

**UNIVERSITY OF THE WEST INDIES**  
**Faculty of Medical Sciences**  
**Mona**  
**REGULATIONS**

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These regulations have been developed in accordance with the Graduate Degree Regulations as follows (from the Manual of Procedures for Higher Degrees):

112. University's Regulations for Graduate Diploma and Degrees may be supplemented by Faculty Regulations which have been approved by the Board. Faculty Regulations do not take precedence over the University's Regulations for Graduate Diplomas and Degrees.
113. Faculty Regulations govern those aspects of a degree programme which are specific to Departments or Faculties. These may include the mode of assessment by course work, the length of a Project Report or the deadline date for submission of the Project Report or Research Paper.
114. Candidates should consult the specific Faculty Regulations which the Board has approved for their degree programmes. Faculty Regulations are amended from time to time, and candidates should ensure that they refer to the regulations currently in force by consulting the Head of Department, Faculty Dean or Campus Registrar.

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(These Regulations apply to students who entered the programmes up to academic year 2008/2009)

## **DOCTOR OF MEDICINE (DM)**

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 specialties and subspecialties. The basic entry requirement is a medical degree with eligibility for registration in the country of study.

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. 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.

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 Thesis along with satisfactory performance in written, clinical and oral examinations. Entry into the final examination is dependent on satisfactorily completing the intermediate stages and project/case book/thesis requirements and as is detailed in the individual regulations.

The intermediate stages vary by programme. The Part I 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 and is of varying duration. Entry to the Part II will be dependent on satisfying the requirements of the Part I, and the requirement of the Part II must be satisfied for entry to Part III (where there is a Part III).

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

## SECTION I

### GENERAL REGULATIONS

1. There are regulations leading to the Doctor of Medicine (DM) in:
  - Anaesthetics & Intensive Care
  - Haematology
  - Family Medicine
  - Microbiology
  - Medicine
  - Obstetrics and Gynaecology
  - Paediatrics
  - Pathology
  - Psychiatry
  - Radiology
  - Surgery
    - General
    - Cardiothoracic
    - Emergency Medicine
    - Neurosurgery
    - Ophthalmology
    - Orthopaedics
    - Paediatric
    - Otorhinolaryngology (ORL)
    - Urology

#### **Objectives**

2. These programmes aim to produce, for territories served by the University of the West Indies, individuals with sufficient knowledge and skills to fill consultant posts in the appropriate disciplines.

#### **Requirements for Entry**

3. The applicant should be:
  - a) a graduate in medicine of a University or Medical School recognized by the University of the West Indies.

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- b) registrable in the territory or territories in which the programme will be done. Criteria for registration should be obtained from the relevant medical council.
4. Applicants will be eligible for entry after completing their Internship and for some programmes work experiences. See individual regulations.
5. Subspecialties have specific requirements – see individual regulations.

### **Date of Entry**

6. 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. 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.
7. The applicant will be informed of the date of entry by the relevant Campus Registrar.
8. For purposes of the above two paragraphs, the successful applicant must furnish evidence of being in a recognised post.

### **Registration**

9. Students are required to register each year of the course of study. Registration involves 3 components:
  - Online selection of course and approval of academic programme;
  - Dean's approval; and
  - Financial clearance.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

10. Registration is done once per year, in August/September of each year. Students can complete the on-line registration process by accessing the Students Administration System (SAS) on the UWI Website.
11. After completing the process students are advised to check for Dean's approval and financial clearance.

### **Course of Study**

12. The duration of all the DM programmes varies from a minimum of four years to a maximum of 6 years – see individual regulations.
13. The programme will normally take place at the University Hospital of the West Indies or at institutions in the contributing territories recognized 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, the FMS Committee for Graduate Studies and the Campus Committee for Graduate Studies and Research.
14. 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.
15. Each DM student must spend 46 weeks each year in the programme. Students can have a total of six weeks leave per annum (3 weeks in every six months).
16. Details of the programmes may be obtained from the Chairmen of the Specialty Boards.

### **Exemption**

17. Students who have completed studies in recognized hospitals or institutions and who want exemptions must apply to the Specialty Board of the appropriate section of the programme, where such exemptions are provided for in the regulations.

### **Leave of Absence**

**(see Manual of Procedures for Graduate Diplomas and Degrees)**

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

18. 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.
19. Leave of absence shall not be granted for more than one academic year in the first instance. A candidate may apply for a second year through the Specialty Boards and the Faculty Committee for Graduate Studies, but further extensions will be at the discretion of the Specialty Board.
20. Students who absent themselves without permission may have their names removed from the register of graduate students.

### **Assessment**

21. 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.
22. Students with unsatisfactory records will be encouraged to improve; but if poor performance persists they will not be allowed to complete the programme.

### **Examinations**

23. Candidates shall be examined by means of one or more of the following:
  - (a) written examinations
  - (b) coursework as set out in the individual regulations
  - (c) oral examinations
  - (d) clinical examinations
24. Before admission to any examination, candidates must be certified by their supervisors as having completed the relevant part of the programme.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

25. The Part I examination must be completed within one calendar year of the first attempt. See individual regulations for the rules governing subsequent Parts.
26. No candidate will be allowed more than two attempts at any one examination.

### **Project Reports and Case Books**

27. 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.
28. Case books/project reports are to be submitted to the DM Coordinator six months before the written examination. The books/projects will be submitted to the FMS Graduate Studies, with the name of the external examiner, which will then forward them to the Office of Graduate Studies and Research.
29. The case books/project reports will be returned to the candidates prior to the examinations with the recommendations for corrections, where applicable. Candidates are required to make all corrections and submit the final document, both as hard copies and on CDs, to FMS Graduate Studies along with certification from supervisors, in order to be eligible for the award of the degree.

**N.B. The Regulations for each Specialty must be read in conjunction with these General Regulations.**

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

## SECTION II

### SPECIAL REGULATIONS

#### I. DM ANAESTHESIA AND INTENSIVE CARE

##### **Requirements for entry**

1. (See general regulations – Doctor of Medicine)
2. Applicants will be eligible for entry after completing their internship.
3. 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.

##### **Date of Entry**

4. (See general regulations - Doctor of Medicine)

##### **Course of study**

5. This section should be read in conjunction with the general regulations Doctor of Medicine. 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.
6. 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.
7. 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

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Studies. 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.

8. The course will be 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 the choice or assignment of rotations, the elective period and direction in the conduct of their research and all other relevant matters.
9. 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 Research and the University Senate.
10. The programme consists of three parts:

**Part I:**

11. The Part I is of one year's duration. In those hospitals where only adults are treated, candidates 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.
12. Provided that 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 satisfactory assessments and performance in Part I Examination.

**Part II:**

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

13. The Part II is of one year's duration. At the end of this year, provided the in-course assessments are satisfactory, the Part II Examination will be taken. Entry to Part III of the course will depend on a satisfactory performance in the Part II examination.

**Part III:**

14. The Part III is of two years 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.
15. A maximum of three (3) months may be spent in a course of study in an affiliated area eg research methodology, epidemiology, teaching methods, medical administration etc. provided that prior approval has been obtained from the Specialty Board in Anaesthesia and Intensive Care.
16. During the Part III, rotations through all anaesthesia subspecialties must be undertaken. These include cardiothoracic, faciomaxillary, otorhinolaryngology, paediatric, obstetric, ambulatory and neuroanaesthesia must be undertaken. 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.
17. A list of accredited hospitals may be obtained from the Graduate Studies Section in of the Dean's Office. Some are accredited only for the Part I of the course; others are accredited to provide training in the Part II of the course for a specified time. **To gain credit for such**

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**a period the candidate must submit a satisfactory assessment report from their supervisor.**

### **Exemptions**

18. 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 through the Specialty Board and the FMS 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.
19. Students having completed at least one year training in anaesthesia and holding a suitable qualification from an institution recognized by the UWI may apply and be granted exemption from the Part I examination.
20. Exemptions from Part II may be allowed to those who hold the Primary FRCA, Primary FRACI, or equivalent. 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 both the Parts I and II of the programme.
21. In order for such students to be eligible to sit the Part III examination, they are required to spend a minimum of one (1) year in the programme and fulfill all the requisite aspects of the Part III of the programme i.e. an acceptable casebook/pilot project/research project submitted six (6) months prior to the final examination, an acceptable case log/minimal competencies and satisfactory assessments.
22. All requests for exemptions should be made in writing by the student to the University Registrar through the Chairman of the Faculty

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Committee for Graduate Studies. This request will then be forwarded to the Board of Graduate Studies and Research through the Campus Committee.

### **Vacation Leave**

23. 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).
24. A student 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 have to repeat the six months in which the time was lost.

### **Leave of Absence**

25. See Manual of Procedures for Graduate Diplomas and Degrees. 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.
25. 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.
26. Students who absent themselves without permission may have their names removed from the register of graduate students.

### **Assessment**

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

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28. 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**

29. All students must submit to the Campus Committee for Graduate Studies through the FMS Committee for Graduate Studies, at least six months before the final (Part III) examination, EITHER:

a) A casebook of twenty cases. These cases should illustrate the range of clinical conditions encountered in the practice of Anaesthesia and Intensive Care and must include a minimum of five (5) Intensive Care cases. 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

b) 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 12,000 words and must follow the University's Guide for the Preparation of Theses, Research Papers and Project Reports.

or

c) A casebook of ten cases and a project report eg. a pilot project not exceeding 8,000 words. The latter could provide the basis to conduct a research project on clinical material to be later developed into a publication.

