able to perform the following:
  - Primary joint replacements – hip and knee
  - Arthroscopy – Knee and shoulder
  - Adult trauma
  - Surgery on common non-traumatic adult conditions

2. Should have performed 150 major cases
3. Should have knowledge of the principles of deformity correction and limb lengthening
4. Should have detailed knowledge of the surgical approaches to most orthopaedic conditions
5. Should be able to discuss the management of a patient in a logical and detailed manner tailored to the patient's specific needs
6. Must fulfill all the requirements for eligibility of DM Orthopaedic Surgery Part II.

The resident must have submitted his/her casebook at least six months prior to the DM Orthopaedic Surgery Part II, have presented a research paper at a local and/or international conference, and prepared for the final examination.

### **Assessment**

The performance of the residents will be assessed (by observation, orally or in writing) at the end of each rotation (6 months) and recorded on prescribed forms. A satisfactory standard of in-course assessment is mandatory prior to taking the Part II examination. The resident with an unsatisfactory evaluation in a rotation will be required to repeat the rotation. The resident will be informed in writing of his poor evaluation and the consequences of obtaining two unsatisfactory assessments. Counseling and/or remedial work may be recommended. If poor performance persists, the resident will not be allowed to complete the program and will be required to withdraw. At the six months evaluation, residents will be given the opportunity to discuss their assessments.

### **DM Orthopaedic Surgery Part II Examination**

The following requirements must be completed before the resident is eligible to take the Part II examination:

- a) Two research papers
- b) Satisfactory performance on all rotations
- c) Acceptance of their certified list of operative procedures
- d) Acceptance of Case Book

The Part 11 Orthopaedic examination will consist of:

- a) Two written papers
- b) An oral examination which may include clinical material

The final grade in the DM Orthopaedic Surgery is Pass/Fail.

## **LIST OF COURSES**

### **Recommended**

MEDC 6900 Essential Health Research Skills

### **Compulsory**

MEDC 6612 DM Orthopedic Surgery Part II

## **DM (PAEDIATRICS)**

### **Introduction**

The DM Paediatrics programme is a four year graduate course which aims to provide the graduate with the knowledge and skills to function as a consultant paediatrician, equipped for independent practice in the community and hospital based settings.

### **Entry Requirements**

(See general regulations – Doctor of Medicine)

Evidence of undergraduate medical qualification from an institution acceptable to the Faculty of Medical Sciences, The University of the West Indies, must be provided.

Candidates should have a minimum of three months post internship experience in the practice of paediatrics at an approved hospital under constant supervision. This three month period is additional to the period of three months of paediatric training required during the internship period.

### **Course of Study**

There are two parts to the course – Part 1 (years 1 and 2) and Part 2 (years 3 and 4).

During the first two years of training, the resident will have three month rotations in in-patient, neonatal care, and ambulatory settings. The core content of training includes basic sciences as applied to general paediatrics, normal growth and development, common primary care problems and emergencies, common subspecialty problems, public health issues and basic research methods and skills.

Years 3 and 4 of training encompass learning of the pathophysiologic mechanisms related to growth, development and disease, clinical exposure and training in the subspecialties, development of leadership skills and professional qualities, completion of the required research project or case book and a six month elective period.

On acceptance to the programme there will be a six month probation period during July to December of year 1. During this period the candidate's performance will be assessed at regular intervals. Any

candidate who fails the overall assessment during this period of probation will be required to withdraw from the programme.

A minimum of six months of the four years must be spent in the Section of Child Health, Mona, at the University of the West Indies. The remaining time may be spent in an approved unit in Jamaica. Trainees are required to participate in daily seminars and teaching rounds.

An elective period of six months is to be taken during years 3 to 4 after successfully completing the Part 1 examination. This elective period must be approved by the Specialty Board prior to commencement.

### **Assessment**

Continuous assessment of the candidate's performance is carried out by his/her supervisors, who are members of the Specialty Board in Child Health).

If the assessments of the candidate are found to be unsatisfactory the Child Health Specialty Board may recommend one or more of the following:

- a) Counseling
- b) Remedial work
- c) Repeat the unsatisfactorily done rotations
- d) Withdrawal from the programme

### **Examination**

Trainees will be eligible to sit the Part 1 examination at the end of year 2 having had satisfactory assessments for that period. Continuation in the training programme will be dependent on the recommendation of the Specialty Board based on its continuous assessment and the results of the Part 1 examination.

Candidates will be eligible to sit the Part 2 examination two years after successful completion of the Part 1 examination but not greater than four years after at the next available examination. The candidate must have satisfactorily completed the DM programme. The candidate must submit a research project on Child Health or related area at least six months before the completion of the Part 2 programme.

The research project should form a distinct contribution to the

knowledge of the subject presented. It must be of satisfactory literary standard and should attain standards suitable for publication in a peer reviewed journal.

The research project should not exceed 20,000 words and must follow the University's Guide for the Preparation of Theses, Research Papers and Project Reports.

The acceptance of the research project by the Specialty Board is a requirement for eligibility to sit the Part 2 examination.

Following submission of the project the examiners may

- i) Accept the work
- ii) Reject the work, and outline what additional or new work needs to be carried out and when the work should be resubmitted.

### **Examination Format**

The Part 2 examination must be attempted for the first time within one year of the acceptance of the research project.

The candidates are allowed two attempts at the Parts 1 and 2 examinations. Failure after the second attempt will necessitate withdrawal from the programme. The student cannot reapply to the programme after being required to withdraw.

The final grade in the DM Paediatrics is Pass/Fail.

## **LIST OF COURSES**

### **Recommended**

MEDC 6900 Essential Health Research Skills

### **Compulsory**

MEDC 6617 DM Paediatrics Part I

MEDC 6622 DM Paediatrics Part II

# DM (PSYCHIATRY)

## **Introduction**

The DM Psychiatry is a four year graduate programme which aims to provide the graduate with the knowledge and skills to function as a consultant equipped for independent practice in hospital-based stand-alone facilities and community mental health.

The programme is delivered in four parts over a minimum of four years from the date of entry. At least three years of the programme must be spent in the Commonwealth Caribbean. Throughout the programme, candidates must hold recognized posts in accredited hospitals or be on an elective approved by the Board for Graduate Studies an Research through the Faculty Committee for Graduate Studies or 'equivalent bodies'.

The programme is run under the general supervision of a Director of the Residents Programme, nominated by the Head of the Department and appointed by the Committee for Graduate Studies. The Director will normally be the chair of the Specialty Board in Psychiatry. Each student will be assigned to a supervisor, who is a member of the Specialty Board in Psychiatry.. The supervisor will provide academic guidance as to the choice or assignment of rotations, the elective period and direction in the conduct of their research and all other relevant matters.

The Specialty Board in Psychiatry is in overall charge of the programme. The sole and final authority on all matters concerning the programme is the Campus Board for Graduate Studies and Research and the University Senate.

## **Entry Requirements**

(See general regulations – Doctor of Medicine)

## **Course of study**

On acceptance to the programme there will be a six month probation period during which the candidate's performance will be assessed at regular intervals. Any candidate who fails the overall assessment during this period of probation will be required to withdraw from the programme.

The programme consists of four parts and candidates must be placed in an accredited institution.

## **Part 1 (Year 1)**

During this period, which lasts twelve months, the students work as a psychiatric resident at an approved general hospital. Instruction is given in the Basic Medical Sciences (including Anatomy, Physiology) and in Neurology, Psychology and Psychiatry.

