

**The Hull York
Medical School
Undergraduate
Prospectus 2012**





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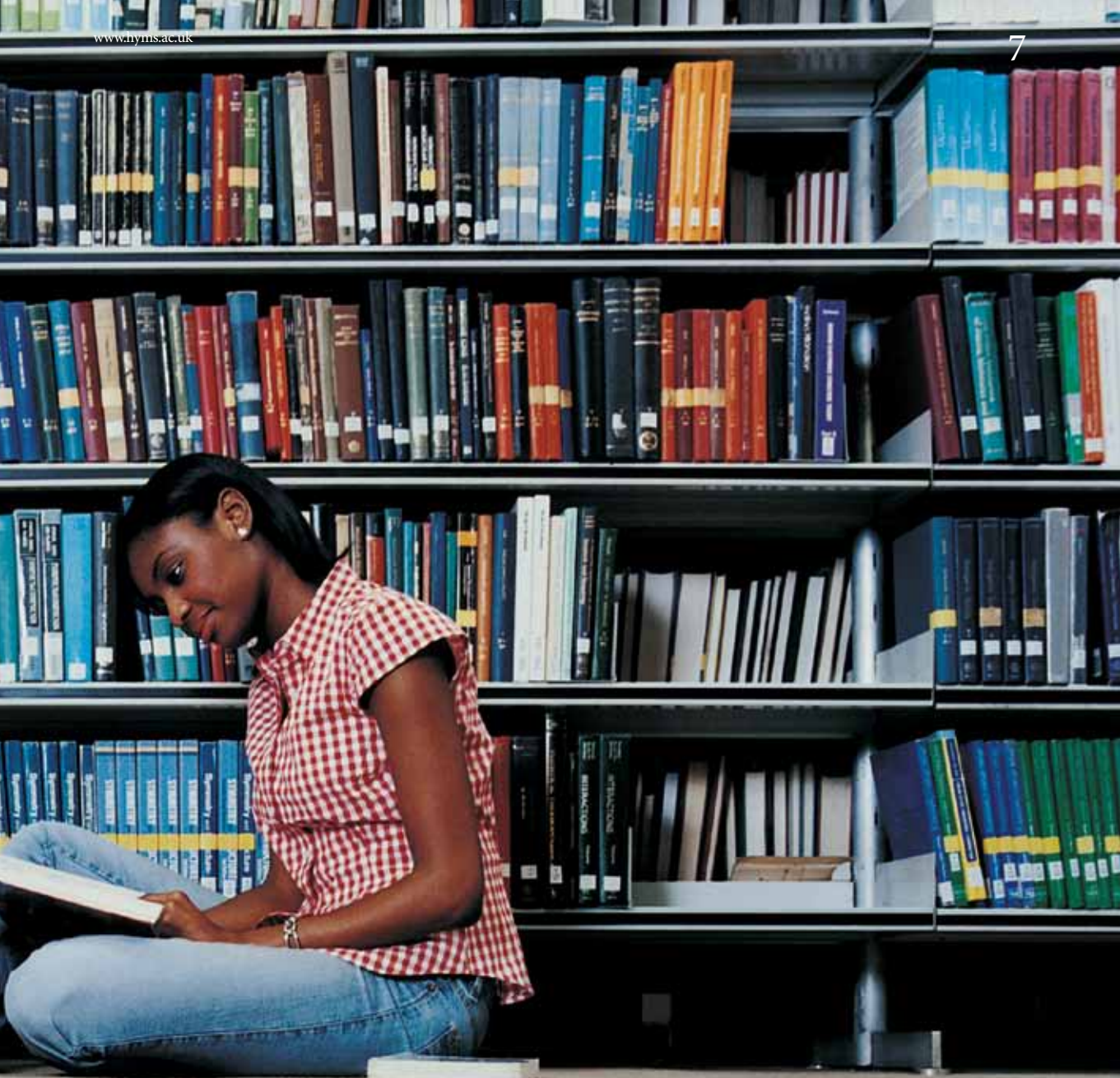
The area...





The library...





Student life







Why HYMS? from the Undergraduate Dean

Welcome to HYMS. Since opening in 2003, we have become known as one of the UK's most welcoming and inclusive medical schools, with a reputation for innovative, inspiring, exciting and rigorous medical education. HYMS is based in two well-established universities, in the attractive and historic cities of Hull and York. As a student here you will benefit from early clinical placements within healthcare facilities in the surrounding region, which contains some of England's most beautiful countryside.

The aims of HYMS are clear: to ensure that you will graduate as a clinically capable doctor who has a good understanding of both the scientific and humanistic basis of medicine. Our course meets the new requirements of the UK General Medical Council (GMC) on the future training of medical students (www.gmc-uk.org/static/documents/content/TomorrowsDoctors_2009.pdf).

Making full use of the most up-to-date approaches to adult learning and teaching, we have adopted a student-centred approach. We encourage you to learn by seeing, doing and reflecting as well as by studying, and we place an emphasis on the quality of the learning and clinical environments you will encounter. Usually working in

small groups, you will learn about the science, skills and knowledge underlying the practice of medicine in the wider context of the healthcare of patients, their families and communities. Our programme continues to develop, benefitting from the application of contemporary educational methods, leading scientific research and feedback from our students, tutors and faculty members.

After five years you will graduate with the degree of MB BS jointly awarded by the universities of Hull and York, which equips you to embark on further training on a Foundation programme, working as a doctor.

This prospectus outlines the particular strengths of the HYMS course and the ways in which it is distinctively different. Medicine is a great profession and HYMS is a great place to learn it.

I look forward to welcoming you here in September 2012.

Professor David Blaney
Undergraduate Dean

Studying with us

Hull York Medical School was set up in 2003 by the universities of York and Hull, in partnership with the NHS. The partnership covers 1.6 million people in Hull, the East Riding, York, North Yorkshire and northern Lincolnshire. Our vision is simple: we offer a cutting-edge medical curriculum for 21st-century doctors.

We welcome 140 new students every year — and they begin their regular clinical placements in the third week. Our course is fresh, innovative and distinctive. It has all the dynamism you would expect of a young medical school.

HYMS also has a reputation for high-quality teaching. We draw on the academic standards of our parent universities, as our generally excellent performance in university league tables shows.

Our 700 students are not all undergraduates. As well as a wide range of intercalating options, we are developing postgraduate medical education and internationally recognised research.

Your degree

At the end of our five-year medical course, you graduate with the degree of MB BS, awarded jointly by the universities of Hull and York. This UK- and EU-recognised primary medical qualification combines two first degrees: Bachelor of Medicine and Bachelor of Surgery.

After graduating, you are entitled to provisional registration with the UK General Medical Council, with a licence to practise, provided you can demonstrate that your fitness to practise is not impaired. (You can find out exactly what this means at www.gmc-uk.org/education/undergraduate.asp.)