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d) Any of the preceding alternatives chosen be previously agreed on by the Specialty Board and the work carried out under the guidance of a supervisor appointed by the Campus Committee for Graduate Studies on the recommendation of the Specialty Board.

30. 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.
31. Students are advised to discuss the preparation of case reports with their Supervisor(s) while the book is in preparation and should 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 anaesthesia & intensive care by the students.
32. Following the submission of the work, the examiners may:
- a) accept the work and the student proceed to the examinations  
or
  - b) accept the work with modification, which must be carried out in the time specified and resubmitted to the Specialty Board.  
or
  - c) 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 Anaesthesia and Intensive Care.

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33. The case book, project report or 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 III examination must be attempted for the first time within one year of the acceptance of the case book or research project.

### **Case log and minimal competencies**

34. Students are required to keep a record of all anaesthetic 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.
35. The following **three** (3) requirements must be completed before the Part III examination.

1. A satisfactory standard of in-course assessments
  2. Case log & minimal competencies
    3. Project Report and/or Case book or Research Project Syllabus
36. A detailed syllabus for the course is available from the Faculty Office.

### **Examination**

37. Before admission to any examination, candidates must be certified by their supervisors as having completed the relevant parts of the programme.
38. Examinations are in three parts, Part I, Part II and Part III (DM Anaesthesia & Intensive Care). They are normally held twice per year in May/June and November/December and rotate amongst the three university campuses.

### **Part I**

39. The Part I examination is held at the end of the Year 1 and comprises:

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

40. Candidates will be invited to an oral examination depending on their performance on the written and multiple choice questions papers. Candidates receiving less than 45% on the written paper and a multiple choice question papers will not be invited for the orals as this represents an irretrievable situation.
41. On successful completion of Part I, 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 I examination.

### Part II

42. The candidate must sit the Part II examination within two (2) years, that is at the end of Year 2. The Part II examination consists of:
- a) a written paper and a multiple choice question paper
  - b) an oral examination
43. Candidates will be invited to an oral examination depending on their performance on the written and multiple choice question papers.

### Part III

44. The Part III examination comprises:
- a) two written papers
  - b) a clinical examination
  - c) an oral examination
45. 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 Campus Committee for Graduate Studies and Research to defer the date of the first sitting. Candidates must register for the examination at the appropriate time.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

46. Should any candidate fail the examination of any Part at the first attempt, completion of that part must be within one calendar year of the first attempt.
47. No student will be allowed more than two attempts at any one examination. Failure after the second attempt necessitates withdrawal from the programme. Re-admission of candidates will be in accordance with the University regulations for Graduate Diplomas and Degrees.
48. Candidates must comply with the University Regulations on Examinations for Higher Degrees.

### **Completion of the Programme**

49. Students will be considered as having successfully completed the programme when the following FOUR requirements have been met:
  - a) Satisfactory performance of all rotations.
  - b) Acceptance of their certified case log/minimal competencies.
  - c) Acceptance of the Case Book or Research Project and submission of completed book.
  - d) Satisfactory performance in the Part I, II and III examinations.
50. Failure to complete the programme in the prescribed times will require withdrawal from the programme.

## **II. DM FAMILY MEDICINE**

1. Regulations currently being revised.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

### III. DM INTERNAL MEDICINE

#### Requirements for Entry

1. See general regulations for DM degree
2. Applicants for entry to the DM Internal Medicine programme should, in addition to the general requirements, show proof of some exposure to a Casualty/Accident and Emergency Department or similar experience in an approved hospital or community based institution, and should have completed 6 months in general medicine in an approved institution/hospital. Candidates will not normally be eligible for entry until 18 months from the start of their internship.

#### Course of Study

3. The DM programme in Internal Medicine is a 4-year programme and consists of two parts as follows:

##### Part I ((Years 1 and 2)

4. A duration of two years and includes one year in General Internal Medicine in approved institutions where the students will be working in both in-patient and out-patient settings under the supervision of senior residents and consultants.
5. During the Year 2, the resident is assigned to a rotation in subspecialties at approved hospitals or institutions. The residents pursue 10-week rotations in the following subspecialties: Cardiology, Neurology, Nephrology, Gastroenterology, Endocrinology and Pulmonology. The residents should have exposure to all six subspecialties before the end of the second year.

##### Part II (Years 3 and 4)

6. A duration of two years of which in Year 3 (the elective year) students will be substantially engaged in acquiring research skills while continuing clinical work and the candidate will be required to do a research project. This elective year allows the resident the choice of

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spending it either at the teaching hospital or at any other approved Institution within the Caribbean region or outside. The residents are allowed to select the clinical or laboratory area they would like to work in. Specialty Board approval of the elective is required.

7. Year 4 will be spent acquiring further intensive training in Internal Medicine. During this year, the residents return to the Teaching Hospital for further intensive training in General Internal Medicine.

### **Course Supervision**

8. The course will be under the general supervision of the respective Head of the Department or his nominee. Each student will be assigned to an academic advisor, who is a member of the academic department. The advisor will provide academic guidance as to the choice or assignment of rotations, the elective period and direction in the conduct of research and all other relevant matters.
9. The Specialty Board in Medicine is in charge of the programme.

### **Exemption**

10. Students who have completed periods of study in Internal Medicine in approved hospitals or institutions may apply through the Specialty Board and the Faculty Committee for Graduate Studies for exemption from the appropriate section of the programme.

### **Assessment**

11. Each student will be assessed by examination every six months. During the second year, students will be formally assessed after each rotation. Also, students will be assessed by their consultant supervisor monthly. If the assessments are found to be unsatisfactory, the Specialty Board may recommend one or more of the following:
  - a) Counselling
  - b) Remedial work
  - c) Repeating the unsatisfactory rotations with consequent delay of the examination.
  - d) Withdrawal from the programme, if poor performance persists

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

### **Vacation Leave**

12. 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 Year 2 students can only take one week out of every rotation.
13. A candidate who has been absent from the programme for more than six weeks without approval in any one year will be considered to have failed to fulfill the programme's requirements for that year and will have to repeat the time of absence.

### **Leave of Absence**

14. See Manual of Procedures for Graduate Diplomas and Degrees.
15. 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 and must first be approved at the Specialty Board. The application must be accompanied by a statement of the reason for the application.
16. 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.
17. Students who absent themselves without permission may have their names removed from the register of graduate students.

### **Research Project**

18. All Students will be required to do a research project for publication. This project should have been previously agreed on by the Specialty Board during the Part I programme and the project commenced in Year 3 under the guidance of a supervisor appointed by the Specialty

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

Board or the Head of the Department or the Director of the programme.

19. 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.

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

a) accept the work allowing the student to proceed to the examination

or

b) reject the work, with recommendations regarding changes, additions, or revisions necessary for acceptance. The examiners will indicate a deadline for resubmission of the work.

21. 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 revision the students will not be allowed to sit the final examination and a new date will be set.

### **Examinations**

22. The DM Medicine Examination consists of two parts: Part I and Part II.

#### Part I

23. 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 examinations and monthly assessments) they are allowed to take the Part I DM examination. This consists of:

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

- a) written papers (multiple choice questions – Paper I and essay – Paper II)
  - b) a clinical examination (objective structured format)
24. The candidate must pass all parts of the examination, that is Paper I, Paper II and the clinical 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.

### Part II

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

- a) written papers (multiple choice questions – Paper I and essay – Paper II)
  - b) a clinical examination (objective structured format)
  - c) an oral examination.
26. Candidates must pass all parts of the examination, that is Paper I, Paper II, Clinical and Oral examinations. Candidates who fail to satisfy the examiners in Part II of the examination at the first attempt will be required to make one further attempt within one year and if unsuccessful will be required to withdraw.

## **IV. DM MICROBIOLOGY**

### **Requirements for entry**

1. Candidates must be fully registered medical practitioners in one of the territories of the Commonwealth Caribbean.
2. Applicants will be eligible for entry after completing their internship.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

## **Date of Entry**

3. (See General Regulations - Doctor of Medicine)

## **Course of study**

4. This should be read in conjunction with the General Regulations for the Doctor of Medicine.
5. 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 at the Microbiology Department, of University of the West Indies.** 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".
6. The course will be under the general supervision of the Head of the Department. The Director will normally be the Chair of the Specialty Board in Microbiology. Each student will be assigned to a supervisor, who is a member of the Specialty Board in Microbiology. The supervisor in consultation with the Head of Department will provide academic guidance as the choice or assignment of rotations, the elective period and direction in the conduct of their research and all other relevant matters.
7. The Specialty Board in Microbiology 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.
8. The programme consists of two parts:

## **Part I:**

9. The first Part is of two years duration. The focus of Part I is the understanding of the microbiological basis of infectious diseases. It includes systematic studies of the groups of organism causing disease in humans including viruses, bacteria, fungi and parasites. It addition it seeks to provide students with an understanding of the

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

immunological basis of diseases. A large portion of the training is dedicated to the laboratory diagnosis of microbial infections.

10. The Part I examination is taken at the end of the second year. Admission to the second part depends on satisfactory assessments and performance in Part I Examination.