## **Part 2 (Year 2)**

Entry to the second part of the programme will depend on a satisfactory performance in the Part I examination.

During this period, which lasts twelve months, the student works as a psychiatric resident at an approved general hospital. Instruction is given in the Basic Medical Sciences (including Anatomy, Physiology) and in Neurology, Psychology and Psychiatry.

During the first half of Year 2 of the programme, the Student will submit to the Specialty Board through his/her supervisor, a proposal for a project to be undertaken during Part III of the programme.

## **Part 3 (Year 3)**

Entry to Part 3 of the programme will depend on a satisfactory performance in the Part 2 examination.

During Part 3, the candidate is required to spend six months working in an approved psychiatric hospital and at least twelve months working in the psychiatric services of an approved general hospital.

At least six months of this year must be spent in the Caribbean during this period. At the end of the time period, students may submit a Case Book or Report.

## **Part 4 (Year 4)**

During this year the student continues to work under supervision in an approved psychiatric service.

## **Institutions accredited for learning**

A list of accredited hospitals may be obtained from the Graduate Studies section of the Dean's Offices. Some are accredited only for the first part of the programme while others are accredited to

provide training in the second part of the programme for a specified time. To gain credit for such a period, the candidate must submit a satisfactory assessment report from their supervisor.

All requests for exemption should be made in writing by the student to the Registrar through the Chairman of the Faculty Board for Graduate Studies and Research. The request will then be forwarded to the Board for Graduate Studies and Research through the Campus Committee. Each case will be considered on its own merit.

### **Assessment**

Continuous assessment of the candidate's performance is carried out by his/her supervisor and recorded every six months. The supervisor will be a member of the Specialty Board for Psychiatry.

In the assessments are found to be unsatisfactory, the Specialty Board may recommend one or more of the following:

- 1) Counselling/academic warning in writing
- 2) Remedial work
- 3) Repeating the unsatisfactory rotations
- 4) Withdrawal from the programme if poor performance persists.

### **Case Book / Research Report**

All students must submit to the Campus Committee for Graduate Studies through the Director of the Postgraduate programme, at least six months before the final (Part III) examination:

*A casebook of all cases seen:*

These cases should illustrate the range of clinical conditions encountered in the practice of Psychiatry. Of the cases submitted, one (1) must be rare and of unique clinical relevance that may have important educational content suitable for journal publication. Each case report should not exceed 1500 words and should follow the format submitted for journal publication, namely: introduction, case history, discussion and conclusion. Referencing should follow the format of the West Indian Medical Journal.

### **OR**

*A research project base on cases seen:*

This should form a distinct contribution to the knowledge of the subject presented. It must be of satisfactory literary standard and

should attain standards suitable for publication in a peer reviewed journal. It should not exceed 20,000 words but must not be less than 12,000 words and must follow the University's Guide for the Preparation of Theses, Research Papers and Project Reports.

### **OR**

A formal research on an area of interest.

The cases/research project/project report must done in accordance with the DM Thesis guidelines (UWI).

Students are advised to discuss the preparation of case reports with their Supervisor(s) while the book is in preparation and not wait until it is completed. These cases offer the students the opportunity to study in detail, conditions of their own choice and to express views based on personal investigation and on review of the literature. These case reports could provide the opportunity for the student to put his/her clinical experience in the form of a research project which could be later developed for publication. From these records, the examiners will assess the critical faculties, powers of observation and the level of evaluation of various techniques used in Psychiatry by the students.

Following the submission of the work, the examiners may:

- i) Accept the work and permit the student to proceed to the examinations **OR**
- ii) Accept the work with modification, which must be carried out in the time specified and resubmitted **OR**
- iii) Reject the work with recommendations regarding changes, additions, or revisions necessary for acceptance. A date for resubmission will be determined by the examination board in Psychiatry.

The case book, project report or research project should be submitted for assessment at least six months before the date of the Part 3 examination. If the work is found to be unsatisfactory and requires major changes, the student will not be allowed to sit the final examination and a new date will be set. The Part 3 examination must be attempted for the first time within one year of the acceptance of the case book or research project.

The following three (3) requirements must be completed before the Part 3 examination.

- 1) A satisfactory standard of in-course assessments,
- 2) A Case log, and
- 3) A Project Report and/or Case book or Research Project

### **Examinations**

Before admission to any examination, candidates must be certified by their supervisors as having completed the relevant part of the programme. Examinations are in for parts (Part 1, Part 2, Part 3 and Part 4 and these are normally held once a year in May/June on two campuses.

### **Failure of an examination**

Should any candidate fail the examination of any Part at the first attempt, completion of this part must be within one calendar year of the first attempt. No candidate will be allowed more than two attempts at any one examination. Failure after the second attempt will necessitate withdrawal from the programme. Re-admission of candidates will be in accordance with the University Regulations for Graduate Diplomas and Degrees.

The Part 1 examination is held at the end of year 1.

On successful completion of Part 1, continuation in the training programme will be dependent on the recommendation of the Specialty Board based on its continuous assessment and the results of the Part 1 examination. The candidate must sit the Part 2 examination within 2 years.

The Part 2 Examination is held at the end of the second year.

The Part 3 Examination is held at the end of the third year. It constitutes the presentation and examination of the Project Report.

The Part 4 Examination is held at the end of the second year.

### **Requirements to Pass individual parts**

A candidate is determined to have completed if they have met the following:

- Part 1 – Pass all parts of examinations.
- Part 2 – Pass all parts of examinations
- Part 3 – Achieve a Pass grade
- Part 4 – Achieve an aggregate of 50% or more and pass at least two of the three long cases.

### **Award of degree**

Students will be considered as having successfully completed the programme when the following four (4) requirements have been met within the prescribed time limits.

- 1) Satisfactory performance of all rotations
- 2) Acceptance of their certified case log
- 3) Acceptance of the Case Book or Research Project
- 4) Satisfactory performance in the Part 1, Part 2, Part 3 and Part 4 examinations.

The final grade in the DM Psychiatry is Pass/Fail.

## **LIST OF COURSES**

### **Recommended**

MEDC 6900 Essential Health Research Skills

### **Compulsory**

MEDC 6614 DM Psychiatry Part I

MEDC 6626 DM Psychiatry Part II

MEDC 6627 DM Psychiatry Part III

MEDC 6628 DM Psychiatry Part IV

# DM SURGERY (GENERAL)

## **Introduction**

The DM Surgery (General) programme consists of two parts and the course of study is a minimum of five years. The programme takes place either at the University Hospital of the West Indies or at institutions in the contributing territories recognized by the University for this purpose.

Teaching and training in teaching methods and research methodology/epidemiology are integral components of the programme. The Specialty Board in Surgery is in overall charge of the programme. The programme will be under the general supervision of a Programme Director, nominated by the Head of Department and appointed by the Specialty Board in Surgery. Each student will be assigned to a supervisor who will advise the student as to choice or assignment of rotations, the elective period, direction in the conduct of their research and all other relevant matters.

## **Entry Requirements**

(See general regulations – Doctor of Medicine)

Criteria for registration should be obtained from the relevant medical council. Six months of supervised post-internship experience in the practice of surgery or in accident & emergency medicine at an approved hospital is desirable but such experience is not required.

## **Course of Study**

### **Part I - Two years**

During this period, students will be assigned to three monthly rotations in General Surgery and the surgical subspecialties. A rotation in critical care medicine may be taken through the Section of Anaesthesia & Intensive Care.