In years 1 and 2, you are based in either Hull or York. From year 3 onwards, you spend much of your time on clinical placements around the region (see map inside back cover).

You can take an extra ('intercalated') year between years 2 and 3, or years 4 and 5, at York, Hull or another university, to work for a BSc (Hons) in Medical Science (see page 38).



Studying at HYMS

Our parent universities have outstanding academic and clinical facilities. As a HYMS student, you get the best of both worlds.

York excels at health-related research and bioscience, with considerable expertise in clinical trials, epidemiology and health economics.

Hull is strong on research into cardiovascular and respiratory medicine, gastrointestinal and cancer surgery, and oncology.

Library facilities. The libraries at the two universities together have nearly two million books and over 20,000 current journal titles, as well as a wide range of DVDs, e-books, cassettes, music and multimedia CDs. There are textbooks and other resources specific to the HYMS curriculum at both universities. On clinical placement you also have access to local NHS libraries.

IT facilities. At HYMS, you use information technology skills every day. At the start of the course, we introduce you to Blackboard, which provides computer-based support in your studies, busy online discussion boards for students and staff, and a variety of learning and other materials relevant to your current topics.

We have a dedicated high-speed computer network spanning both universities and all NHS sites. Our multimedia PCs are available wherever HYMS has a presence. Computer connections are also available in York student study-bedrooms and from university-owned houses in Hull.

Studying at York

York is one of Britain's most distinguished and successful universities. It is large enough to have a rich and varied social and cultural life, but still small enough to have a real community feel that is welcoming and friendly to its 11,500 students.

The university

The main campus is at Heslington, on the edge of the city. The university's eight colleges are grouped around a lake in 200 acres of parkland. Each college contains a mix of academic offices, social facilities and student rooms. If you are a York-based HYMS student, you live in a college room, or a residence or house close to the campus, in your first year.

The campus is quiet and easy to move around, generally traffic-free, and with fast and frequent bus services to the city. There is a network of cycle paths, and cycling is popular on campus and around the city.

"One of the first things I was impressed with was the York campus — the beautiful lakeside views and scenery are ideal for evening walks, especially after a hectic PBL session!"

Anne Dokubo, Year 3

Student life

York's student life is lively, especially at Heslington, where everything is close at hand. Most colleges have eating places and bars. The campus also has food stores, cashpoints, bookshops, a second-hand book mart, stationery store, travel agency, fully-equipped sports centre, tennis and squash courts, film theatres, concert halls — and of course a health centre.

The university has award-winning newspapers, its own television station and Britain's first independent radio station. It has over a hundred student societies, for religious groups, political parties, music, dance lessons, film production, juggling, drama and much more. There are over fifty sports clubs, competing at inter-college and inter-varsity level, ranging from cricket, rugby and football to potholing, skateboarding and paintballing. HYMS students also have their own societies, which link the York and Hull campuses.



Studying at Hull

Generations of graduates and their families have described Hull as ‘the friendly university’ and the level of student support it offers is unparalleled. In fact a recent National Student Survey showed that Hull students are among the happiest in Britain! The main problem for Hull students is that, as one independent guide put it, “they don’t want to leave”.

The university

The main campus is on the outskirts of Hull (but only a ten-minute bus ride from the centre) near the leafy village of Cottingham, where the university has many of its halls of residence.

Hull has a solid reputation for research, particularly in areas relevant to medicine: chemistry, biological science, biomedical science, psychology, sport, health and exercise science all score consistently highly in external research assessments.

“With the number of societies and sports to join, Hull just never gets boring. Studying medicine here is the best!”

Ruth Whitford, intercalating student

Student life

With over 15,000 students from 125 countries, the university is cosmopolitan. It also has excellent support services, always putting the welfare of its students first.

The union is the hub of campus social life — and Hull University Union is recognised as one of the best students’ unions in the UK. Recently it was awarded a Silver Student Union Evaluation Initiative Award. It has over a hundred clubs and societies, an award-winning nightclub, two bars, a heated terrace, bustling marketplace, bookshop and even a hairdresser, and the union is strongly involved in community projects and campaigns.

Sport and recreation are taken seriously at every level. Students benefit from more than forty well-established sports clubs, some professionally organised, and the use of superb on-campus sports facilities at cut-price rates.



So much to do



Hull

This resurgent waterfront city is being transformed by over £1 billion of investment. A regional centre for arts, culture and heritage, Kingston upon Hull, with its strong maritime tradition, is at an exciting point in its history. It offers plenty to do and see.

The spectacular marina, a surprise to many visitors, connects the city with the sea. The Deep, the world's only submerium, is an icon of Hull's regeneration. As well as theatre (Hull Truck is internationally acclaimed), cinema and art exhibitions, Hull has an impressive museums quarter, and the buzzing city centre offers traditional pubs, stylish café bars and shopping to suit all tastes. St Stephen's, the latest development, includes a new retail centre, transport interchange, hotel and apartments.

Sport is big in Hull. The magnificent Kingston Communications Stadium is home to Hull's leading teams, including Premiership football side Hull City and the two Super League teams, rugby giants Hull FC and local rivals Hull Kingston Rovers. The stadium has also hosted concerts by the likes of REM and Bon Jovi.

Creativity flourishes here too. The poets Philip Larkin and Andrew Motion and the late Oscar-winning film director Anthony Minghella all have connections with the university. The award-winning actors Tom Courtenay and Maureen Lipman were born here, and Hull has produced musical acts too, including The Housemartins, Fine Young Cannibals and The Beautiful South.



York

This stylish, compact city — famous for Romans, Vikings, churches, chocolate and railways — contains the best of old and new. Its old buildings remain marvellously preserved, but York is an exciting and busy place. You can wander among fascinating shops and picturesque streets in the shadow of the magnificent Minster; watch the world go by from the many cafés, pubs, restaurants and riverside bars; pick from a long menu of film, drama, art and music at its cinemas, theatres, galleries, clubs and music venues.

And for peace and quiet, you can stroll along the longest and best-preserved city walls in England, with wonderful views of the medieval city. It is easy to get around on foot or using the city's cycle routes. York is some two hours by train from Edinburgh or London and well connected with the rest of the country.



The ancient northern capital is today a 'Science City', internationally recognised as a centre for research and innovation. It has 240 biotech, IT and heritage technology companies, many of them university spin-offs.

With open countryside on the doorstep, and moors and wolds beyond, outdoor pursuits of all kinds beckon. And, when you've done walking, climbing, riding, mountain biking, caving and canoeing, York is full of inviting places to eat and drink.

Where to live



Hull

The University of Hull offers various types of accommodation: catered halls of residence, self-catering on-campus flats and self-catering university-owned student houses. Some residences are specially adapted for students with disabilities.

All these options are open to you, but we recommend student houses or the en-suite rooms in Taylor Court flats for HYMS students, because these places offer a contract that matches the HYMS terms. The 31-week contract period in halls is shorter than the HYMS terms, so you would need to find another place to stay during the extra days. You might be able to move into a student house for this period.