**Part II:**

11. The second part is of two year's duration. At the end of this period, provided that the candidate has performed satisfactorily, the Part II Examination will be taken.
12. The focus of Part II is the clinical application of the knowledge gained in part one and the conduct of a research project. The DM makes the doctor eligible for consultant status in Medical Microbiology and Part II of the course involves clinical consultation in addition to strong laboratory training. Clinical training through lectures, seminars, laboratory work and in hospital- consultations will involve among other things, appropriate use of antimicrobial agents including resistance monitoring and development, antimicrobial policy and guidelines, nosocomial infection and control of hospital infections.
13. A maximum of one year may be spent in a course of study in an affiliated discipline such as Anaesthesia and Intensive Care, Internal Medicine, Infectious Diseases, Surgery, research methodology, epidemiology, teaching methods, medical administration provided that prior approval has been obtained from the Specialty Board in Microbiology. .
14. During the second part, rotations through all microbiology subspecialties must be undertaken. These include bacteriology, virology, mycology, immunology, molecular biology and parasitology. Teaching and training in teaching methods and Epidemiology and Research Methods are integral components of the programme. All trainees should appreciate the need for research in

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

the field and are encouraged to participate in research efforts of department members.

15. Candidates who spend time in other laboratories on elective who wish to gain credit for such a period must submit a satisfactory assessment report from his/her supervisor.

### **Exemptions**

16. Medically qualified candidates who hold the MSc (Medical Microbiology) of this university or similar qualifications may apply to the Campus Committee for Graduate Studies through the Specialty Board and the FMS 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 Microbiology 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.
17. In order for such students to be eligible to sit the Part II examination, they are required to spend a minimum of two years in the programme at the UHWI or other approved training facility.
18. 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.

### **Vacation Leave**

19. 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).
20. A student 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 have to repeat the six months in which the time was lost.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

## **Leave of Absence**

21. See Manual of Procedures for Graduate Diplomas and Degrees. 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.
22. 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.
23. Students who absent themselves without permission may have their names removed from the register of graduate students.

## **Assessment**

24. Continuous assessment of the candidate's performance is carried out by his/her supervisor and recorded and reported every semester.
25. If the assessments are found to be unsatisfactory, the Specialty Board may recommend one or more of the following:
  - a) Counselling/academic warning in writing
  - b) Remedial work
  - c) Repeating the unsatisfactory rotations
  - d) Withdrawal from the programme, if poor performance persists

## **26. Research project in Clinical Microbiology**

All students must submit to the Campus Committee for Graduate Studies through the FMS Committee for Graduate Studies, at least six months before the final (Part II) examination a clinical 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.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

27. The research project in Clinical Microbiology report should be submitted for assessment at least six months before the date of the final examination.

### **Examination**

28. Before admission to any examination, candidates must be certified by their supervisors as having completed the relevant parts of the programme.
38. Examinations are in two parts, Part I and Part II (DM Microbiology). They are normally held twice per year in May/June and November/December.
39. The Part I examination is held at the end of the second year and comprises:
- (a) Written papers
  - (b) A practical examination
  - (c) An oral examination

The Part II examination is held at the end of the fourth year and consists of:

- a) Written papers
  - b) A practical examination
  - c) A clinical research project report
  - d) An oral examination
40. 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.
41. No student 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.
42. Candidates must conform to the University Regulations on Examinations for Higher Degrees.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

### **Completion of the Programme**

43. Students will be considered as having successfully completed the programme when the following THREE requirements have been met:
- e) Satisfactory performance of all rotations
  - f) Acceptance of the Clinical Research Project Report
  - g) Satisfactory performance in the Part I and II examinations
44. Failure to complete the programme in the prescribed times will require withdrawal from the programme.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

## V. DM (OBSTETRICS & GYNAECOLOGY)

### Requirements for Entry

1. See general regulations – Doctor of Medicine
2. In addition to the general regulations, candidates will not be eligible for entry until at least one full year after completing their internship and must have had at least six months 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

3. The course of study will be a minimum of four years from the date of entry and is divided into two parts.
4. The first part (Part I) 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.
5. The second part (Part II) 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.
6. 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

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

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

### **Course Supervision**

8. The course will be 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 Obstetrics and Gynaecology. 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.
9. The Specialty Board in Obstetrics and Gynaecology is in charge of the programme.

### **Vacation Leave**

10. Each DM student may apply for and is eligible for a total of six weeks vacation per annum (3 weeks in every 6 months) but must spend 46 weeks each year in the programme.
11. 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 his or her programme.
12. Students who absent themselves without permission may have their names removed from the register of graduate students.

### **Assessment**

13. Students will be assessed (by observation, orally or in writing) at the end of each rotation and the assessment will be recorded on prescribed forms. A satisfactory standard of in-course assessments is mandatory prior to taking the Part I and Part II examinations.
14. 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.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

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

**Case Book / Project**

16. All students must submit to the Specialty Board, or Director of the Postgraduate programme at least six months before the final (Part II) 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 thesis. 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.

17. Following the submission of the work, the examiners may

a) accept the work, and the candidate proceed to the examination

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

**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**

- 18. Examinations are in two parts: Part I and Part II (Final). No candidate will be allowed more than two attempts at either examination.
  
- 19. The **Part I Examination** is held at the end of the first year and comprises:
  - a) a written paper
  - b) and an oral examination

in Obstetrics and Gynaecology and related disciplines in the basic sciences;
  
- 20. The Part II 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
  
- 21. The Part II Examination must be taken within one year of the submission of the project report or case book.
  
- 22. The Part II examination must be completed within 12 months of the first attempt.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

## VI. DM (PAEDIATRICS)

### **Qualifications for admission**

1. 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.
2. Evidence of undergraduate medical qualification from an institution acceptable to the Faculty of Medical Sciences, The University of the West Indies, must be provided.
3. 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.
4. Candidates will be required to submit a written application and attend an interview to be eligible for selection to the programme.

### **Course of Study**

5. 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.
6. There are two parts to the course – Part I (Years 1 and 2) and Part II (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.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

7. 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 and a six month elective period.
8. 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.
9. 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.
10. An elective period of six months is to be taken during Years 3 to 4 after successfully completing the Part I examination. This elective period must be approved by the Specialty Board prior to commencement.

### **Leave of Absence**

11. The maximum leave of absence allowed from the programme is six weeks in any one year. A candidate who has been absent from the programme for more than six weeks in one year would be considered to have failed to fulfilled the programme's requirements for that year.

### **Assessment**

12. Continuous assessment of the candidate's performance is carried out by his/her supervisors, who are members of the Specialty Board in Child Health).
13. If the assessments of the candidate are found to be unsatisfactory the Child Health Specialty Board may recommend one or more of the following:

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

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

## **Research Project**

- 14. The candidate must submit a research project on Child Health or related area at least six months before the completion of the Part II programme.
- 15. 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.
- 16. The acceptance of the research project by the Specialty Board is a requirement for eligibility to sit the Part II examination.
- 17. Following submission of the project the examiners may
  - a) accept the work
  - or
  - b) reject the work, and outline what additional or new work needs to be carried out and when the work should be resubmitted.

## **Examination**

### **Part I**

- 18. Trainees will be eligible to sit the Part I 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 I examination.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

19. The Part I examination consists of
  - a) one multiple choice question paper
  - b) a clinical examination
  - c) an oral examination.

## **Part II**

20. Candidates will be eligible to sit the Part II examination two years after successful completion of the Part I examination but not greater than four years after at the next available examination. The candidate must have satisfactorily completed the four years of the DM programme.
21. The Part II examination consists of
  - a) two written papers, which may include multiple choice questions
  - b) A clinical examination
  - c) An oral examination.
22. The Part II examination must be attempted for the first time within one year of the acceptance of the research project.
23. Candidates are allowed two attempts at the Parts I and II examinations respectively. Failure after the second attempt in either part necessitates withdrawal from the programme. The student can not reapply to the programme after they withdrew.
24. The Part II examination must be completed within 12 months of the first attempt.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

## VII. DM (PATHOLOGY)

The Department of Pathology offers DM degrees in Anatomical Pathology, Chemical Pathology and Haematology.

### A. ANATOMICAL AND CHEMICAL PATHOLOGY

#### **Requirements for entry**

1. (See general regulations – Doctor of Medicine)
2. Applicants will be eligible for entry after completing their internship and Senior House Officer Rotations. Entry is subject to the approval of the Pathology Specialty Board with ratification by the Faculty Committee for Graduate Studies.
3. 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.