A maximum of three months may be spent in the Basic Medical Sciences Department (Sections of Anatomy, Biochemistry or Physiology), the Department of Pathology, or in an approved research project provided that prior approval has been obtained from the Specialty Board in Surgery.

Provided that the in-course assessments are satisfactory, the Part I examination is taken at the end of two years.

### **Part II - Three years**

During this period, students are assigned to general surgery rotations with increasing levels of responsibility. Up to one year's elective may be spent at institutions in or outside of the Caribbean provided that prior approval is obtained from the Specialty Board in Surgery. Such approval must be obtained at least six months prior to the commencement of the elective period. The elective period is limited to the penultimate year only.

During the final year, the student is normally appointed to the post of Chief Resident. The final year of the Part II programme must be spent at the University Hospital of the West Indies or at institutions in the contributing territories recognized by the University for this purpose.

### **Exemption**

(Should be read in conjunction with the General Regulations.)

Students who have obtained, by examination, the Part II FRCS, the Associate FRCS or Full Fellowship of any one of the Royal Colleges of Surgeons may apply for exemption from the Part I DM examination. Such exemption may be granted at the discretion of the Specialty Board in Surgery, after assessment of the student's performance in the programme.

### **Assessment**

Student performance will be assessed (by observation, orally or in writing) at the end of each rotation and will be recorded on prescribed forms. A satisfactory standard of in-course assessments is mandatory prior to taking the Part I and Part II examination.

Those with unsatisfactory records will be encouraged to improve and a warning letter issued; counselling and/or remedial work may be recommended. An unsatisfactory performance in a rotation may require that it is repeated. If poor performance persists, the student will not be allowed to complete the programme and will be required to withdraw.

Entry to Part II is dependent on satisfactory completion of the Part I.

The following three requirements must be met before the

Part II examination:

1. Reach a satisfactory standard in on-going assessments.
2. Submit a list of all operations where the candidate was the primary surgeon or assistant surgeon as certified by their supervisors.
3. Case book or Project Report

All DM Surgery candidates must submit to the Specialty Board or the Director of the Postgraduate programme at least six months before the final (Part II) Examination ONE of the following:

- a) A casebook of twenty (20) cases. These cases should cover the range of pathology seen in the practice of general surgery. Of the cases submitted, five (5) may be rare cases of unique clinical relevance that may have important educational content suitable for journal publication. The book should not exceed 300 pages. **OR**
- b) A project report or research thesis. This option should have been previously agreed on at the commencement of the Part II programme by the Specialty Board and the project carried out under the guidance of a supervisor appointed by the school for Graduate Studies on the recommendation of the Specialty Board in Surgery.

The format of the casebook/project report should conform to the University regulations dealing with the preparation of projects and dissertations. It should not exceed 20,000 words but must not be less than 15,000 words. The cases/project report must be typewritten and printed on one side only of good quality white bond paper (usually 20lb. weight) 8 1/2" x 11" (Standard Letter Size), with left hand margin of 2". The top, bottom and right hand margins should not be less than 1". The same grade of paper should be used throughout the thesis. Case reports should follow the format of case reports submitted for journal publication, namely: introduction, case history, discussion and conclusion. References should follow the format of the West Indian Medical Journal.

Students are advised to discuss the preparation of the casebook/project report with their Consultant(s) and/or Supervisor(s) during the preparation of the book instead of at completion. The writing of the casebook offers the student the opportunity of choosing

cases of unique clinical relevance and to express an opinion, based on careful evaluation of the current literature. The case reports should be of high quality suitable for publication in a peer reviewed journal.

Following submission of the work, the examiners may:

- 1) Accept the work allowing the student to proceed to the examination **OR**
- 2) Reject the work, with recommendations regarding changes, additions, or revisions necessary for acceptance. The examiners will indicate a deadline for re-submission of the work.

The casebook/project report should be submitted for assessment at least six (6) months before the date of the final examination. If the work is found to be unsatisfactory and requires major revision the student will not be allowed to sit the final examination and a new date will be set.

### **Examinations**

Before admission to any examination, candidates must be certified by their supervisors as having completed all relevant parts of the programme. There are two examinations, one each at the end of the Part I and Part II.

Candidates will be eligible to sit the Part I examination two years but not greater than three years after entry into the programme.

The Part I examination consists of two sections:

- Section A: Principles of Surgery
- Section B: Basic Pathology, Anatomy, Physiology (including Biochemistry)

The examination must be completed within one calendar year of the first attempt. There will be a written paper, which may include multiple choice questions and an oral examination in each subject. The candidate must pass Section A and at least two parts of Section B to qualify for entry to Part II of the programme.

Continuation in the training programme will be dependent on the recommendation of the Specialty Board based on its continuous assessment and the results of the Part 1 examination.

Candidates will be eligible to sit the Part II examination three years but not greater than four years after successful completion of the Part I examination.

The Part II examination consists of:

- a) Written papers which may include multiple choice questions.
- b) An oral examination which may include clinical material and must be taken within one calendar year of the acceptance of the project or casebook.

No student will be allowed more than two attempts at any one examination. Failure after the second attempt will necessitate withdrawal from the programme. The student may not reapply to the programme after withdrawal.

### **Completion of the Programme**

Students will be considered as having completed the programme and eligible for the award of the DM degree when the following FOUR requirements have been met:

1. Satisfactory performance of all rotations
2. Acceptance of the certified list of operative procedures
3. Acceptance of the Case Book or Research Project
4. Satisfactory performance in the Part I and II examinations

The final grade in the DM Surgery (General) is Pass/Fail.

## **LIST OF COURSES**

### **Recommended**

MEDC 6900 Essential Health Research Skills

### **Compulsory**

MEDC 6620 DM Surgery (General) Part I

MEDC 6621 DM Surgery (General) Part II

# **MASTER IN PUBLIC HEALTH (MPH)**

## **Introduction**

The development of the MPH programme at Cave Hill is a response to training needs of the region, including the needs to develop practitioners in public health and epidemiology, and the need for public health leadership. The programme has been designed to meet the needs of regional health priorities to a standard that meets the requirements of internationally recognised curricula for public health, including those of the Association of Schools of Public Health (US based) and the UK Faculty of Public Health. The programme began in 2008, and has now been developed to align with the MPHs at Mona and St. Augustine campuses.

## **Objectives**

By the end of the programme, successful participants will be able to:

- Demonstrate an understanding of the philosophy and principles of public health and their evolution;
- Describe the natural history, biology, pathophysiology, risk factors, methods of investigation, and strategies for the prevention and control of several diseases, health conditions, or health behaviors important to public health;
- Put into practice the concepts, study design, methods of implementation, and evaluation of epidemiologic investigations including their application to surveillance systems;
- Show an understanding of the statistical, data management, and quality control procedures applied to data derived in public health practice settings;
- Demonstrate the ability to summarize health related data and statistics, and to calculate and interpret associations and their relevance to practice situations;
- Present demographic, statistical, programmatic, and scientific data accurately and effectively for professional and general audiences;
- Use effective written and oral communication skills for presenting public health information and epidemiologic data;

- Demonstrate the ability to synthesize knowledge of a specific problem and critically evaluate methods and findings;
- Follow ethical and legal principles pertaining to public health research and practice, including their practical application;
- Demonstrate the ability to integrate epidemiologic concepts and analytic approaches to the study of a specific public health problem in a practice setting and preparing a written and oral report for professionals in the practice setting;
- Understand the role of epidemiology as a discipline in the context of public health and the broader health sciences, including its purpose, strengths, and limitations;
- Demonstrate the ability to critically apply qualitative research methods to the study of a specific public health problem in a practice, and appropriately present their findings by written and oral means;
- Show adequate knowledge, skills, and understanding in communication and informatics, diversity and culture, leadership, professionalism, program planning and systems thinking;
- Provide an account of the history, development, current status and challenges to the health status of the people of the Caribbean.