Prices range from £60 for a student house (self-catered) to £95 per week for on-campus flats.*



York

If you are based at York, you become a member of one of the University's eight colleges, which all have their own on-campus accommodation. College rooms are single, and many of them have en-suite facilities.

All rooms are self-catering, but you can eat at one of the café bars or dining rooms around the campus. Most colleges also have a TV room, bar, common room and laundrette. There is specially appointed accommodation for those with disabilities.

A typical week's rent for a single student is £82–112.* Most rooms are let on a 38-week basis.

**These prices are for the academic session 2010–11; prices increase annually.*

And there's more



As well as all the things you can do in Hull and York, and the clubs and societies in the two universities, HYMS students have set up societies of their own:

- The Accidentals is a 20-piece big band organised and run by HYMS students and alumni. It plays a mixture of jazz, swing, blues, latin, funk and popular arrangements. If you play a big-band instrument at any level, you will be welcome!
- The Medical Ethics Society invites experts to join students in an informal atmosphere to debate a current issue, such as 'doctor-assisted dying' or whether a deaf couple should be allowed to genetically select for a deaf child.
- Minds in Motion, which has won a national award, is our voluntary project reaching out to people with dementia, by offering activities at three Community Units.



Among the sports societies for HYMS students are men's and women's rugby teams, football teams and a riding club. In addition, HYMS MedSoc organises social events like barbecues, quizzes, nights out and formal balls.

Our course





What makes us special

When we came to design the HYMS curriculum, we started afresh. We wanted new ideas, fresh approaches and the latest developments in 21st-century healthcare, while staying focused on what medicine is all about — the patient. That led us to problem-based learning, which is part of the distinctive ethos of the HYMS course.

What else makes our course special?

- Clinical experience is the keystone in your weekly programme, and half of your placements are in primary care settings. This is unique to HYMS. It makes you aware how healthcare operates where most healthcare happens: in the community.
- In your first two years, you study medicine through problem-based learning as part of a group. With the group's support and stimulus, you develop essential team-working skills, and the shared discussion helps you to pinpoint learning outcomes and work out what to do next.
- Because disease doesn't exist in isolation, HYMS uses a thematic approach so you can integrate everything you learn.
- You learn resource management so you can make informed, efficient use of the means available for promoting health, diagnosing and treating disease, and helping people live with chronic illness.
- Each aspect of the curriculum is taught by a combination of clinicians, biomedical and social scientists, and healthcare professionals, passing on the expertise that tomorrow's doctors need.
- Our extensive electronic resources fill any gaps and enhance your learning.

Underlying all HYMS training is a belief that our medical school should make a difference to the communities around us, especially in areas with social deprivation or high levels of disease and death.

The curriculum



Relevant

To be a successful doctor who can meet the demands of 21st-century healthcare, you need up-to-date, in-depth knowledge of all the relevant sciences and an innovative approach. But you also need a sensitive understanding of people and society, the ability to communicate and work in a team, and the skill to manage resources.

Integrated

The HYMS curriculum is integrated. This means that each new topic is explored through a range of themes and disciplines, instead of dealing with one issue at a time in isolation. For instance, in learning about the anatomy and physiology of the musculoskeletal and nervous systems, you may also learn about how to relate sensitively to someone newly diagnosed with multiple sclerosis, about the social effects of disability and about support services in the community.



Patient-centred

From the start of the course, you spend time each week on clinical placement. You meet and observe real patients who have problems related to the body system you are studying, and you learn from practising doctors. You spend half your placement time in a hospital and half in general practice or other community settings.

Problem-based

For the first year of the course, you start work on each week's topics as part of a small problem-based learning group, with a facilitator to guide your learning (for more about this, see page 28).

Our MB BS course

The five-year course is divided into three phases.



Phase I

Phase I covers the first two years of the course. You are based in either Hull or York, and your weekly placements match up with the subjects in your problem-based learning group. You also use a wide range of other innovative learning methods.

Phase II

Phase II, which is years 3 and 4, is largely spent on a series of eight-week clinical placements across the region in a variety of acute, primary and community healthcare settings — with continued access to computer-based university resources.

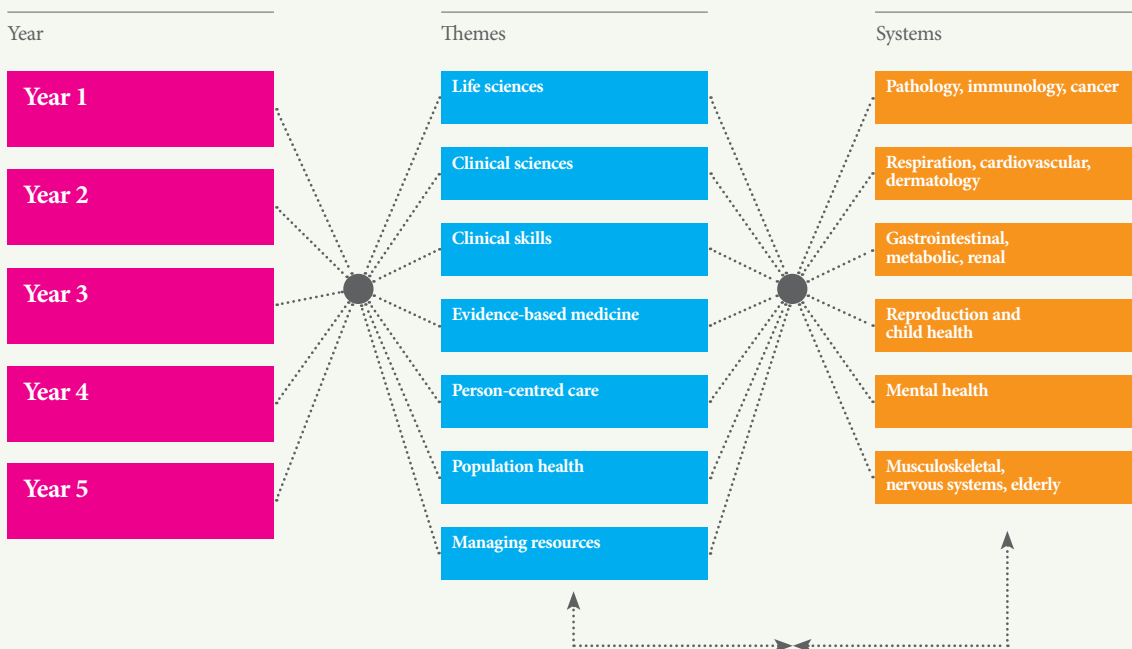
Your placements are normally grouped in blocks, so you are unlikely to move location more often than every three to six months.

Phase III

Phase III covers the fifth and final undergraduate year, in which you gain extensive experience in medicine, surgery and primary care, arrange a two-month elective and shadow a house officer.