#### **Date of Entry**

4. (See general regulations - Doctor of Medicine)

#### **Course of Study**

5. This should be read in conjunction with the general regulations - Doctor of Medicine. The DM Anatomical Pathology and Chemical Pathology programmes are four year graduate courses which aim to provide the graduate with the knowledge and skills to function as a consultant Anatomical or Chemical Pathologist equipped for independent practice in hospital-based and stand-alone clinical laboratories.
6. 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.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

7. The programme will be a minimum of four years (see Exemptions) from the date of entry. The course of study will normally take place at the University Hospital of the West Indies or at institutions in the contributing territories recognized by the University for this purpose; but up to one year's elective period may be spent at an approved institution in or out of the Caribbean provided prior approval is obtained from the Board for Graduate Studies and Research through the Faculty Committee for Graduate Studies. Throughout the programme, candidates must hold recognised posts in accredited hospitals or be on the elective period approved by the Board for Graduate Studies and Research.
8. The course will be under the general supervision of a Director, nominated by the Department and appointed by the Campus Committee for Graduate Studies and Research. The Director will normally be the chair of the Specialty Board in Pathology. Each student will be assigned to a supervisor, who is a member of the Specialty Board in Pathology. 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.
9. The Specialty Board in Pathology is in overall charge of the programme and is the sole and final authority on all matters concerning the programme.
10. The programme is divided into two parts: Part I and Part II

### **Part I – Anatomical Pathology**

11. The first part (Part I) is of a minimum of ninety-two (92) weeks duration, excluding leave and must include training in:
  - a) Anatomical Pathology (including Cytology) – 56 weeks
  - b) Haematology/ Oncology – 24 weeks
  - c) Chemical Pathology – 12 weeks

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

12. Provided the in-course assessments are satisfactory, the Part I examination is taken at the end of the 92 weeks. Admission to the second part (Part II) depends on satisfactory assessments and performance in the Part I Examination.

### **Part I – Chemical Pathology**

13. The first part (Part I) is of a minimum of ninety-two (92) weeks duration, excluding leave and must include training in:
  - a) Chemical Pathology – 46 weeks
  - b) Anatomical Pathology – 23 weeks
  - c) Haematology/ Oncology – 23 weeks
14. Provided the in-course assessments are satisfactory, the Part I examination is taken at the end of the 92 weeks. Admission to the second part (Part II) depends on satisfactory assessments and performance in the Part I Examination.

### **Part II**

15. The second part (Part II) is of a minimum of ninety-two (92) weeks duration, excluding leave. 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 Campus Committee 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 period may be spent in a hospital-based or stand-alone clinical laboratory, which can provide the student with experience not readily available at the hospital at which he/she is employed. Teaching and training in teaching methods, research methodology and laboratory quality assurance and management are also integral components of the programme. All students should appreciate the need for ongoing research in the field and are encouraged to cooperate with research efforts of department/division members.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

### **Anatomical Pathology**

16. During the second part (Part II) in Anatomical Pathology, rotations through the various subspecialties must be undertaken. These include but are not limited to cardiovascular, gastrointestinal, neuropathology, paediatric, and renal pathology.

### **Chemical Pathology**

17. During the second part (Part II) in Chemical Pathology, specialist training in clinical chemistry and laboratory management must be undertaken.

### **Exemption**

18. Students who have completed a period of study in recognized hospitals or institutions may apply to the Campus Committee for Graduate Studies through the Specialty Board in Pathology for exemption from an appropriate part of the programme. Such exemptions can be recommended by the Specialty Board in Pathology only after a period of review and assessment of the student's performance within the programme. Candidates for such exemption must have achieved the level at which proposed exemptions will put them.
19. Students holding a suitable qualification from an institution recognized by the UWI may apply and be granted exemption from the Part I examination.
20. 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 for Graduate Studies and Research through the Campus Committee.

### **Vacation Leave**

21. 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).

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

22. 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 have to repeat the time of absence or as equivalent time to be determined by the Specialty Board.

### **Leave of Absence**

#### **(See Manual of Procedures for Graduate Diplomas and Degrees)**

23. 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.
24. 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.
25. Students who absent themselves without permission may have their names removed from the register of graduate students.

### **Assessment**

26. Continuous assessment of the candidate's performance is carried out by his/her supervisor and recorded every six (6) months. The supervisor will be a member of the Specialty Board in Pathology.
27. 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 rotation(s)
  - d) Withdrawal from the programme, if poor performance persists

### **Research Project**

28. A completed research project is a requirement of the second part of the programme. The research project will be determined in

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

consultation with the supervisor. 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.

29. The completed research project must be submitted six months prior to the Part II examination.
30. The following requirements must be completed before the Part II examination:
  - a) A satisfactory standard of in-course assessments
  - b) Project Report

### **Examinations**

31. Before admission to any examination, candidates must be certified by their supervisor as having completed the relevant parts of the programme.
32. The examination consists of two parts: Part I and Part II. They are normally held twice per year in April/May and October/November
33. Candidates are eligible for the Part I examination after completion of 24 months (including leave) of appropriate training and it is intended to test the student's knowledge of the basic sciences as applied to all subspecialties of Pathology. It consists of:
  - a) two written papers which may include multiple choice questions
  - b) a practical examination
  - c) an oral examination
34. On successful completion of Part I, 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 I examination.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

35. The Part II examination consists of:
  - a) two written papers which may include multiple choice questions;
  - b) a practical examination
  - c) an oral examination.
  
36. 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.
  
37. Candidates must pass all components of the examinations to be deemed to have passed the examination. Should any candidate fail the examination at the first attempt, completion of this part must be within one calendar year of the first attempt.
  
38. No student will be allowed more than two attempts at any one examination. Failure after the second attempt necessitates withdrawal from the programme. Re-admission of candidates will be in accordance with the University regulations for Graduate Diplomas and Degrees.
  
39. Candidates must conform to the University Regulations on Examinations for Higher Degrees

### **Completion of the Programme**

40. Students will be considered as having successfully completed the programme when the following requirements have been met:
  - a) satisfactory performance of all rotations
  - b) completion of the Research Project
  - c) satisfactory performance in the Part I and II examinations
  
41. Failure to complete the programme in the prescribed times will require withdrawal from the programme.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

## **B. DM (HAEMATOLOGY)**

### **Requirements for Entry**

1. See general regulations for DM degree
2. Candidates for DM Haematology must have completed 6 months in each of the disciplines of adult and paediatric medicine either prior to or after full registration.

### **Course of Study**

3. The DM Haematology programme will last for a period of 5 years and is divided into two parts: Part I and Part II.
4. Part I (minimum 115 weeks) consists of an introductory period of 23 weeks in an approved course of study in basic general Haematology, followed by a period of 92 weeks in which the candidate will complete the prescribed course of study in adult medicine.
5. Part II includes a minimum period of 92 weeks spent in an approved course of study in clinical and laboratory Haematology, 12 weeks of which must be spent in Haematopathology. Additionally, there is a mandatory 23-week elective period in which the candidate must undertake a research project in any area related to Haematology. The research project should be approved by the candidate's supervisor prior to commencement of the research.

### **Examinations**

6. Before admission to any examination, the candidate must be certified by their supervisors as having satisfactorily completed the relevant part(s) of the training programme.
7. The Part I examination is the DM (Medicine) Part I examination in Internal Medicine.
8. Candidates will be permitted to sit the Part II examination after submitting a satisfactory completed report on their research project. These examinations consist of:

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

- a) two written papers
  - b) a clinical examination
  - c) a practical examination
  - d) an oral examination.
9. The Part II must be completed within 12 months of the first attempt at the Part II examination.
  10. Successful candidates must achieve a passing grade in the written papers and clinical, practical and oral examinations.
  11. No candidate will be allowed more than two attempts at any one examination.

## **VIII. DM PSYCHIATRY**

### **Requirements for entry**

(See general regulations – Doctor of Medicine)

1. Applicants will be eligible for entry after completing their internship. 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.

**Date of Entry** (See general regulations - Doctor of Medicine)

### **Course of study**

2. This should be read in conjunction with the general regulations - Doctor of Medicine. The DM Psychiatry is a four year graduate course 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.
3. On acceptance to the programme there will be a six month probation period during which the candidate's performance

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

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.

4. The programme will be a minimum of four years (see exemptions) from the date of entry. Throughout the programme, candidates must hold recognized 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".
5. The course will be under the general supervision of the Director of the Residents Programme, nominated by the Head of the Department and appointed by the Campus Committee for Graduate Studies. 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 and direction in the conduct of their research and all other relevant matters.
6. The Specialty Board in Psychiatry is in overall charge of the programme. The Head of Section or nominee chairs the Specialty Board. The sole and final authority on all matters concerning the programme is the Campus Board for Graduate Studies and the University Senate.
7. The programme consists of four parts, candidates must be placed in an accredited institution.

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

8. During this period, which lasts twelve months, the students work as a psychiatric resident at an approved general hospital, under supervision. Instruction is given in the Basic Medical

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

Sciences (including Anatomy, Physiology), Psychology and Psychiatry.

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

9. Entry to the second part of the course will depend on a satisfactory performance in the Part 1 examination.
10. During this period which lasts twelve months, the students work as a psychiatric resident at an approved general hospital, under supervision. Instruction is given in Neurology, Psychology and Psychiatry.

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

11. Admission to Part III of the programme depends upon the student's satisfactory performance in the Part 2 examination (see below under examinations).
12. During Part III, the students work as a psychiatric resident at an approved general hospital, under supervision.
13. By the end of the first semester of Year 2 of the programme, the Student will submit to the Specialty Board through his/her supervisor, a project proposal for a research project to be undertaken during Part III of the programme. The completed research project should be submitted to the Campus Committee for Graduate Studies through the Director of the Postgraduate Programme, by the end of September of year 4 of the Programme.

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

14. During this period which lasts twelve months, the students work as a psychiatric resident at an approved general hospital, under supervision.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

15. Students will only be allowed to sit the final examination at the end of Year 4, after submission and acceptance of the research project from Year 3.

### **Institutions accredited for learning**

16. A list of accredited hospitals may be obtained from the Graduate Studies Section in of 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.
17. To gain credit for such a period the candidate must submit a satisfactory assessment report from their supervisor.
18. 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. Each case will be conducted on its own merit.