### **Duration**

The MPH programme is offered as a full time programme over twelve (12) months of study with two semesters and a summer term from September to August of the following year, and includes both classroom and laboratory/practical activities.

There are two part-time options

- a. Two days per week for two years
- b. Semester 1 full time, gap year (complete research project), then Semester 2 full time

All classes are held during the day.

### **Programme Structure / Course of Study**

Candidates are required to gain 41 credits through successful completion of 10 compulsory courses, and the research project with the balance of credits to be made up from electives (2 in the first semester and 6 in the second). All students are strongly advised to

take the 0-credit course **Computing for Public Health** in the first semester.

### **Examination re-sits or re-submission of coursework**

If a student has been unsuccessful in one component of a course and has been given a failing grade of FE or FC, this indicates that permission has been granted to re-sit the examination / re-submit coursework for that course the next time it is offered.

In such cases an *Examinations Only* registration must be done administratively and students will need to contact the School for Graduate Studies and Research within the first 3 weeks of the relevant semester by email to [gradstudies@cavehill.uwi.edu](mailto:gradstudies@cavehill.uwi.edu) with details of the course for which they are to be registered.

This repeat registration attracts a per-credit fee.

### **Re-taking a failed course**

Any student who was unsuccessful in any course (grade F), is required to re-take the entire course and must self-register using CHOL the next time the course is offered

This repeat registration attracts the full per-credit cost of the course again.

### **Requirement to withdraw**

Any candidate who receives a second failing grade in any course will normally be required to withdraw from the programme. Applications for re-entry from students who were *Required to Withdraw* are not normally considered until a period of two years has elapsed.

### **Distinction**

For the award of the MPH with Distinction, the candidate must pass all courses at the first sitting and the average mark of all courses (excluding the Research paper) must be at least **70%**. The candidate must also achieve a mark of **70%** or over in the Research Paper.

## **LIST OF COURSES**

- PBHE 6015 Social and Behavioural Science (3 credits)  
PBHE 6050 Health Economics (3 credits)  
PBHE 6100 Biostatistics I (3 credits)  
PBHE 6200 Epidemiology I (3 credits)  
PBHE 6220 Epidemiology of Priority Diseases (3 credits)  
PBHE 6400 Health Management I (3 credits)  
PBHE 6600 Environmental Health (3 credits)  
PBHE 6900 Research Methodology (2 credits)  
PBHE 6920 Project Mgt and Integrated Knowledge Application  
(linked to the Research Project) (1 credit)  
PBHE 6930 Qualitative Research Methods (2 credits)  
PBHE 6990 Research Project (7 credits)

### **Electives**

- PBHE 6000 Health Promotion (3 credits)  
PBHE 6060 Qualitative Data Analysis (1 credit)  
PBHE 6210 Epidemiology II (2 credits)  
PBHE 6300 Family Health (2 credits)  
PBHE 6420 Health Management III – HR Mgt (3 credits)  
PBHE 6500 Primary Health Care (2 credits)  
PBHE 6925 Computing for Public Health (0 credit)

## MODULE AND COURSE DESCRIPTIONS

### Family Medicine

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#### CODE

MODULE TITLE: Teaching and Learning in Primary Care

CREDITS: 2

#### Description

On completion of this module, students will be able to: Outline the principles of Adult Education, Discuss the inadequacies and resultant student stresses of traditional medical education, List the features of the constructivist theory of Education and show the application of these features in problem-based learning, Assess one's learning style using a given learning style questionnaire, Identify the variables affecting student's motivation to learning, Discuss the problems with present CME for General Practitioners in the Caribbean, Write a learning contract, and Identify various methods of CME.

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#### CODE

MODULE TITLE: Evidence Based Medicine

CREDITS: 2

#### Description

The module aims to assist the Family Medicine practitioner, to: Understand the tenets of Evidence Based Medicine, thus enabling you to apply them in your everyday practice, Be able to make the right decision, by following the appropriate steps in clinical decision-making, Appreciate the role that epidemiology plays in determining health-related events and the health status of the community, prevention of disease and promotion of health, and Realize the epidemiological trends occurring in the Caribbean today, as well as the natural history of some of the diseases which are now significant threats to the welfare of the region.

MODULE TITLE: The Consultation and Communication

CREDITS: 2

#### Description

On completion of this module, students will be able to: Define and distinguish the different forms of medical consultation, Discuss the limitations and successes of the biomedical approach to patients, with special reference to the Caribbean setting, List and discuss in writing (500 words) the various tasks of the consultation, Explain the Pendleton cycle of care, Distinguish in writing between illness and sickness, Discuss the importance of the patient's health understanding, Explain in writing "Balint's Flash", Explain how consultations may be measured and compared, Discuss the limitations a doctor faces in his/her practice, List and discuss briefly each of the 7 communication transforming principles of Roter and Hall, Describe in writing a rationale for learning about communication, and its relevance to Family Practice today, Being aware of at least 4 research studies which demonstrate how communication can affect health outcome, and of the significance of the findings of these studies, List 20 action skills that can enhance communication within a consultation, Explain how to break bad news to patients, and Analyse a transcript with respect to communication quality using fixed criteria.

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MODULE TITLE: Medical Ethics and the Doctor – Patient

Relationship

CREDITS: 2

#### Description

On completion of this module, students will be able to: List at least 8 types of the Doctor-Patient relationship; Discuss the main ethical concern of each type of relationship listed; Identify the appropriate Doctor-Patient relationship for various health care settings, justifying their choice; Discuss 5 distinguishing features of any Doctor-Patient relationship; State in writing how a general practitioner's increased self-awareness can enhance his relationship with patients; List situations where professional boundary concerns become important, and be able to discuss the significance in Primary Care; Identify and discuss the 4 main Medical ethical principles; Analyse an ethical case scenario with respect to the ethical principles involved in its resolution; Identify 10 virtues important to the Primary Care physician, Identify any other principle(s) or virtue(s) which might be specifically important for the Caribbean doctor, justifying your selection; Discuss the importance of informed consent to General Practice; Outline ways a General Practice office

can maintain confidentiality; Describe case scenarios where truth-telling becomes a challenge for the beneficent General Practitioner and suggest ways of resolving these cases; Outline the ethical issues arising out of the Caribbean governments' recent Health Care Reform proposals; Suggest ways that the health care system can be operated at the primary care level, so that this is ethical; Discuss the ethics involved in: A patient's request for the termination of life, A patient's request for abortion, A Down's syndrome patients request for fertility pills; Identify medical library resources especially helpful in the subject of medical ethics; Discuss, making use of medical literature, ethical issues relating and/or peculiar to the Caribbean General Practice; and Design, using established contemporary medical oaths, a medical oath adjunct suitable for the Caribbean.