MB BS course structure



Themes, systems and structures

Seven themes are woven through the HYMS curriculum, which is structured around six groups of body systems. You begin by studying these systems in turn, for about four weeks each. It is a spiral curriculum: you keep returning to these body systems and exploring the same themes, to refresh and deepen your understanding of every topic as the course progresses.

The seven themes threading through the course are:

- Life sciences,
- Clinical sciences,
- Clinical techniques and skills,
- Evidence-based decision making,
- Person-centred care,
- Population health and medicine,
- Managing resources for quality and efficiency.

The six groups of body systems, relating to each block of learning, are:

- Pathology, immunology and cancer,
- Respiration, cardiovascular medicine and dermatology,
- Gastrointestinal medicine, metabolic and renal medicine,
- Reproduction and child health,
- Mental health,
- Musculoskeletal and nervous systems, special senses and elderly persons' medicine.

In the early stages of the course, you focus on understanding what is 'normal' in each systems block. Later, the emphasis moves to understanding the diseases and illnesses that affect the systems, with their contexts and consequences.

"Everything has been planned meticulously and the curriculum is fully integrated, consolidating learning and knowledge throughout the course."

Alex Cornish, Year 4

Phase I

In Phase I, everyone follows exactly the same course, whether they are in Hull or York. Your clinical experience begins at the start of Year I with half-day placements. These generally alternate between hospitals and community settings, including general practice.

Apart from plenary sessions (lectures) and clinical placements, in the first two years you do much of your learning in a small problem-based learning (PBL) group, with a facilitator guiding you. This approach may be new to you, but it has been tried and proved in medical education for more than fifty years. Although highly demanding, it's also fun! Your PBL facilitator is also your personal tutor.

PBL means that you meet with eight to ten other students for two sessions each week, sharing a room as your workbase. With guidance from your facilitator, you work as a group tackling problems raised by 'virtual patients' in a fictional medical setting. Each new topic is introduced to your group by these virtual patients. For instance, starting work on the respiratory and circulatory systems, you meet Harry Flemming, a heavy smoker with a persistent, hacking cough, and student Hilary Jones, whose voice has become hoarse.

The aim is not to solve these patients' problems, but to find out what you need to know to understand the problem fully. You work as a group to identify all the issues or learning outcomes that each problem raises. You explore these issues through the week's plenary

sessions (lectures), supervised resource sessions, clinical skills teaching, clinical placement and your own individual study, all related to the topic of the week. Then later in the week your group meets again with your facilitator to share and discuss what you have learned, consolidating the key information.

Of course, PBL requires initiative and self-motivation, and a readiness to work in partnership with others, but the rewards are great. You never find yourself wondering 'Why do I have to learn this?' because you and your group soon see why — starting from the problems of your current 'patient'. You will be 'talking the language of medicine' from the start of your undergraduate course.

In this context you can form strong relationships, adapt to working with people of different personalities and backgrounds, and learn to work as a team when tackling problems — while also developing flexible, independent learning skills that you will use throughout your career.

You can find out more about PBL on the HYMS website: www.hyms.ac.uk



Clinical skills

During Phase I, you attend clinical skills sessions twice a week, on the same afternoon as your PBL sessions.

We use an integrated approach to emphasise the importance of the relationship between the various skills you use in a consultation, including physical examination, mental state examination, history-taking, diagnostic reasoning and communication. For example, good communication is an inherent part of a successful physical examination; and diagnostic reasoning is also a product of good communication, physical examination and consultation management.

You will be able to learn about physical examinations by examining each other (peer physical examination). These examinations will be carried out in a professional atmosphere under the close supervision of the clinical skills tutor. Taking part in these sessions is a key requirement of the course.



“Problem-based learning is a breath of fresh air. Studying various aspects of medicine through collective learning helps to understand ideas more effectively.”

Muhammad Islam, Year 2

Sample first-year timetable (the PBL week begins on Thursday)

	Thursday	Friday	Monday	Tuesday	Wednesday
9.15–10.00	Plenary PCC The two agendas — Prof I Watt	SDL	SDL	SDL	SSC
10.15–11.00	Plenary LS Upper airway tract and chest — Dr M Lagopoulos	Plenary CS Regulation of breathing and cough — Prof A Morice	Plenary PHM Perceptions of illness — Dr S Nettleton	SDL	
11.15–13.15	RS	Plenary LS Development of body cavities and lungs — Dr S Cobb	RS	Workshop Introduction to portfolio (11.15–12.00)	
14.00–15.30	PBL — Harry Flemming — Hilary Jones	SDL	PBL — Harry Flemming — Hilary Jones	CP Practising your listening skills Interviewing two patients	Free
16.00–17.30	CSP Listening to the patient	SDL	SDL		
KEY:	CP Clinical Placement CS Clinical Science CSP Clinical Skills Practice LS Life Sciences	PBL Problem-Based Learning PCC Person-Centred Care PHM Population Health and Medicine	RS Resource Session	SDL Self-Directed Learning SSC Student Selected Component	

Clinical placements

From the start of Year 1, you are allocated to a group of four or five students for your clinical placements. You spend half a day each week on placement, one week in a hospital, the next week in the community, under the guidance of a practising doctor. All first-year placements are within a half-hour journey from your campus, and transport is available.

Placements are not just a chance to observe patients, but also an opportunity for you to start developing your consultation and examination skills. Your placement tutor knows what you are studying and will ensure that you see real patients with the same problems as the 'virtual patients' you began studying earlier in the same week.

The time you spend on placements increases as you progress through the course. In Year 2, they occupy a full day each week, again alternating between community and hospital care. In the mornings you see patients with conditions relating to the subject you are currently studying; in the afternoons you focus on understanding the cases you have seen, along with relevant clinical material.

“The weekly clinical placements have helped to build up my confidence and communication skills with real patients. The placements are the highlight of my week.”

Rumana Hussain, Year 2



Student-selected components

Student-selected components (SSCs) enable you to broaden your core learning, and also to concentrate on subjects that particularly interest you. SSCs are not an optional extra. The General Medical Council requires them, and they form about a quarter of your curriculum.

You choose from a wide variety of topics within three groups: sciences, clinical issues of special interest, and arts and humanities. In Phase I, you take six SSCs and the current list includes Human Variation and its Origin, Introduction to British Sign Language, HIV-AIDS, Experiments in Neuroscience, Medicine and the Media, Radiology of Stroke and various modern languages taught specifically for medical students.

Two thirds of your SSCs must be related to medicine, but we recommend you choose at least one from each group, to broaden your learning. The other three SSCs can reflect your personal interests and strengths, possibly looking towards an intercalated degree programme (see page 38) or helping you to explore potential career paths.

In Phase II, SSCs are offered on a variety of topics at locations across the region. Your elective in Phase III (see page 40) must be in a clinical area or a related science; there are no limits on where you do it.