### **Vacation Leave**

19. 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). 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 have to repeat the time of absence.

### **Leave of Absence**

**(see Manual of Procedures for Graduate Diplomas and Degrees)**

20. A candidate may apply for leave of absence from the programme for academic or personal reasons. Application for

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

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.

21. 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.
22. Students who absent themselves without permission may have their names removed from the register of graduate students.

### **Assessment**

23. Continuous assessment of the candidate's performance is carried out by his/her supervisor and recorded every 3 months for the first year and every 6 months thereafter. The supervisor will be a member of the Specialty Board in Psychiatry.
24. 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

### **Research Project**

25. All students must submit to the Campus Committee for Graduate Studies through the Director of the Postgraduate

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

programme, by the end of September of year 4 of the Programme.

- a) A research project based 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

- b) A formal research project on an area of interest

26. The research project must be done in accordance with the DM Thesis guidelines (UWI).

27. Following the submission of the work, the examiners may:

- i) accept the work and the student proceed to the Part III examinations  
or
- ii) accept the work with modification, which must be carried out in the time specified and resubmitted  
or
- iii) reject the work.

28. The completed research project should be submitted to the Campus Committee for Graduate Studies through the Director of the Postgraduate Programme, by the end of September of year 4 of the Programme.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

29. If the work is found to be unsatisfactory, the student will not be allowed to sit the final Part IV examination.
30. The following **two** (2) requirements must be completed before the Part IV examination:
  - a. A satisfactory standard of in-course assessments
  - b. Accepted Research Project

### **DM Course Outline**

31. A campus specific Course Outline is also available with an outline of all activities and programmes. Before admission to any examination, candidates must be certified by their supervisors as having completed the relevant parts of the programme.
32. Examinations are in four parts, Part I, Part II and Part III and Part IV (DM Psychiatry) they are normally held once per year in May/June, except for part III, the research project, which should be submitted by the end of September of Year 4 of the programme.

### **Part I exam**

33. The Part I examination is held at the end of the first year, candidates are evaluated in the Basic Sciences (Neuroanatomy and Neurophysiology), this exam consists of:
34. Paper 1 - a written paper and Paper 2 – a composite of multiple choice paper examinations (MCQs) and extended matching questions (EMQs).
35. On successful completion of Part I, continuation in the training programme will be dependent on the recommendation of the Specialty Board based on its continuous assessment and the

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

results of the Part I examination. The candidate must sit the Part II examination within 2 years.

### **Part II examination**

36. The Part II examination is held at the end of the second year, in this examination candidates are assessed in Neurology, Psychiatry and Psychology. The exam comprises:
- a) A knowledge based examination in Neurology, Psychiatry and Psychology. This consists of a composite of multiple choice paper examinations (MCQs) and extended matching questions (EMQs)
  - b) A clinical examination in Neurology
  - c) A clinical examination in Psychiatry consisting of two long cases, four vignettes and /or structured questions.

### **Part III examination**

37. There will be no formal examination of this component. It constitutes submission and acceptance of a Research Project.
38. The completed research project should be submitted to the Campus Committee for Graduate Studies through the Director of the Postgraduate Programme, by the end of September of year 4 of the Programme.
39. The following **two** (2) requirements must be completed before the Part IV examination:
1. A satisfactory standard of in-course assessments
  2. Accepted Research Project

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

## **Part IV examination**

40. The Part IV examination is held at the end of the fourth year, candidates are evaluated in the Psychiatry, this exam consists of:

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

## **Pass**

41. A candidate is deemed to pass the examination if they have met the following requirements:

- i) Part I- Pass all parts of examinations
- ii) Part II -Pass all parts of examinations
- iii) Part III- Research Project accepted
- iv) Part IV – Achieved an aggregate of 50% or more and pass at least two of the three long cases.

## **Failure of an examination**

42. 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.

43. **No student 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.

## **Deferral**

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

44. 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.

### **Registration for examination**

45. Candidates must register for the examination at the appropriate time. All candidates must conform with the University Regulations on Examinations for Higher Degrees.

## **IX. DM RADIOLOGY**

1. See General DM Regulations

### **Qualifications for Entry**

2. Candidates are accepted into the programme in July only.
3. Candidates with a poor academic record will not be considered for the programme. A poor academic record is defined as failure of any two or more final examinations during the entire undergraduate programme
4. Candidates are required to have at least one year of clinical experience post internship including a minimum of 6 months in accident and emergency.
5. Special consideration would be given to candidates with prior radiology experience. Applicants who are deemed acceptable may be required to have an interview.

### **Course Supervision**

6. The Specialty Board in Radiology is in overall charge of the programme. The programme will be under the general supervision of a Programme director, nominated by the Head of Radiology Section

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

in consultation with the Head of Department and appointed by the Specialty Board in Radiology. Each student will be assigned to a supervisor who will advise the student as to choice of projects, direction in their conduct of their research, the elective period and all other relevant matters.

### **Course of Study**

7. The DM (Radiology) programme consists of 4 years divided into two parts: Part I and Part II.

#### **Part I** - minimum 48 weeks

8. This consists of radiologic physics, basic radiography, radiology procedures and anatomy.

9. Candidates are required to successfully complete their Part I by the end of year two. If not, they will be required to withdraw.

#### **Part II** - minimum 144 weeks

10. This is a course of study in Diagnostic Radiology, the time to be spent in the Departments and Institutions accredited for this purpose.

11. Trainees will also be given instruction in:

- Basic research methods
- Presentation of scientific papers
- Medical and research ethics
- Quality assurance

12. The candidate's responsibility in discussion with their supervisor includes preparation of a research project, to be decided upon at the beginning of year 2 as well as

- a) an oral presentation to be presented at a minimum of one academic meeting.
- b) a scientific paper which should be submitted for assessment at the end of year two. The report should be suitable for submission for publication in a peer reviewed scientific journal.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

13. Candidates will be required to submit said scientific paper a maximum of 18 months after commencing the project. This will allow ample time for review and corrections. Unless said project/paper is deemed satisfactory by the end of year 3, the candidate will not be allowed to sit DM Part II examinations.
14. Trainees will also be expected to chair interdepartmental review meetings as part of their training, as well as to participate in the training of medical students.

### **Elective Period**

15. Candidates are encouraged to spend up to one year in a specialist department overseas approved by the Specialty Board. This can be from year 2 through year four, the candidate being required to return to the Radiology department UWI, no later than 3 months prior to final DM examinations. GMC registration would be an asset in this regard as there are opportunities for hands on experience in the United Kingdom

### **Exemption**

16. Candidates who have completed periods of study in recognised hospitals or institutions may apply to the Specialty Board for exemption from the appropriate section of the Programme.

### **Assessment**

17. Students will be assessed at least semi annually. Those with unsatisfactory records will be encouraged to improve; but if poor performance persists, any of the following courses of action may be undertaken
  - a) counseling
  - b) remedial work
  - c) repeat rotation
  - d) withdrawal from the programme

### **Mid-term coursework**

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

18. In month 6 or 7 of Year 1 (Part I) there will be a written and oral evaluation which will contribute 10% towards the final grade in the DM Part I.
19. In Year 4, 3 months prior to final exams DM Part II, there will be a similar evaluation which will contribute 10% toward the final DM grade.

### **Leave of Absence**

20. The minimum time stated for the course results in 4 weeks per annum being available for leave of whatever sort, a total of 16 weeks for the duration of the programme. This stipulation will be adhered to except in extreme circumstances. Candidates who absent themselves without the necessary approval will be considered to have voluntarily withdrawn from the programme.

### **Examinations**

21. The DM examinations in Radiology are held once per year, in early to mid-May.
22. **Repeat examinations** may be held six months after the candidate's initial attempt, at the discretion of the Coordinator, in consultation with the Head of the Department, that is the following November. Please note that November exams are for the express purpose of facilitating repeat candidates. Said exams will not be held if there are no candidates repeating examinations.
23. The **Part I Examination** assesses knowledge and diagnostic skills on all the taught on the Part I programme. The examination is held at the end of the first year and consists of:
  - a) two written papers
  - b) film viewing spotter
  - c) an oral examination
24. The **Part II Examination** is held at the end of the fourth year and covers the candidate's knowledge of the full range of diagnostic investigations and intervention procedures. It consists of:

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

- a) two written papers
  - b) a film viewing spotter
  - c) oral and film-reading examination/clinical examination
25. Candidates are allowed only two (2) attempts at each examination. Candidates who are unsuccessful in their Part I examinations in the first instance but successful on the second attempt, will be allowed to sit Part II examinations in Year 4 provided they have fulfilled all other stipulated requirements.
26. The course should be completed within a maximum of 6 years, after which the candidate will be required to withdraw unconditionally.

## **X. DM SURGERY**

### **A. GENERAL SURGERY**

1. See General DM Regulations

#### **Requirements for Entry**

2. The applicant must be:

A graduate in Medicine of a University or Medical School recognized by the University of the West Indies.

- b) Fully registrable in the territory or territories in which the programme of study will be undertaken.
- c) Criteria for medical registration should be obtained from the relevant medical council.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

4. Candidates are required to submit a written application and may be required to attend an interview to be eligible for selection to the programme.
5. 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**

6. The programme consists of two parts and the course of study is a maximum 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.
7. Teaching and training in teaching methods and research methodology/epidemiology are integral components of the programme

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

8. 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.
9. 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.
10. Provided that the in-course assessments are satisfactory, the Part I examination is taken at the end of two years.