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**MODULE TITLE: Health Promotion, Screening and Risk Assessment**

**CREDITS: 2**

**Description**

This module covers five (5) units: Health Promotion Concepts, Rationale and Strategies; Clinical Perspectives in Health Promotion; Models of Health Behaviour Change; Developing Personal Health Skills; and Facilitating Health Promotion in Practice

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**MODULE TITLE: Chronic Disease in Primary Care**

**CREDITS: 2**

**Description**

This module aims to: To update knowledge on hypertension, diabetes, and obesity and their complications relevant to the Primary Care Physician; To promote skills in history taking, examination and management of patients with hypertension, diabetes and obesity; To promote an understanding of social, economic and lifestyle factors in chronic diseases; To promote the use of protocols and guidelines in the diagnosis and management of hypertension, diabetes and obesity; To enable students to plan and implement health education for chronic diseases; and To enable students to enhance community efforts in health promotion and illness prevention.

**MODULE TITLE: Human Sexuality and STDs**

**CREDITS: 2**

**Description**

This module covers three (3) units: Human Sexuality; Sexually Transmitted Diseases; and Managing HIV

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**MODULE TITLE: Child Health**

**CREDITS: 2**

**Description**

On completion of this module, the student will be able to:- List the issues that need to be considered when consulting with children and their parents; Describe the role of the Family Physician in the health surveillance and screening of children; To learn about the principles of immunisation, and the indications, use, adverse effects and contraindications of commonly used vaccines; Describe the management of children with fever; Discuss the important health concerns of adolescent patients; To outline important aspects of caring for chronically ill children; and Describe the management of abused children.

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**MODULE TITLE: Gender Issues / Women's Health**

**CREDITS: 2**

**Description**

On completion of this module, the student will: Be able to identify and discuss the cultural, religious and historical beliefs and values that impact on gender socialisation with specific reference to the Caribbean; Have knowledge of gender specific health problems and their management; Be able to describe gender differences in health problems that are not gender specific; Be able to critically appraise gender sensitivity in the provision and delivery of health care; and Be able to recognise the influence of gender socialisation on the physician's own relationships with patients and the health team, and on the provision of appropriate care.

**MODULE TITLE: Care of the Elderly**  
**CREDITS: 2**

**Description**

This module aims: - To promote an ethical approach to the elderly, that is in keeping with psychosocial theories; To be able to discuss the problems facing the elderly in the Caribbean, and to develop Primary Care approaches that can help the resolution of these problems; and To enhance skills in managing some of the common problems of the elderly.

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**MODULE TITLE: Mental Health / Counselling**  
**CREDITS: 2**

**Description**

This module aims:- To update students on the common mental health diseases seen in the community; To improve diagnostic management skills in the care of mental health problems; Update students on the nature and causes of substance abuse- both legal and illegal causes; To familiarise students with guidelines and protocols that can be used in managing common mental health problems; To familiarise students with guidelines and protocols that can be used to detect and manage substance abuse; and To introduce the principles of counselling

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**MODULE TITLE: Medico-legal issues**  
**CREDITS: 2**

**Description**

This module aims:- To increase the knowledge of the students regarding law and the boundaries it provides for acceptable behaviour in the society; To improve the understanding of doctors regarding the impact of law on health care; To sensitise doctors to important medico-legal issues; and To enhance the skills of Family doctors in medico-legal procedures in the Caribbean.

**MODULE TITLE: Research Methodology**  
**CREDITS: 2**

**Description**

On completion of this module, the student will be able to:- Conduct a literature review related to a subject of interest, to become familiar with current published literature on the subject; Present an argument (rationale) demonstrating the potential usefulness of a proposed research project; Differentiate between aims and objectives, and write a set of aims/objectives related to a proposed research project; Demonstrate an understanding of the following terms as used in sampling theory: population, sample, simple random sample, stratified random sample, systematic sample, case series, accidental sample, one stage and multi-stage sampling; Demonstrate an understanding of the following terms as used in measurement and data collection: reliability, validity, accuracy, precision, single-blind, double-blind; Prepare data for manual or computer analysis; Write a report in the conventional IMRAD format following a consistent style of presentation as in one of the leading medical/health journals; and Critique published research reports with regard to adequacy of study design and appropriateness of conclusions.

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**MODULE TITLE: Statistics objectives**  
**CREDITS: 2**

**Description**

On completion of this module, the student will be able to:- Correctly use and interpret the following tools in descriptive statistics: contingency tables and tables of frequency distributions, measures of central tendency (mean, median, mode) and dispersion (standard deviation, percentiles, quartiles, range); bar charts, histograms, frequency polygons; the normal distribution; correlation and regression; and Use and interpret the following techniques in inferential statistics: confidence intervals for means and proportions, significance tests (chi-squared test, t-test, 3-test).

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**MODULE TITLE: Management for Primary Care Physicians**  
**CREDITS: 2**

**Description**

This module seeks:- To familiarize students with national health policy and reform proposals; To foster an understanding of major issues and players in national health decision policymaking; To

appreciate the reasons for health reform understanding health systems in other selected countries of the world; To understand the role of insurance companies in health care delivery; To be familiar with management issues in primary care at regional and office levels; To enable students to manage a primary care office in an efficient, cost effective manner; To appreciate the concept of health team and understand the functions of the team in present and future projections of the health system; To foster a deep and broad understanding of primary care, primary health care and primary medical care; and To critically analyse and discuss crucial issues peculiar to primary care delivery.

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**MODULE TITLE Practice Management**  
**CREDITS: 2**

**Description**

This module seeks to familiarize students with:- basic accounting principles; Principles of managing a practice profitably; Principles of inter-personal relations and informal organizations; Principles of performance appraisals; Various private sector health systems; and The elements of health finances.

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**MODULE TITLE; Counselling**  
**CREDITS: 2**

**Description**

On completion of this module, the student will be able to:- Describe the nature of counselling; Explain and demonstrate the techniques used in counselling; Identify the dynamics of the counselling relationship; Identify the indications for crisis intervention; Demonstrate the technique of crisis intervention; Recognize the manifestations of stress in your own life; and Demonstrate effective stress-reducing techniques

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**COURSE CODE: MDFA 6000**  
**TITLE: Family Medicine - Diploma**

**Description**

Students will complete 12 modules during the Diploma programme. These modules will be delivered by distance education methods with the help of a study manual. This will be in print format and/or on compact disc. Students will need to read the manuals, and

complete the included exercises and assignments. The student is expected to have a job in a Family Practice setting (in a polyclinic or privately). In addition the student will have to attend both Family Practice and Specialist clinic sessions.

**Assessment**

Pass/Fail

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**COURSE CODE: MEDC 6642**

**TITLE: Family Medicine MSc**

**Description**

After completing the Diploma programme, students will complete 4 modules and a research project for the MSc programme. These modules will be delivered by distance education methods with the help of a study manual. This will be in print format and/or on compact disc. Students will need to read the manuals, and complete the included exercises and assignments. The student is expected to have a job in a Family Practice setting (in a polyclinic or privately). In addition the student will have to attend both Family Practice and Specialist clinic sessions.

**Assessment**

Pass/Fail

## DM Programmes

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**COURSE CODE: MEDC 6900**

**TITLE: Essential Health Research Skills**

### Description

This course will provide the basic skills and tools to enable students to develop and write a research proposal. The overall goal for this course is for students to understand and undertake the several steps involved in the process of researching, and writing a protocol for conducting a study in the area of health research using quantitative methods.

### Assessment

Pass/Fail

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**COURSE CODE: MEDC 6705**

**TITLE: DM Accident & Emergency Medicine Part I**

### Description

The Part I DM examination is designed to test the knowledge attitudes and skills of residents at the end of their second year of the DM programme. They must be able to apply basic science knowledge to clinical scenarios and show a proficiency in communication skills.