SSCs help you to acquire and use research skills, develop confidence in your abilities and undertake projects of manageable size. They enable you to work with knowledgeable and experienced tutors, passionate about their subjects. They also allow you to express yourself, take on subjects outside your comfort zone, and develop your ability to think critically and challenge others' opinions. So stretch yourself with an SSC... anyone up for yoga?

"I really enjoyed the sign-language SSC and am following it up with a more specialised course, 'Sign language in mental health'. I think it'll be really useful when I qualify."

Gemma Cubbin, Year 5



“I did a Drama SSC that looked at how medical illness was portrayed in the arts, and in particular how the arts might help us to develop an appreciation and understanding of what it might be like for people living with disabling illnesses. As part of our assessment we had to develop a character that had some form of illness and, using various methods, try to engage in their psyche and depict their illness through a performance. The character I developed was based on the boxer Muhammad Ali who suffers from a form of Parkinson’s Disease that may have been linked to his bouts in the ring. By showing the impact his condition had on his life, I was able to create a piece that resonated amongst the audience as well as give me a deeper understanding of the subtleties involved in disability.



The piece has since been performed at a conference for Medical Education and the group has been invited to Texas University Medical Branch in America and Queen’s University, Belfast, Ireland, next year to help develop arts in medical education.”

Jerome Edet, Year 4

Phase II

In years 3 and 4, you spend more time on a structured series of clinical placements and SSCs across the HYMS region. As part of a group of four or five students, you work in rotation through clinical settings across the region but linked always to Hull, York or one of the other main centres: Scarborough, Grimsby and Scunthorpe.

This wide dispersal allows for good staff/student ratios in teaching and learning exchanges and plenty of opportunity for one-to-one consultation practice with patients.

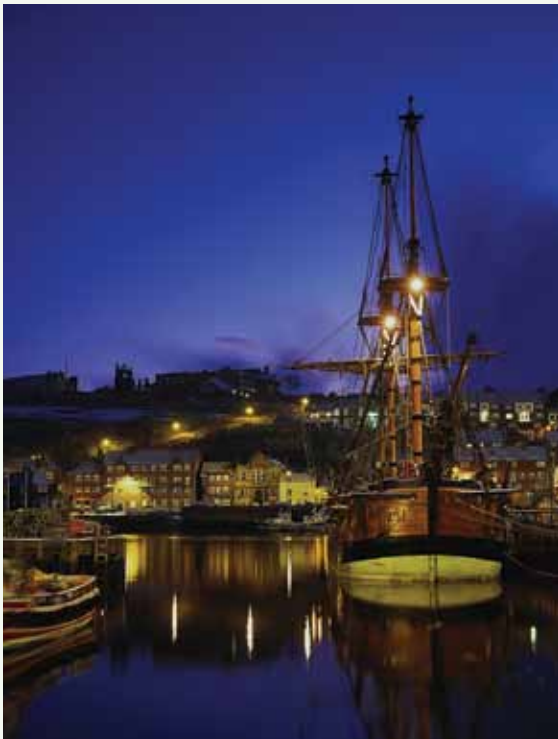
In each placement, you continue to alternate between a hospital and general practice or other community setting. Some placements are city-based, some in small towns or rural areas. Health problems vary greatly across the region, with areas of urban and rural deprivation close to areas of wealth. Patterns of health vary, but heart disease, teenage pregnancy rates and drug abuse are severe problems in Hull.

While you are on placement away from base or undertaking a special study module, the NHS provides you with free accommodation close to where you are studying, and also helps with your travel expenses. Living near your placement gives you easy access to local tutors, learning materials and other resources. Because your placements are normally grouped in blocks, you are unlikely to need to move location more than every three to six months.

Your first point of contact on placement is one of the five Student Liaison Officers, based in the main hospital centres.

“As most HYMS students will tell you, the early clinical exposure is the most enjoyable part of the course! Being on clinical placements at such an early stage has provided a valuable opportunity to apply the theoretical concepts we learn in a realistic setting.”

Ali Ibrahim, Year 4



Phase II placement

Sarah Shore, Year 3, describes a typical Phase II placement week in Scarborough.

Monday

I wasn't timetabled for any sessions this morning so I went off to the surgical ward at 9am to find some suitable patients to clerk (meaning 'to meet them and record their medical history'). I met three patients with this week's 'problem' and two consented to being examined. This afternoon I attended the oncology clinic; I shadowed the consultant and his registrar talking to patients about the chemotherapy and radiotherapy they'd need. The session finished a little ahead of schedule and I went home to read up on some of the learning outcomes for the week.

Tuesday

My clinical placement partner and I were on the road at 7.30am to drive to our GP practice in Whitby from our accommodation in Scarborough. The GP observed our history-taking and examination skills in the morning session and we spent lunchtime at the hospital going over some x-rays and speaking to patients who'd just been admitted. We shadowed the GP in the afternoon and left the surgery at 6pm to go home and read up on some of the problems that we'd come across in the surgery today that had been set as learning outcomes by our GP.

Wednesday

Another early start and back to the GP surgery in Whitby. Just before the morning clinic started, we quickly fed back to the GP the answers to the clinical questions we had been set the day before. In the afternoon we were sent to a patient's house to take a history and do a full examination as the patient's problems related to the theme of the week. We managed to shadow our GP for the last hour of surgery before heading back to Scarborough and writing up one of the patients that we'd seen with this week's problem. Whilst it's been a tiring week so far, we all popped to the pub for last orders before case presentations tomorrow.

Thursday

This morning we had our case-history teaching with one of the consultants. All eight students studying this block at Scarborough presented a case they had seen that week, and we all discussed the patients and new learning points they had identified. Fortunately I had self-directed learning in the afternoon so I managed to pop home for a power nap before doing some more reading and finally calling into the Acute Admissions Unit for the ward round in the evening.

Friday

We had a teleconference (an 'academic discussion forum') across the five HYMS sites, relating to the block we are studying. The facilitator took questions from us that had not been answered in the week and clarified some of the more difficult concepts. That afternoon we had self-directed learning so I tied up a few loose ends from the week and looked forward to returning to York for the weekend to recharge my batteries before next week!



Intercalated degrees

We warmly welcome students from other medical, dental and veterinary schools to study at HYMS for intercalating degrees that draw on the combined expertise of our parent universities, Hull and York.

You can also opt to do an intercalated degree. This means an extra year of study, giving you an extra degree — a BSc, or in some cases an MA or MSc. You can do this between Phase I and Phase II, or between Phase II and Phase III. Places on the intercalated year are allocated on the basis of performance on the MB BS programme.

Intercalated degrees carry extra prestige, strengthen your academic record and enhance your career options — especially if you want to work in a competitive area like surgery, research or academic medicine. You get a chance to specialise or expand your interests. You can learn research skills with leading academics, exploring a subject in more depth than the main curriculum allows. You become a more reflective and thoughtful doctor.