### **Part II – Three years**

11. During this period, students are assigned to general surgery rotations with increasing levels of responsibility.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

12. 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.
13. 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.

### **Course Supervision**

14. 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 casebook/research and all other relevant matters.

### **Exemption**

15. Should be read in conjunction with the general regulations.
16. Students who have obtained, by examination, the MRCS, CCBST, CCT or Full Fellowship of any one of the Royal Colleges of Surgeons may apply for exemptions from rotations only from all or part of 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.

### **Vacation Leave**

17. Each DM student may apply for and is eligible for a total of six weeks vacation leave per annum (3 weeks in every 6 months) but must spend 46 weeks each year in the programme.
18. 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

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

the programme's requirements for that year and will be required to extend the time, equivalent to the time lost and as approved by the Specialty Board, for completion of their programme.

19. Students who absent themselves without permission will have their names removed from the register of graduate students.

### **Assessment**

20. Student performance will be assessed (by observation, orally and 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.
21. 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.
22. Entry to Part II is dependent on satisfactory completion of the Part I.
23. The following **three** requirements must be met before the Part II examination:
  - a) reach a satisfactory standard in on-going assessments.
  - b) submit a list of all operations where the candidate was the primary surgeon or assistant surgeon as certified by their supervisors.
  - c) case book or project report
24. 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:

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

- 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 Campus Committee for Graduate Studies and Research on the recommendation of the Specialty Board in Surgery.

or

- c) A casebook of ten cases and a project report eg. a pilot project not exceeding 8,000 words. The latter could provide the basis to conduct a research project on clinical material to be later developed into a publication.

25. 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 ½" 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.

26. Students are required to discuss the preparation of the casebook/project report with their Consultant(s) and/or Supervisor(s) during the preparation of the book. Each should be entered in a log and signed on satisfactorily completed by the supervisor. The writing

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

of the casebook offers the student the opportunity of choosing cases of 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.

27. Following submission of the work, the examiners may:

a) accept the work allowing the student to proceed to the examination

or

b) reject the work, with recommendations regarding changes, additions, or revisions necessary for acceptance. The examiners will indicate a deadline for resubmission of the work.

28. The completed 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.

### **Syllabus**

29. A detailed syllabus for the course is available from the Department of Surgery.

### **Examinations**

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

31. There are two examinations, one each at the end of the Part I and Part II and only 2 attempts are allowed per examination.

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

33. The **Part I examination** consists of two sections:

#### **Section A - Principles of Surgery**

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

Section B - Basic Pathology, Anatomy, Physiology  
(including Biochemistry)

34. The examination must be completed within one calendar year of the first attempt.
35. There will be a written paper, which may include multiple choice questions and an oral examination in each subject.
36. The candidate must pass Section A and at least two parts of Section B to qualify for entry to Part II of the programme. Candidates who are repeating Part I must remain in the programme.
37. 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 I 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.
38. 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.
39. 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**

40. 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:

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

- a) satisfactory performance of all rotations
- b) acceptance of the certified list of operative procedures
- c) acceptance of the Case Book or Research Project and submission of corrected book.
- d) satisfactory performance in the Part I and II examinations

## **B. DM CARDIOTHORACIC SURGERY**

See Regulations for DM General Surgery

1. The Regulations are identical as for General Surgery except for the Course of Study:

### **Course of Study**

2. The program consists of two parts and the course of study is a maximum of six years. The program 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.

### **Part I – Two Years**

3. During this period, residents will be assigned to rotations in General Surgery and the surgical subspecialties, including six months rotation through Cardiothoracic Surgery. One rotation may also be taken through the Section of Anaesthesia and Intensive Care.
4. A maximum of six months may be spent in the Basic Medical Sciences Department (Sections of Anatomy, Physiology, or Biochemistry), the Department of Pathology, or in an approved research project provided that prior approval has been obtained from the Specialty Board in Surgery.
5. Provided the in-course assessments are satisfactory, the Part I Examination is taken at the end of the first two years.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

## **Part II – Four Years**

6. Each DM Resident must spent 46 weeks each year in the program, and can have a total of six weeks leave per annum (three weeks in every six months). An elective period of (usually) no longer than two (2) years may be spent at institutions in or out of the West Indies provided prior approval is obtained from the Specialty Board in Surgery. Such approval must be obtained at least six months before the commencement of the elective period. The elective period must be concluded before the final (6<sup>th</sup>) year of the program.
7. The final year of the program must be spent at the University Hospital of the West Indies, in the role of Senior Resident in Cardiothoracic Surgery.

## **C. NEUROSURGERY**

See Regulations for DM General Surgery

1. The Regulations are identical as for General Surgery except for the Course of Study and Examinations as indicated below:

### **Course of Study**

2. The programme consists of two parts and the course of study is a maximum of six 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.
3. Teaching and training in teaching methods and research methodology/epidemiology are integral components of the programme.

## **Part I – Two Years**

4. During this period, students will be assigned to rotations in General Surgery and the surgical subspecialties. Six months must be spent as a resident in Neurological Surgery. A rotation in critical care medicine may be taken through the Section of Anaesthesia and Intensive Care. A maximum of six months may be spent in the Department of Basic Medical Sciences (Sections of Anatomy,

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

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.

### **Part II – Four Years**

5. During this period, students are assigned to neurosurgery rotations with increasing levels of responsibility.
6. An elective period of no longer than two years may be spent at institutions in or out of the Caribbean provided 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 must be concluded before the final year of the programme.
7. During the final year, the student is normally appointed to the post of Chief Resident. This final year of the Part II programme must be spent at the University Hospital of the West Indies.

### **Examinations**

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

### **D. DM OPHTHALMOLOGY**

See Regulations for DM General Surgery

1. The regulations are similar to General Surgery except for the course of study and examinations as indicated below:

#### **Course of Study**

2. The programme consists of three parts (Part I, Part II, Part III) over a maximum of six years. This programme takes place at the University Hospital of the West Indies or at Kingston Public Hospital. The final year of the programme should be undertaken as an elective at an institution outside of the Caribbean.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

3. Research will be an integral part of the programme.

### **Part I**

4. This will involve basic sciences studies with an emphasis on the eye.
5. Part I lasts two years leading to an examination in which an adequate standard of performance is required before the candidate can proceed to the second Part II of the programme.

### **Part II**

6. During this period the candidate will continue to gain clinical and surgical ophthalmology skills.
7. Part II lasts one years leading to an examination in which an adequate standard of performance is required before the candidate can proceed to the third part (Part III) of the programme.

### **Part III**

8. This final part consists of three years enhancing surgical skills, at least two of which must be spent at the UHWI/KPH and a one year elective period which must be spent at an overseas institution and approved by the Specialty Board.
9. The candidate will be expected to cover all aspects of medicine, therapeutics and surgery for the eye, adnexae and visual pathways.

## **Examinations**

### **Part I**

10. The Part I examination will be undertaken after two years in the programme and consists of:

Section A: Principles of Ophthalmic Surgery

Section B: Anatomy of the head and neck (including embryology and neuro anatomy) basic and ocular pathology including

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

microbiology and biochemistry physiology of eye ,  
adnexae, CNS including related general physiology, and  
General Medicine in association with ocular pathology.

11. Candidates must pass Section A and pass all parts of Section B to qualify for entry into the second part (Part II) of the programme.
12. Candidates who have not completed the Part I examination within one calendar year of the first sitting of the examination will be required to withdraw from the programme
13. Section A: Examination consists of 4 Essay questions (3 hours)

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

### **Part II**

14. This examination will be undertaken at the end of the third year in the programme

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

Section B: Practical Refraction exam & OCSE

### **Part III**

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

- a) Two Papers : MCQs/ Essay
- b) Oral Examination

16. No candidate 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

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

programme after withdrawal. The final Part III examination must be taken within one year of submission of the project or case book (20 cases).

### **Assessments**

17. See regulations for General Surgery

### **Log Book**

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

### **Casebook**

19. 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 area listed below:

- a) Cataract and Refractive Surgery
- b) Cornea
- c) Glaucoma
- d) Paediatrics
- e) Uveitis
- f) Orbit, Oculoplastics, Adnexal and Lacrimal
- g) Neuro ophthalmology
- h) Ocular motility/ Strabismus
- i) Medical Retina
- j) Surgical Retina

20. See Regulations for DM General Surgery for details on the case book.

21. Following the submission of the work, the examiners may

- a) accept the work allowing the student to proceed to the examination.

or

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

b) reject the work, with recommendations regarding changes, additions or revisions necessary for acceptance. The examiners will indicate a deadline for resubmission of the work.

22. 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**

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

- a) Satisfactory performance for each year of the programme
- b) Acceptance of certified list of operative procedure
- c) Acceptance of the Case Book and submission of corrected book
- d) Satisfactory performance in the Part I, Part II and Part III examinations

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

## **E. DM ORTHOPAEDICS**

See Regulations for DM General Surgery

### **Requirements for entry**

1. The applicant must have successfully completed the Part I programme in DM General Surgery which is two years.

### **Part II – Four Years**

2. During this period, each resident will complete rotations at the University Hospital of the West Indies, Bustamante Hospital for Children and the Kingston Public Hospital. Up to one year's elective

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

may be spent at institutions in or out of the Caribbean provided 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. The elective period is limited to the penultimate year only.