The examination will consist of written, clinical and oral examinations.

- a) The written examination will consist of two papers
  - 1) An MCQ paper of questions covering all five sections of the syllabus
  - 2) A data Interpretation paper
- b) The clinical examination
  - 1) The clinical examination will be in the form of an Objective Structured Clinical Examination.
- c) The oral examination
  - 1) The oral examination will cover all sections of the Part I course. Candidates must pass Part I before proceeding to Part II.

### Assessment

Pass/Fail

**COURSE CODE: MEDC 6710**

**TITLE: DM Accident & Emergency Medicine Part II**

### Description

Candidates will be eligible to sit Part II DM examination at least two years but not more than three years after successful completion of the Part I examination

The Part II examination consists of the following components:

- a) The written paper (modified essays and data interpretation) will consist of two papers
- b) The clinical examination (long case plus short cases/ OSCE)
- c) The oral examination (Clinical plus non-clinical situations)
- d) Defense of the Case book/ research project

### Assessment

Pass/Fail

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**COURSE CODE: MEDC 6623**

**TITLE: DM Anaesthesia & Intensive Care Part I**

### Description

The first Part of the DM Anaesthesia & Intensive Care programme is of one year's duration. Provided the in-course assessments are satisfactory, the Part I examination is taken at the end of the first year. Admission to the second part depends on a satisfactory assessments and performance in Part I Examination.

The Part I examination is held at the end of the second year and consists of:

- a) a written paper and a multiple choice paper
- b) an oral examination

Candidates will be invited to an oral examination depending on their performance in the MCQ. Candidates receiving less than 45% will not be invited for the orals as this represents an irretrievable situation.

### Assessment

Pass/Fail

**COURSE CODE: MEDC 6624**

**TITLE: DM Anaesthesia & Intensive Care Part II**

**Description**

The DM Anaesthesia & Intensive Care Part II examination is held at the end of the second year of the Part II programme and consists of:

- a) two written papers
- b) a clinical examination
- c) an oral examination

**Assessment**

Pass/Fail

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**COURSE CODE: MEDC 6667**

**TITLE: DM Family Medicine Part I**

**Description**

The diploma is assessed at the end of year 2.

Portfolio	30%
Examination (OSCE)	40%
Examination (written)	30%
<i>Total</i>	<i>100%</i>

**Assessment**

Pass/Fail

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**COURSE CODE: MEDC 6668**

**TITLE: DM Family Medicine Part II**

**Description**

Part II of the DM Family Medicine is of 1 year's duration. Students will complete 12 modules during the first 2 years and 4 modules during the third year. The student is required to keep a portfolio containing all assignments and activities. Students advance to Part 3 on successful completion of Part 2.

The assessment is as follows.

Portfolio	20%
Examination (written)	40%
Defense of project report	40%

**Assessment**

Pass/Fail

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**COURSE CODE: MEDC 6669**

**TITLE: DM Family Medicine Part III**

**Description**

Part 3 of the DM Family Medicine is of one year's duration spent in an approved training area and includes the preparation of either: a project report; or a case book of twenty cases with commentaries. Following the submission of the project report or case book at the end of the fourth year, the examiner may:

- Accept the work, the trainee being then eligible for the award of the degree of DM Family Medicine, OR
- Reject the work, and they will then indicate what additional or new work needs to be carried out and when the work must be resubmitted

**Assessment**

Pass/Fail

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**COURSE CODE: MEDC 6655**

**TITLE: DM Internal Medicine Part I**

**Description**

The DM Internal Medicine Part I examination consists of:

- a) Written papers (essay and multiple choice questions)
- b) A clinical examination (objective structured format)

The candidate is required to pass **both parts** of this examination at the same sitting in order to progress to Part II.

**Assessment**

Pass/Fail

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**COURSE CODE: MEDC 6656**

**TITLE: DM Internal Medicine Part II**

**Description**

Years 3 and 4 of the DM Internal Medicine are assessed as per the protocols for the first 2 years. Only candidates who have obtained satisfactory reports at the end of the 3rd year, and have completed their research projects, will be eligible to sit the Part II examinations. This examination consists of two written papers (one essay and one multiple choice), a clinical examination (OSCE) and an oral examination. This examination is an "exit examination" with

emphasis on a high level of competence in clinical skills, knowledge of up-to-date evidence based medicine, communications, problem solving as well as aptitude, attitude and knowledge so that to be successful candidate is capable of functioning at **consultant** level in the Caribbean context. Each candidate is required to pass each part of the clinical examination individually in order to obtain a passing grade.

A candidate obtaining a pass mark (i.e 50 marks) in each of the written papers, and a pass mark (i.e 38 marks) in each of the components of the clinical examination, and a pass mark of 25 marks in the oral component of the examination will be deemed to have passed the DM Part II in Medicine.

**Assessment**

Pass/Fail

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**COURSE CODE: MEDC 6630**

**TITLE: DM Obstetrics & Gynaecology Part I**

**Description**

The DM Obstetrics & Gynaecology Part I Examination is held at the end of the first year and comprises: a written paper and an oral examination in Obstetrics and Gynaecology and related disciplines in the basic sciences.

**Assessment**

Pass/Fail

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**COURSE CODE: MEDC 6635**

**TITLE: DM Obstetrics & Gynaecology Part II**

**Description**

Part II of the DM Obstetrics & Gynaecology is of three years duration and may include a period of six months in a related discipline or in an approved research project provided that approval has been obtained from the Specialty Board beforehand.

The Part 2 Examination consists of:

- a) Two written papers
- b) A clinical examination which will include presentation and discussion of Obstetrical and Gynaecological cases

- c) An oral examination

The Part 2 Examination must be taken within one year of the submission of the project report or case book.

**Assessment**

Pass/Fail

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**COURSE CODE: MEDC 6661**

**TITLE: DM Ophthalmology Part I**

**Description**

The Part I DM Ophthalmology examinations will be undertaken after 2 years in the programme. Students may only advance to Part II after successful completion of Part I.

Section A:

- Principles of Ophthalmic Surgery

Section B:

- Anatomy of Head and Neck (including Embryology and Neuro anatomy)
- Basic and Ocular Pathology including microbiology and biochemistry.
- Physiology of eye, adnexae, CNS including related general physiology.

General Medicine in association with Ocular pathology

Candidates must pass Section A and pass all parts of Section B to qualify for entry into the second part of the programme.

Candidates who have not completed the Part 1 exam within one calendar year of the first sitting of the examination will normally be required to withdraw from the programme

Section A Exam consists of 4 Essay questions (3 hours)

Section B Exam consists of 3 papers of 100 MCQ's each (each paper will be 3 hours). The 3 papers shall be Anatomy (Head and Neck), Ocular Physiology, and Ocular Pathology.

**Assessment**

Pass/Fail

**COURSE CODE: MEDC 6662**  
**TITLE: DM Ophthalmology Part II**

**Description**

The Part II DM Ophthalmology exam will be undertaken at the end of the 3rd year in the programme.