You can intercalate within HYMS, Hull or York, or (with permission) elsewhere in the UK. Students intercalating at HYMS follow a special ‘final year’ course; those at the universities of Hull and York join the final year of a BSc programme.

The intercalated programmes at HYMS, Hull and York include:

- applied ethics,
- cancer biology,
- developmental biology,
- functional morphology and evolution,
- immunology,
- molecular microbiology,
- molecular and cell biology,
- neurobiology,
- pathology,
- reproductive biology,
- sports science.

“The intercalated degree gave me a breather from the MB BS course and a chance to study something different. Now I have returned a year later, perhaps a bit fresher and with a degree already under my belt.”

Kathryn Potter, Year 3



Phase III

By the time you reach Phase III — the final year — you have sufficient skill and knowledge to work alongside other healthcare professionals. You work as an assistant intern in medicine, surgery and primary care.

On your three eight-week placements, you are attached to a Foundation Year 1 doctor and given responsibility for providing some care for patients. You also gain experience in interprofessional working, and in giving presentations on common management issues to the whole class. This early responsibility helps to ease the transition to Foundation Year 1.

Your elective

You also have an eight-week elective, when you experience medicine in a different context, backed by self-directed study. This is also a chance to reflect on your professional and personal development. Electives so far have included hospitals and research institutes in Vanuatu, Tenerife, Belize and South Africa, as well as organisations in the UK, such as the Institute of Neurology in London.

Interprofessional working

Throughout your course, but especially in Phase III, you have opportunities to work closely alongside healthcare professionals from different disciplines.

This is important because doctors do not work in isolation in today's healthcare services. Instead, a range of health and social care workers are involved depending on a patient's needs and may include professionals such as social workers, psychologists, nurses, occupational therapists, community support workers and pharmacists.

During your training at HYMS, you will see this multidisciplinary team in action when you join ward rounds, community team meetings, home visits and rehabilitation meetings, and by joining these teams you will see how effective communication between them can improve the experience of patients.



Medical elective story

Year 5 students Rob Davey, Alex Coombs and Laura Hume asked HYMS staff and students for second-hand football shirts to distribute to orphans and schools in Blantyre, Lilongwe and Cape Maclear, during their medical elective at Queen Elizabeth Central Hospital, Malawi.

We decided that kids in the fourth-poorest country in the world would have nothing and, with football being the universal game, we thought it would be a great idea to collect and distribute shirts from staff and students at HYMS. We also collected them from schools and leisure centres in the area and in Nottingham and Bath, our home towns. In total we had over 1000 shirts, over 100 pairs of shorts and 48 whistles — weighing about 250 kilos! We had them kindly transported to Malawi free of charge by the Knorr Bremse shipping company.

With the help of a charity in Malawi, Action for the Benefit of Children, we distributed shirts to five orphanages around Blantyre, a secondary school in

Limbe and several football teams in Lilongwe who were previously playing without kit. We also gave them to random kids at Senga Bay and Cape Maclear on the shores of Lake Malawi. The only problem was we didn't have enough shirts, so we intend to go back in the future with more!

Our elective was an absolutely fantastic experience, if heart-wrenching at times — many people literally have nothing. It was also completely chaotic, but we'd all do the same again. It was a lot of legwork, paperwork and donkey work, but well worth it!

“The elective place I took up was at the Institute of Neurology, London, and was part of an established elective programme.

The structure of the eight weeks was as follows: I was assigned to the neuropsychiatry ‘firm’ (team) and given opportunities to examine, work up and present cases as requested by the registrar. Each firm consisted of consultants, two specialist registrars, two senior house officers and two medical students. There was an emphasis on formal teaching, with opportunities to attend lectures, outpatient sessions, ward rounds, tutorials and other aspects of the teaching programme. I was expected to attend the teaching and business rounds of the consultants on the firm, as well as those by the registrars.

The majority of my time was spent in neuropsychiatry but I had access to all general neurology teaching and was given the opportunity to gain clinical experience in other aspects of neurology. My aim in taking this elective was quite generally to gain a knowledge and clinical experience of neuropsychiatry which is not afforded through the basic undergraduate syllabus. My career aspiration when I applied to study medicine was to practise psychiatry.”

Mary Docherty, HYMS graduate doctor

“After much thought and reflection I decided that I wanted to study medicine in a developing country for my elective.

There were multiple reasons for this choice, the first being that I wished this elective to, above all, provide me with problem-solving and diagnostic skills. I felt that in a country where diagnostic tests were sparse and where clinical judgement played the most important part in diagnosing patients, I would inevitably improve my skills at both history-taking and examination. I intended to become more comfortable identifying pathological findings and, as a result, more confident in my own ideas of the disease process underlying the patient’s problem. Secondly, I wished to study in an area where I would see conditions that are rare in the UK. As a student a lot of time is spent reading textbooks. However, at the end of the day, I felt that one of the most important parts of understanding a disease is seeing the patient and hearing their story. Therefore seeing cases of TB, malaria, elephantiasis etc provided me with a better understanding of such conditions and also hopefully enabled me to better identify such problems should I ever be faced with them in the UK.

I set to work to find a country which would fulfil my needs. This is when I came across Vanuatu, an economically developing archipelago of 83 islands situated in the Western Pacific, where I spent my elective period.”

**Jess Morgan, HYMS graduate doctor
(pictured right)**



Examinations and assessment



We use two main types of regular assessment, formative and summative:

- Formative exams are mainly for your own benefit; these marks never count towards your final qualifications. We also provide self-tests, which you can do whenever you wish, to see how you're getting on or where you need to increase your effort.
- Summative exams take place at the end of years 1, 2, 4 and 5. We use these to assess your progress so we can be sure you are attaining an appropriate level to continue the course. These exams also determine your final qualification.

Integrated medical science papers, assessing progress across the curriculum's seven themes, along with structured clinical and practical examinations, are naturally all part of this. As far as possible, formal exams are constructed to test whether you can apply knowledge rather than just recall facts. This is consistent with the PBL style of learning, which sets the acquisition of knowledge in the context of a realistic patient problem.



Record of Achievement

Your Record of Achievement (RoA) is a very important collection of signed forms and other material that demonstrate your attendance and performance at clinical placements and clinical skills sessions throughout the course. The RoA contributes to your summative assessment, for which a satisfactory level of performance is required.

Personal Portfolio

Another important element is your Personal Portfolio. The idea behind this is that you cultivate the habit of thoughtful reflection on your own progress, an essential practice for all doctors throughout their careers. In your portfolio of learning, you note your problems and failures, successes and achievements, considering what lies behind them, recording constructive criticism and thinking how to improve in areas where you aren't satisfied with your work. This is an essential formative exercise, but is not part of the summative assessment.

Research



Although we are still a young medical school, we are taking advantage of the research strengths of the universities of Hull and York, and our partnership with the NHS, to develop collaborative research projects. We aim to use our considerable expertise to put the latest developments in medicine into practice in our region, improving the health of local people while enhancing our medical education.