3. The final year of the Part II programme must be spent at the University Hospital of the West Indies. The resident will be exposed to all aspects of orthopaedics: adult and paediatric trauma, joint arthroplasty, tumours, spine, infection, sports medicine, arthroscopy, limb lengthening and correction of deformities, non-traumatic adult and paediatric conditions and pain management.

### **Research**

4. Each resident must complete a research paper before being recommended for the Part II examination in orthopaedics. The research paper will be presented either at the Department of Surgery's Research Day or the Research Day of the University of the West Indies, Mona.

### **Resident Assessment**

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

### **Assessment of the programme and consultants by residents**

8. Constructive criticisms are encouraged. This will help the programme director in his discussions with the consultants.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

## **Part II Examination**

9. The following requirements must be completed before the resident is eligible to take the Part II Examination:
  - a) A research project – This must have been presented at a Research Day Conference.
  - b) Satisfactory performance of all rotations
  - c) Acceptance of their certified list of operative procedures
  - d) Acceptance of a Case Book, research thesis or project report
  
10. The Part II Examination consists of:
  - a) Two written papers
  - b) An oral examination which may include clinical material

## **F. DM OTOLARYNGOLOGY**

See Regulations for DM General Surgery

### **Requirements for entry**

1. See Regulations for DM General Surgery
  
2. The Regulations are identical as for General Surgery except for the Course of Study and Examinations as indicated below:

### **Course of Study for Otolaryngology**

3. The programme consists of two parts and the course of study is a maximum of six 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.

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

4. Students will rotate through Otolaryngology for the first six months. During the next twelve months, students will normally be assigned to

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

three-monthly rotations which may include the following: General Surgery, Cardiothoracic Surgery, Plastic Surgery, Neurological Surgery, and Critical Care Medicine. The six-month period prior to the Part I examination will be spent in Otolaryngology.

5. A maximum of six 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.
6. Provided the in-course assessments are satisfactory, the Part I examination is taken at the end of two years.

### **Part II – Four years**

7. During this period, students are assigned to Otolaryngology rotations with increasing levels of responsibility.
8. An elective period of no longer than two years may be spent at institutions in or out of the Caribbean provided 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 must be concluded before the final year of the programme.
9. 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.

### **Examinations**

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

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

## **G. DM PAEDIATRIC SURGERY**

### **Requirements for entry**

1. See Regulations for DM General Surgery
2. These Regulations are identical as for General Surgery except for the Course of Study and Examinations as indicated below:

### **Course of Study**

3. The programme consists of two parts and the course of study is a maximum 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.
4. Teaching and training in teaching methods and research methodology/epidemiology are integral components of the programme.

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

5. During this period, students will be assigned to rotations in General Surgery and the surgical subspecialties. A rotation may also be taken through the Newborn Special Care Nursery.
6. Each DM student must spend 46 weeks each year in the programme and can have a total of six week leave per annum (3 weeks in every 6 months).
7. A maximum of six 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.
8. Provided the in-course assessments are satisfactory, the Part I examination is taken at the end of two years.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

## **Part II – Three years**

9. An elective period of no longer than one year may be spent at institutions in or out of the Caribbean provided 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 must be concluded before the final year of the programme.
  
10. During the final year, the student is normally appointed to the post of Chief Resident. At least 6 months of the final year of the Part II programme must be spent at the University Hospital of the West Indies.

## **Examinations**

11. Candidates will be eligible to sit the Part II examination three years but no greater than four years after successful completion of the Part I examination.

## **H. DM UROLOGY**

See Regulations for DM General Surgery

### **Qualifications for entry**

1. The applicant should be:
  - a) a graduate in Medicine of a University or Medical School recognised by the University of the West Indies.
  - b) fully registered in the territory or territories in which training will take place.

### **Course of Study**

2. The period of training for the DM Urology will be a maximum of five (5) years following full registration. A maximum of six (6) months exemption in the first two years of these courses may be

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

obtained following experience in an approved Casualty Department or Hospital Emergency facility.

3. Training 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: up to two years elective period may be spent at institutions in or out of the Caribbean (approved by the Specialty Board). The elective period is limited to the fourth and fifth year only.
4. Details of the programme may be obtained from the Chairman of the Specialty Board.

### **Exemption**

5. Candidates who have completed periods of study in recognised hospitals or institutions may apply to the Specialty Board for exemption from the appropriate section of the programme.
6. For trainees in the Urology programme, this will be in addition to exemption granted on the basis of their experience in a Casualty Department or a Hospital Emergency facility.
7. Alternatively, if the candidate has graduated from the DM (surgery) Programme, or has an appropriate diploma in General Surgery (eg. Fellowship of one of the Royal Colleges Surgery, UK) combined with experience in General Surgery acceptable to the Sub-Committees on Graduate Studies, a further two (2) years of satisfactory training in an approved urological department would qualify the trainee to sit the final examination for the DM (Urological Surgery).

### **Assessment**

8. Trainees will be assessed at least annually. Those with unsatisfactory records will be encouraged to improve; but if poor performance persists they will not be allowed to complete the programme.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

## **Part I**

9. The first part (Part I) of the programme normally lasts two years. Provided there are satisfactory in-course assessments, the Part I examination is taken at the end of this time.
10. During the first part of the course a maximum of six months may be spent in the Departments of Anatomy, Biochemistry, Pathology, or in an approved research project, provided that prior approval has been obtained from the Specialty Board.

## **Part II**

11. During the second part (Part II) of the programme the trainees must submit one of the following at least six months before the Final (Part II) Examination, either:
  - a) a project
  - or
  - b) a case book of twenty cases with commentaries.
12. See DM General Surgery Regulations re casebook/research project.
13. The project must have been previously agreed on by the Specialty Board and the work carried out under the guidance of a supervisor appointed by that Board. Following the submission of the work the Examiners may:
  - a) accept the work, and the candidate proceed to Examination
  - or
  - b) reject the work, with recommendations regarding changes, additions, or revisions necessary for acceptance. The examiners will indicate a deadline for resubmission of the work.
14. The candidate must have reached a satisfactory standard of in-course assessments before being allowed to enter for the Part II Examination.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

15. All trainees are also required to submit, before the Part II examination, tabulation of all operations performed by them and certified by their supervisor during the course.

### **Examination**

16. Before admission to an examination, trainees must be certified by their supervisors having completed the relevant part of the training programme. The Examination consists of two parts: Part I and Part II.
17. No trainee will be allowed more than two attempts at any one examination.

### **Part I**

18. The Part I Examination must be completed within one calendar year of the first attempt.
19. The Part I Examination consists of two sections:

Section A: Principles of Surgery

Section B: Basic Pathology, Anatomy and Physiology (including Biochemistry)

20. There will be a written paper, which may include multiple choice questions. There will be an oral examination in each subject.
21. The trainee must pass Section A and at least two parts of Section B to qualify for entry to the second part of the programme.

### **Part II**

22. The Part II Examination consists of:
  - a) written papers which may include multiple choice questions;
  - b) an oral examination which may include clinical material.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

23. This examination must be taken within the calendar year of the acceptance of the project report or case book.
24. The Part II examination must be completed within 12 months of the first attempt.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

## **I. DM EMERGENCY MEDICINE**

### **Requirements for entry**

1. The applicant must be:
  - a) A graduate in Medicine of a University or Medical School recognized by the University of the West Indies.
  - b) Fully registrable 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.)
2. Candidates are required to submit a written application and may be required to attend an interview to be eligible for selection to the programme.

### **Course of study**

3. The postgraduate 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.
4. Six months each year are spent in Emergency Room 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 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.
5. 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 six months may be spent outside of the Caribbean (A&E and elective).

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

Overseas elective rotations can be undertaken with the approval of the Specialty Board in Surgery.

## 6. Yearly rotations for D.M. Emergency Medicine programme

Year 1	Year 2	Year 3	Year 4
A&E (6) Anaesthetics (3) Paediatrics (3)	A&E (6) Medicine (3) Surgery (3)	A&E (6) Orthopaedics (3) Psyche/O&G (3)	Family Medicine (3) Elective (3) A&E (6)

7. In addition, all 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.

### Course Supervision

8. The specialty board in Surgery is in overall charge of the programme. The programme will be 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.

### Exemption

9. Should be read in conjunction with the general regulations
10. 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,

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

Obstetrics and Gynaecology and Anaesthesia. Exemption is not automatic and should not be assumed

### **Vacation Leave**

11. Each DM student may apply for and is eligible for a total of six weeks leave per annum (3 weeks in every 6 months) but must spend 46 weeks each year in the programme. This must also be in keeping with the leave regulations at the service institution to which they are assigned.
12. 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 fulfil the programme's requirements for that year and will normally be required to extend the time, equivalent to the time lost and as approved by the Specialty Board, for completion of their programme.
13. Students who absent themselves without permission will have their names removed from the register of graduate students.