Section A:

- Basic Optics (Principles of Instrumentation) & Theory of Refraction (MCQs)

Section B:

- Practical Refraction exam & OCSE

**Assessment**

Pass/Fail

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**COURSE CODE: MEDC 6663**  
**TITLE: DM Ophthalmology Part III**

**Description**

The Part III examination will be undertaken at the end of the fellowship. This will consist of 2 parts:

- 1) 2 Papers : MCQs/ Essay
- 2) Oral Examination

**Assessment**

Pass/Fail

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**COURSE CODE: MEDC 6612**  
**TITLE: DM Orthopaedic Surgery Part II**

**Description**

The Part 11 DM Orthopaedic Surgery examination will consist of:

- a) Two written papers
- b) An oral examination which may include clinical material

Assessment

Pass/Fail

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**COURSE CODE: MEDC 6617**  
**TITLE: DM Paediatrics Part I**

**Description**

The DM Paediatrics Part 1 examination consists of

- a) One multiple choice question paper
- b) A clinical examination
- c) An oral examination.

**Assessment**

Pass/Fail

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**COURSE CODE: MEDC 6622**  
**TITLE: DM Paediatrics Part II**

**Description**

The DM Paediatrics Part 2 examination consists of

- a) Two written papers, which may include multiple choice questions
- b) A clinical examination
- c) An oral examination.

**Assessment**

Pass/Fail

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**COURSE CODE: MEDC 6614**  
**TITLE: DM Psychiatry Part I**

**Description**

In the DM Psychiatry Part I examination candidates are assessed on Neurology, Psychiatry and Psychology. The exam comprises:

- A knowledge based examination in Neurology, Psychiatry and Psychology. This consists of a composite multiple choice paper examination (MCQs) and extended matching questions.
- A clinical examination in Neurology
- A clinical examination in Psychiatry consisting of two long cases, four vignettes and/or structured questions.

**Assessment**

Pass/Fail

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**COURSE CODE: MEDC 6626**

**TITLE: DM Psychiatry Part II**

**Description**

In Part 2 of the DM Psychiatry candidates are evaluated in Basic Sciences (Neuroanatomy and Neurophysiology).

This exam consists of:

- Paper 1 – a written paper
- Paper 2 – a composite multiple choice paper examination (MCQs) and extended matching questions (EMQs).

**Assessment**

Pass/Fail

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**COURSE CODE: MEDC 6627**

**TITLE: DM Psychiatry Part III**

**Description**

The DM Psychiatry Part 3 Examination is held at the end of the third year. It constitutes the presentation and examination of the Project Report.

**Assessment**

Pass/Fail

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**COURSE CODE: MEDC 6628**

**TITLE: DM Psychiatry Part IV**

**Description**

The DM Psychiatry Part 4 Examination is held at the end of the second year. Candidates are evaluated in Psychiatry. This exam consists of:

- Paper 1 – a written paper and Paper 2 – a composite multiple choice paper examination (MCQs) and extended matching questions (EMQs).
- A clinical examination in consisting of three (3) long cases one of which include a psychological component
- An oral examination based on standardized vignettes and/or standardized questions

**Assessment**

Pass/Fail

**COURSE CODE: MEDC 6620**

**TITLE: DM Surgery (General) Part I**

**Description**

The DM Surgery (General) programme consists of two parts. Teaching and training in teaching methods and research methodology/epidemiology are integral components of the programme. During the first part, are assigned to three monthly rotations in General Surgery and the surgical subspecialties. Provided that the in-course assessments are satisfactory, the Part I examination is taken at the end of two years.

The Part I examination consists of two sections:

- Section A:  
Principles of Surgery
- Section B:  
Basic Pathology, Anatomy, Physiology (including Biochemistry)

The DM Surgery (General) Part I is equivalent to the DM Orthopaedic Surgery.

**Assessment**

Pass/Fail

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**COURSE CODE: MEDC 6621**

**TITLE: DM Surgery (General) Part II**

**Description**

During part 2 of the DM Surgery (General) students are assigned to general surgery rotations with increasing levels of responsibility.

The Part II examination consists of:

- a) Written papers which may include multiple choice questions.
- b) An oral examination which may include clinical material and must be taken within one calendar year of the acceptance of the project or casebook.

**Assessment**

Pass/Fail

## Research degrees

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**COURSE CODE:** GRSM7001 (common to all MPhil students)

**TITLE:** MPhil Research Seminar 1

**CREDITS:** 0

### Description

This is the first of two research seminars to be presented by the MPhil student.

### Assessment

Pass/Fail

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**COURSE CODE:** GRSM7002 (common to all MPhil students)

**TITLE:** MPhil Research Seminar 2

**CREDITS:** 0

### Description

This is the second of two research seminars to be presented by the MPhil student.

### Assessment

Pass/Fail

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**COURSE CODE:** GRSM8001 (common to all PhD students)

**TITLE:** PhD Research Seminar 1

**CREDITS:** 0

### Description

This course is the first of three research seminars to be presented by the PhD student.

### Assessment

Pass/Fail

**COURSE CODE:** GRSM8002 (common to all PhD students)

**TITLE:** PhD Research Seminar 2

**CREDITS:** 0

### Description

This is the second of three research seminars to be presented by the PhD student.

### Assessment

Pass/Fail

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**COURSE CODE:** GRSM8003 (common to all PhD students)

**TITLE:** PhD Research Seminar 3

**CREDITS:** 0

### Description

This is the last of three research seminars to be presented by the PhD student.

### Assessment

Pass/Fail

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**COURSE CODE:** EPDM 7000

**TITLE:** MPhil Epidemiology - Thesis

### Description

Students produce a thesis of approximately 50,000 words under the supervision of a member of Faculty.

### Assessment

Pass/Fail

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**COURSE CODE:** EPDM 8000

**TITLE:** PhD Epidemiology - Thesis

### Description

Students produce a thesis of approximately 80,000 words under the supervision of a member of Faculty.

### Assessment

Pass/Fail

**COURSE CODE: IMMU 7000**  
**TITLE: MPhil Immunology Thesis**

**Description**

Students produce a thesis of approximately 50,000 words under the supervision of a member of Faculty.

**Assessment**

Pass/Fail

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**COURSE CODE: IMMU 8000**  
**TITLE: PhD Immunology Thesis**

**Description**

Students produce a thesis of approximately 80,000 words under the supervision of a member of Faculty.

**Assessment**

Pass/Fail

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**COURSE CODE: MEDC 7100**  
**TITLE: MPhil Medical Microbiology Thesis**

**Description**

Students produce a thesis of approximately 50,000 words under the supervision of a member of Faculty.

**Assessment**

Pass/Fail

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**COURSE CODE: MEDC 8020**  
**TITLE: PhD Medical Microbiology Thesis**

**Description**

Students produce a thesis of approximately 80,000 words under the supervision of a member of Faculty.

**Assessment**

Pass/Fail

**COURSE CODE: PBHE 7000**  
**TITLE: MPhil Public Health Thesis**

**Description**

Students produce a thesis of approximately 50,000 words under the supervision of a member of Faculty.

**Assessment**

Pass/Fail

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**COURSE CODE: PBHE 8000**  
**TITLE: PhD Public Health Thesis**

**Description**

Students produce a thesis of approximately 80,000 words under the supervision of a member of Faculty.

**Assessment**

Pass/Fail

## **MPH courses**

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**COURSE CODE: PBHE 6000**

**TITLE: Health Promotion**

**CREDITS: 3**

### **Description**

This course explores the philosophies, goals and principles on which health education and health promotion are founded and the relevance of the health promotion approach to Caribbean Public Health. The promotion of individual responsibility and community participation are also covered.