In 2008 we agreed a new research strategy to build up collaboration between strong science, good clinical research and healthcare delivery, and so address the serious health inequalities in the region, which has some of the worst age-adjusted morbidity and mortality rates for cardiovascular and respiratory disease and cancer in the UK. The potential health benefits are substantial.



We continue to strengthen the reputation established by Hull and York for the conduct of clinical trials, with increased funding from government, and commercial and charitable biomedical research organisations.

After you graduate...

With an MB BS joint degree from HYMS, your next career step is employment on the two-year Foundation programme of general clinical training.

Completing your Foundation years opens up the full range of medical careers in hospital specialities and in the community, and also in public health, academic research, the armed services, medical management and medical journalism.

The first HYMS students graduated as doctors in 2008 in a grand ceremony in Hull City Hall. We are delighted that most of them have opted to stay in this region, to develop their careers in the hospitals and surgeries where they studied during their course. Others have used their HYMS qualification to find work elsewhere in the UK and further afield.

Alumni

When you graduate, you become a member of the HYMS Alumni Association, part of the alumni community of our two parent universities, entitled to make use of all their benefits and services. The Association helps you keep in touch with the school, and each other, as you move into the next phase of your career. In time, we hope the Association will generate a range of voluntary activities, such as mentoring and organising events, for social purposes and for the promotion of medicine.



Foundation

This two-year general programme forms a bridge between medical school and training for a specialty or general practice.

Foundation trainees gain experience in a variety of specialties and healthcare settings before applying to enter their chosen specialist area. Within each specialty there are openings in academic medicine, as well as for clinicians. There are sufficient Foundation posts available for those HYMS graduates who wish to remain in the region (see map inside back cover).

North Yorkshire & East Coast Foundation School

We are one of three Foundation Schools in the Yorkshire and Humber area. The school was formed in 2005 by four NHS Acute Trusts (Scarborough, Northern Lincolnshire & Goole Hospitals, York and Hull) and the associated primary care and mental health trusts.

By the time you come to us in Foundation Year 1, you have already been on placement in each of our five hospitals during your undergraduate course — so you know our hospitals, our consultants and the other hospital staff. This helps to ease you into your role as a qualified doctor.

We offer a wide range of specialties in both years, but all foundation doctors also spend one year in a district general hospital (Scarborough, Grimsby or Scunthorpe) and one year in a teaching hospital (Hull or York).

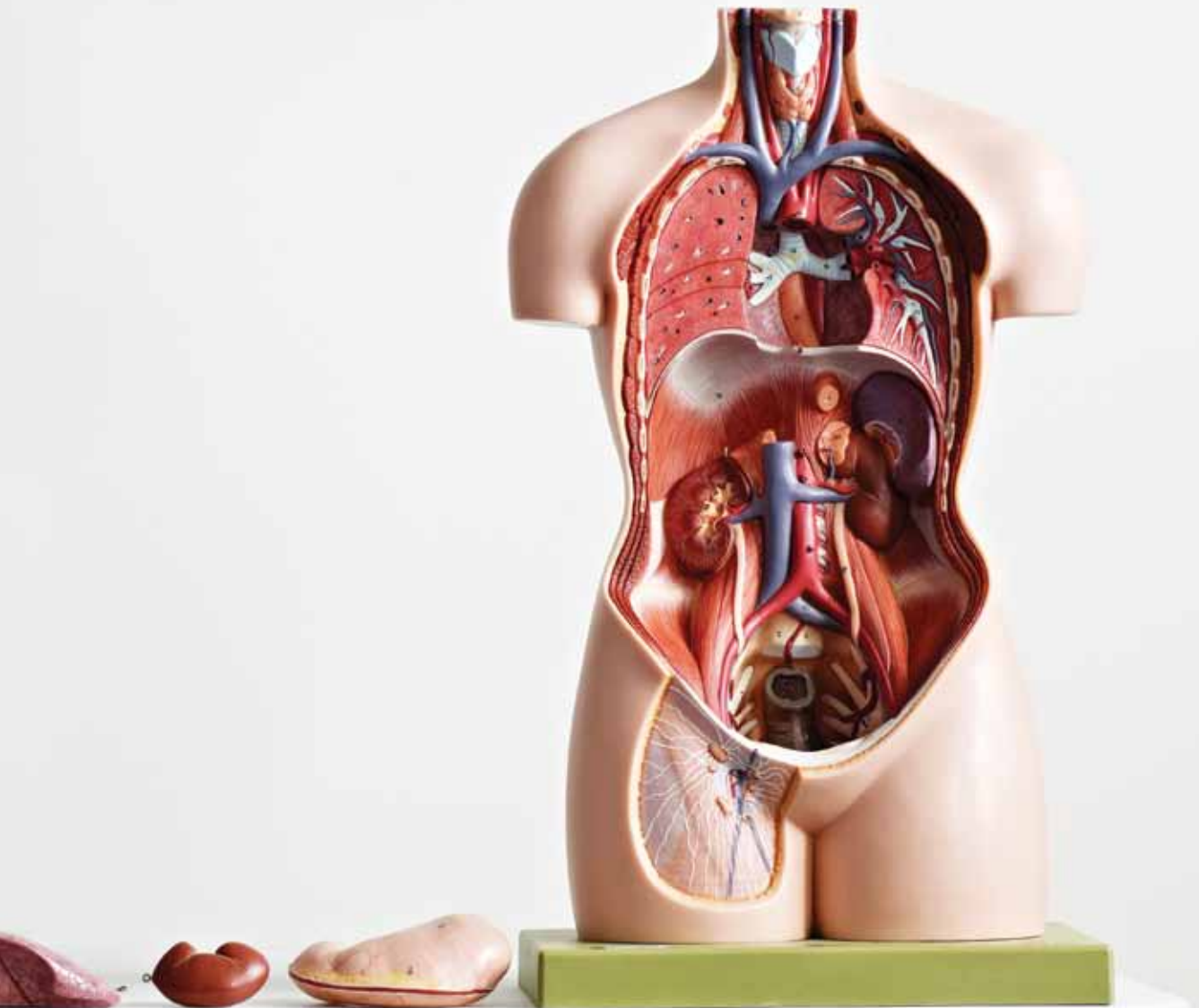
Our school also runs a number of Academic Foundation Programmes — in HIV/Genitourinary Medicine, Psychiatry and Primary Care (in conjunction with the University of York). Trainees on these programmes are based in York for Year 1 and Hull or Scarborough for Year 2.

To find out more, please see our website — www.nyecpgme.org.uk/foundation — or, for information on Foundation Training in general, see www.foundationprogramme.nhs.uk. We look forward to welcoming you in the future.



Applications





How to apply

Check the admissions pages regularly at www.hyms.ac.uk/admissions — it may save you a phone call. Our website is frequently updated.