### **Assessment**

14. 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.
15. 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.
16. Entry to Part II is dependent on satisfactory completion of the Part I.
17. The following two requirements must also be met before the Part II examination.
  - a) Satisfactory standards in on-going assessments.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

b) Submission of a casebook and a research report

19. All DM 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:-

A case book of ten cases. These cases should reflect the range of pathology seen in the practice of Emergency Medicine, and up to three may be rare cases of unique relevance that may have important educational content for journal publication.

and

A research project. This must be discussed with the Programme coordinator by the start of the second year of the residency programme.

20. 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.

21. 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 thesis. 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.

22. Following submission of the work, the examiners may:

a) Accept the work allowing the student to proceed to the examination

or

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

- b) Reject the work, with recommendations regarding changes additions or revisions necessary for acceptance. The examiners will indicate a deadline for resubmission of the work
23. 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.

### **Syllabus**

24. A detailed syllabus will be available from the Emergency Medicine Division or the Department of surgery.

### **Examination**

25. Before admission to any examination, candidates must be certified by the Programme Coordinator as having completed relevant parts of the programme.
26. 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 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.

### **Part I**

27. Candidates will be eligible to sit the Part I examination two years but not greater than three years after the entry into the programme.
28. 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.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

29. The examination will consist of written, clinical and oral examinations.
- a) The written examination will consist of two papers
    - An MCQ paper of questions covering all five sections of the syllabus
    - A data interpretation paper
  - b) The clinical examination
    - The clinical examination will be in the form of an Objective Structured Clinical Examination.
  - c) The oral examination
    - The oral examination will cover all sections of the Part I course.

Candidates must pass Part I before proceeding to Part II.

## **Part II**

30. Candidates will be eligible to sit the Part II examination at least two years but not more than three years after successful completion of the Part I examination.
31. The Part II examination consists of the following components:
- a) The written paper (Modified essays and data interpretation)
  - b) Clinical Examination (long case plus short cases/OSCE)
  - c) Oral examination (clinical plus non-clinical situations)
  - d) Defense of the Case book/research project ( an oral examination)
32. There are only two attempts at sitting each part of the DM Emergency Medicine examination and failure at both attempts requires the student to withdraw from the programme. Part II must be completed within 12 months of the first attempt.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

### **Withdrawal from the Programme**

33. The student may not reapply to the programme after withdrawal before a period of three years. Candidates will be required to defend their casebooks as a pre-requisite to acceptance of the casebook).

### **Completion of the Programme and award of Degree**

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

- a) Satisfactory performance of all rotations
- b) Acceptance of the Case book and research project and submission of corrected book
- c) Satisfactory performance in the Part I and Part II examinations

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

## SECTION III

### DEGREE OF DOCTOR OF MEDICINE (MD)

1. The following Regulations shall apply to the degree of Doctor of Medicine (MD).

#### **Qualification for Admission**

2. The following candidates are eligible to apply for registration for the MD degree.
3. Graduates in Medicine of this University or of a University or Medical School approved by the University of the West Indies of at least two (2) years standing, and who are fully registered as medical practitioners in the territory or territories in which the research project will be carried out.
4. A candidate who is not a graduate of the University of the West Indies must hold or have held an Academic post in the Faculty of Medical Sciences of the University of the West Indies, or must have engaged in:
  - i) scientific work directly relevant to his profession or
  - ii) in the practice of Medicine and Surgery in Institutions or Teaching Hospitals approved by the University of the West Indies

#### **Course of Study**

5. The MD degree shall be awarded on the basis of examination by thesis.
6. The candidate will be required to discuss the scope of his research project with the senior member of the Faculty appointed as his Supervisor. It is expected that this should occur at an early stage and preferably before embarking on the project.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

7. The thesis must embody a critical account of the results of personal observation or original research in any branch of knowledge related to the curriculum for the degrees of Bachelor of Medicine and Bachelor of Surgery, and should normally be submitted within five (5) years by not less than three (3) years. of approval of the research proposal.
8. The thesis may include work previously published by the candidate but such work must be clearly identified in the thesis in accordance with the Regulations of the University of the West Indies.
9. Submission of the thesis to the University must be as prescribed by the Regulations of the University of the West Indies for Doctoral Theses and must be accompanied by a declaration that the work has been carried out solely, or in the cases where the candidate has been a member of a research group, predominately by the candidate. In the latter instance, work which has not been carried out by the candidate must be identified in the thesis.

### **Examinations**

10. The examinations by thesis shall be as prescribed by the appropriate Regulations of the University of the West Indies for Doctoral Theses.
11. The thesis will be examined by at least three examiners, at least one of whom is an External Examiner appointed for this purpose, by the Board for Graduate Studies acting on behalf of Senate.
12. The candidate will be required to present himself/herself for Oral examination on the subject matter of the thesis at such

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

place as the University may direct, upon such day or days as shall be notified to him by the Registrar in writing.

13. The candidate may also be required to present himself/ herself for Clinical examination.

## **SECTION IV**

### **MASTER OF SCIENCES REGULATIONS**

#### **MSc SPORTS MEDICINE**

##### **Requirements for Entry**

1. The applicant must be:
  - a) A graduate in Medicine of a University or Medical School recognized by the University of the West Indies.
  - b) Fully registrable in the territory or territories in which the programme of study will be undertaken.
2. Criteria for registration should be obtained from the relevant medical council.
3. Candidates are required to submit a written application, copy of curriculum vitae and submit names and contact details of two referees to be eligible for selection to the programme.
4. Practice of medicine for at least 2 years post registration, and involvement in sports medicine is desirable but such experience is not required.

##### **Course of Study**

5. The programme consists of 12 modules including a research project, and two practica. The course of study is a minimum of two years. Teaching is at a distance and involves self-contained reading

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

modules, which divides the course into weekly tasks. The duration of a semester is fourteen weeks. Some modules are seven weeks and are combined with another seven week module.

6. At Weeks 7 and 14 teleconferences will be held with all students.
7. Training in teaching methods and research methodology/epidemiology are included as a module.
8. The student will be given a log book to record requisite hours of involvement in medical coverage of sports events (and training sessions).
9. Practicum I and II are compulsory and will be residential two week courses held initially at a campus of the University. They will be held alternately every year initially, and six monthly if required.

### **Course Supervision**

10. 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.

### **Leave**

11. Being a distant training course, there is no scope for leave of absence. Whereas the weekly tasks are a guide to pace the student, they are not rigid. However the examination at the end of the course is in a fixed week and no exemptions are allowed. Deferment of a semester will only be considered in exceptional circumstances, subject to approval of the Specialty Board. Courses must be completed within one year of completing the module.

### **Assessment**

12. Student performance will be assessed by the following:
  - a) Case reports as prescribed by each module
  - b) Written exam consisting of essay type questions and multiple choice questions, administered at the end of the module. This will

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

be conducted in the student's territory by an invigilator assigned by the University.

- c) Final OSCE type practical examination
- d) Assessment of research project
- e) Assessment of Log book

13. The following requirements must be met before the OSCII examination:

- a) Completion of each module.
- b) Attendance of both practica

### **Syllabus**

14. A detailed syllabus for the course is available from the Department of Surgery.

### **Examination**

- 15. Before admission to any examination, candidates must be certified by their supervisors as having completed all relevant parts of the programme.
- 16. There are two sets examinations, one each at the end module and practical examinations as described previously.
- 17. There will be a written paper, which will include multiple choice questions in each module.
- 18. No candidate will be allowed more than two attempts at any one examination.

### **Practical Examination**

19. The practical examinations of examination techniques and interpretation of diagnostic tests will be held in a campus of the University. It is mandatory to pass these examinations.

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

### **Completion of the Programme**

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

- a) Satisfactory performance of all modules
- b) Acceptable attendance of both practica
  - c) Acceptance of the Research Project and submission of final report
- d) Satisfactory performance in practical examination
- e) The Log Book

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

## APPENDIX I

### ACCREDITED HOSPITALS FOR GRADUATE TEACHING

The Following hospitals have been accredited for all or part of the postgraduate teaching in different programmes. (It is necessary to consult each programme coordinator with regard to the particular hospital and the programme.)

#### **Jamaica**

- University Hospital of the West Indies
- Kingston Regional Hospital (KPH)  
(Residents employed to this hospital must spend three months at the Bustamante Hospital for Children (BCH) in the first year and six months at UHWI in the 2<sup>nd</sup> and 4<sup>th</sup> years)
  - Victoria Jubilee Hospital
  - Bustamante Hospital for Children  
(Residents employed to this hospital must spend six months at UHWI or KPH during the first year, and a further six months at UHWI in the 2<sup>nd</sup> or 4<sup>th</sup> years)
- Cornwall Regional Hospital (CRH)  
(This Hospital has been accredited for six months during first year only)Cornwall Regional Hospital
- Mandeville Public Hospital
- Spanish Town Hospital
- National Chest Hospital

#### **Trinidad**

- Port of Spain General Hospital
- Eric Williams Medical Sciences Complex (EWMMSC)
- Mount Hope Women's Hospital (accredited only for three months in the latter six months of the 1<sup>st</sup> year).
- San Fernando General Hospital (accredited only for six months rotation after completion of Part 2 examination i.e. 3<sup>rd</sup> or 4<sup>th</sup>).

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)

**Barbados**

- Queen Elizabeth Hospital (QEH)

**Bahamas**

- Princess Margaret Hospital – Nassau (accredited for 1<sup>st</sup> year ONLY)

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(These Regulations apply to students who entered the DM programmes up to academic year 2008/2009)