### **Assessment**

40% Coursework, 60% Final Examination

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**COURSE CODE: PBHE 6015**

**TITLE: Social and Behavioural Science**

**CREDITS: 3**

### **Description**

This course teaches the way in which social and behavioural factors affect the health of individuals and populations. Social and behavioural sciences contribute greatly to the understanding of the social context and individual behavior in relation to health and illness.

The course introduces and examines basic theories and models from a range of social and behavioural disciplines that are used in public health research and practice. The course identifies the causes of social and behavioural factors on health, illness and health seeking behavior, and aims to provide the students with the knowledge and skill set to critically apply interdisciplinary health concepts to their public health research.

### **Assessment**

60% Coursework, 40% Final Examination

**COURSE CODE: PBHE 6050**

**TITLE: Health Economics**

**CREDITS: 3**

### **Description**

This course serves as a basic introduction to key concepts and methodology to understand the application of health economics in the management of health services. Health Economics I and II; Commissioning and contracting for health gain; Managing fixed assets; Financial management

### **Assessment**

40% Coursework, 60% Final Examination

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**COURSE CODE: PBHE 6060**

**TITLE: Qualitative Data Analysis**

**CREDITS: 1**

**PREREQUISITE: PBHE 6930: - Qualitative Research Methods**

### **Description**

At the end of this course, students will be able to understand various analytical approaches to qualitative public health research, as well as have the knowledge and skills to analyse qualitative research data using appropriate software applications.

### **Assessment**

60% Coursework, 40% Final Examination

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**COURSE CODE: PBHE 6100**

**TITLE: Biostatistics**

**CREDITS: 3**

### **Description**

This course introduces students to the field of statistics and its application in public health. It will cover data analysis using descriptive, inferential and hypothesis-testing techniques. The use of the computer in data analysis will be an important feature of this course.

### **Assessment**

60% Coursework, 40% Final Examination

**COURSE CODE: PBHE 6200**

**TITLE: Epidemiology I**

**CREDITS: 3**

**Description**

Epidemiology is the core science of Public Health, providing the concepts and tools to assess and monitor the health of populations, investigate the causes of different health states, direct interventions to address those causes and monitor their impact.

The course aims to provide a solid grounding in epidemiology as applied to Public Health, with the second epidemiology course providing detailed consideration of study design and the collation of data and evidence.

**Assessment**

40% Coursework, 60% Final Examination

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**COURSE CODE: PBHE 6210**

**TITLE: Epidemiology II**

**CREDITS: 2**

**Description**

This course details methodological issues in epidemiology including measurements, rates, risk, study designs and statistical methods and their value in the prediction and management of illnesses and diseases.

**Assessment**

60% Coursework, 40% Final Examination

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**COURSE CODE: PBHE 6220**

**TITLE: Epidemiology of Priority Diseases**

**CREDITS: 3**

**Description**

This course provides an overview of the epidemiology of the diseases, both chronic non-communicable (NCD) and infectious (ID) of major public health importance in the Caribbean. It covers their current distribution, trends, determinants and approaches to their prevention and control.

In particular, the roles of surveillance, policy formulation, programme planning, implementation and evaluation are addressed as part of societal efforts aimed at the prevention of NCDs and IDs.

**Assessment**

60% Coursework, 40% Final Examination

---

**COURSE CODE: PBHE 6300**

**TITLE: Family Health**

**CREDITS: 2**

**Description**

This course aims to assist students to gain more in-depth knowledge of Maternal and Child Health/Family Health: the concepts, content, approach to practice, especially in Caribbean situations, which will enable them to develop and demonstrate attitudes and skills necessary in providing more efficient and effective care for the family”.

**Assessment**

60% Coursework, 40% Final Examination

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**COURSE CODE: PBHE 6400**

**TITLE: Health Management I**

**CREDITS: 3**

**Description**

The course will cover basic Management thinking, policy and planning. It consists of: Understanding Organisations; Decentralisation and Accountability; Planning of Health Services: both, Strategic Planning and Operational/Business Planning

**Assessment**

100% Coursework

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**COURSE CODE: PBHE 6420**

**TITLE: Health Management III – HR Mgt**

**CREDITS: 3**

**Description**

This course will focus on resources to manage, particularly human resources, which form the biggest and most valuable asset of the

health sector. It covers Human Resources Management; Managing Teams; Managing Self; Leadership; Performance Management.

**Assessment**

60% Coursework, 40% Final Examination

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**COURSE CODE: PBHE 6500**

**TITLE: Primary Health Care**

**CREDITS: 2**

**Description**

This course reviews and discusses Alma Ata, from a health sector perspective. It examines the contribution of non-health sectors, health service structure and functions, community participation, intersectoral coordination, international health regulations, natural and international health agencies to primary health care. Analyses of the primary health care approach to the promotion and maintenance of health and development are included.

**Assessment**

55% Coursework, 45% Final Examination

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**COURSE CODE: PBHE 6600**

**TITLE: Environmental Health**

**CREDITS: 3**

**Description**

This course provides a general overview of environmental health, its scope and practice. Emphasis is placed on the interrelationship between man and his environment and the resulting impact on health. The vast dimensions of the environment including air, land and water and related issues including physical, biological and chemical agents known to be harmful to health is included.

**Assessment**

60% Coursework, 40% Final Examination

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**COURSE CODE: PBHE 6900**

**TITLE: Research Methodology**

**CREDITS: 2**

**Description**

Covers principles involved in the writing of a research proposal,

design of investigations, methods of data collection and report writing. This is followed by an application of principles in planning and conducting a research project that is examined externally as part of the examination process. Research projects of students in the Health Education and Promotion track must have a Health Promotion slant and include qualitative methods.

**Assessment**

100% Coursework

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**COURSE CODE: PBHE 6920**

**TITLE: Project Mgt and Integrated Knowledge Application**

**CREDITS: 1**

This course has 2 broad aims. One is to develop the student's ability to plan and implement substantial public health projects and the second is to encourage them in applying in an integrated way, the knowledge and skills gained from the breadth of the curriculum.

**Assessment**

100% Coursework

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**COURSE CODE: PBHE 6925**

**TITLE: Computing for Public Health**

**CREDITS: 0**

This course provides a structured introduction to computer programmes and skills necessary for the modern public health practitioner. Recognizing that students have varying levels of computer literacy, this course will comprise entirely of guided computer lab exercises to improve computer literacy and enhance skills and competencies necessary for utilizing the power of computing in public health work.

The emphasis throughout will be on the appropriate use of software to efficiently manage public health projects.

**Assessment**

100% Coursework

**COURSE CODE: PBHE 6930**

**TITLE: Qualitative Research Methods**

**CREDITS: 2**

**Description**

This course describes and discusses various methods of qualitative research. Emphasis is placed on the development of skills and the practical application of such methods of research to health education, health promotion and public health.

**Assessment**

100% Coursework

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**COURSE CODE: PBHE 6990**

**TITLE: Research Project**

**CREDITS: 7**

**Description**

The overall goal of the research project and paper is to provide students with the opportunity to integrate knowledge and skills acquired through the programme by addressing a research question that is relevant to public health in the Caribbean. In addition through this course, the student will gain and demonstrate knowledge and experience in project management and writing up of a substantial piece of work.

Although most of the work for this course takes place in the summer session, preparatory work begins in semester 1 when the student identifies a topic and supervisor. A list of topics and potential supervisors is provided, although students are free to propose and work up their own topics so long as they can identify a suitable supervisor. By early in semester 2, the student will need to have developed a detailed protocol and to have submitted their proposal for IRB approval.

**Assessment**

100% Coursework



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