You must apply through UCAS directly to HYMS — institution code **H75** — not to the University of Hull or the University of York. Your application should reach UCAS by the published closing date, usually 15 October of the year before the start of the course. Late applications are not considered.

Student intake

We offer 140 places each year on the full five-year MB BS course, A100. There is no accelerated graduate entry. Ten places are reserved for overseas students outside the EU/EEA. There are no other quotas.

Campus allocation

You must be prepared to accept allocation to the University of Hull or the University of York for the first two years of your course. This allocation (normally by ballot) is only made after all applicants have firmly accepted their offer of a place at HYMS. For more information, see www.hyms.ac.uk/admissions.

Overseas students

See page 62; for academic requirements, see pages 54–55.

Applicants from other medical schools

We do not accept transfer of students from other medical schools under any circumstances, because of the integrated nature of the HYMS course. We do not accept applications from anyone who has been enrolled at another medical school in the UK or abroad.

Equal opportunities policy

All applications are given full consideration irrespective of the applicant's age, gender, sexual orientation, disability, marital or parental status, religion, social class, nationality, ethnic origin or area of residence.

Open days

HYMS participates in the open days of its parent universities, Hull and York.

For the dates, see our website. We advise you to book a place, on the website of whichever campus you plan to visit, at least two weeks in advance. It is not possible to arrange individual informal visits to HYMS at other times.



Before you apply

You must have some 'hands-on' experience of helping frail or ill people. You should find out how the doctor's role fits in with the rest of the healthcare team, in a hospital and in the community, even if you are not able to shadow a doctor. Get experience by talking to, observing or working (as volunteer or employee) with healthcare professionals in different settings. You should be realistic about the demands of being a medical student, and the positive and negative aspects of a medical career, and show that you understand, and are committed to, teamwork and the social context of healthcare.

Gap year

We strongly encourage you to take a 'gap' year, before you come to HYMS, because so many students find the extra experience beneficial. You may apply in your A-level year (for deferred entry) or during your gap year. You must nevertheless be able to attend an interview on one of the fixed dates between December and February.

The UK Clinical Aptitude Test

All applicants must take the UKCAT during the (calendar) year when they submit their application. For further information, see www.ukcat.ac.uk. The UKCAT score is used (as described in detail on our website), along with academic results, the UCAS personal statement and the interview, to make offers of places. The test is open to all applicants regardless of A-level predictions. It helps to widen participation, by identifying very able students with low predicted A-level grades who may nevertheless achieve the required results.

Useful reading

- Learning Medicine by P. Richards, S. Stockill, R. Foster and E. Ingall (CUP)
- Choosing a Medical School by A. Young et al (developmedica) 2010
- Getting into Medical School by S. Piumatti (Trotman) 2010

Entry requirements

For all applicants

GCSEs

Six grades A–C, including A grades in Maths and English Language, or equivalent.

For school leavers

A-levels and AS-levels

Applicants should have studied at least four subjects at AS-level, and three subjects taken at A-level in a single sitting. Typical offer: AAA, including Biology and Chemistry, and grade B in a fourth subject at AS-level.

General Studies and Applied Science A-levels are not accepted. If you are considering Critical Thinking or Further Maths, please see the most up-to-date information on our website at www.hyms.ac.uk/undergraduate/entry-requirements.aspx. All other subjects are considered of equal merit as the third A-level. We welcome applicants who show evidence of breadth of interest, but a fourth subject at A-level will not advantage you, and A* grades will not be included in offers.

AQA Baccalaureate

Typical offer: AAA at A-level to include Biology and Chemistry, and B in a fourth subject at AS-level, all completed within two years.

BTEC

We do not normally accept the BTEC National Diploma. Distinction in a single Level 3 BTEC Award or Certificate will be accepted with A-levels in Chemistry and Biology.

Cambridge Pre-U Diploma

Typical offer: Pass with D3 in three Principal Subjects/Global perspectives, including Biology and Chemistry.

Diploma

We do not normally accept the Diploma.

European Baccalaureate Diploma

Final overall mark of 85% (8.5), including Biology and Chemistry with minimum grades of 8.5.

International Baccalaureate

Typical offer: a total of 36 points with grades of 6,6,5 in three higher-level subjects including Chemistry and Biology.

Irish Leaving Certificate

Typical offer: AAAAAB at Higher level, including A1 in both Chemistry and Biology, taken at the first attempt.

Scottish Highers

Typical offer: AAAAB at Higher (H) level, including Biology and Chemistry taken in a single attempt, plus AA in Biology and Chemistry at Advanced Higher (AH) level and an additional Higher at grade A taken in Secondary 6.

Welsh Baccalaureate Advanced Diploma (WBQ)

Typical offer: 12 points core. We also require AA grades in Biology and Chemistry, and a third subject at A-level grade B, excluding General Studies and Critical Thinking.

Re-sits

We do not normally accept the results of re-sits taken in a third year of post-16 education. Where extenuating circumstances were communicated to staff at the responsible educational establishment at the time when the examinations were taken, we will consider documented evidence of the circumstances affecting the first attempt, and then may agree to accept re-sits on an individual basis.

Overseas qualifications

Requirements in school-leaving examinations from many other countries are shown at www.hyms.ac.uk/undergraduate/entry-requirements.aspx.

For those other than school-leavers

In most years, about a third of our students are aged 21 or over. We welcome applicants of any age who have taken the UKCAT, apply through UCAS by the closing date, fulfil the GCSE requirements (above), and have proof of recent and appropriate knowledge of Biology and Chemistry via a biomedical sciences degree, by studying these subjects to A-level, by taking an Access to Medicine course, or through the Open University.

Graduates should have at least upper second-class honours in their first degree and grades BBC at their first sitting of A-levels. Graduates with a lower classification of degree will only be considered if they achieved grades AAA at the first time of sitting A-levels. Subsequent or higher degrees do not replace this entrance requirement.

Biomedical Science graduates

Biomedical Science graduates should have covered sufficient Biology and Chemistry in their course.

Experienced health professionals

Currently practising health professionals should have at least five years' post-qualification experience. This includes nursing, optometry, radiography, physiotherapy, pharmacy and similar professions.

All health professionals and all other graduates will be asked to provide evidence of recent knowledge of Biology and Chemistry to A-level standard, through an Access to Medicine course or the Open University, or by obtaining grade A at A-level.

Access courses

We will consider applicants who are taking one of the following Access to Medicine courses in a single year, and have not previously taken Biology and Chemistry A-levels:

- City College, Norwich,
- College of West Anglia, King's Lynn,
- Sussex Downs College, Lewes,
- Stafford College and New College Telford,
- Foundation Course in Clinical Science/ Medicine, Bradford.

Typically our offer will require distinctions in every component of the course.

Open University qualifications

120 points from OU courses with Distinction in level 1 courses and Pass II in level 2 or 3 courses, chosen from relevant OU courses listed at www.hyms.ac.uk/undergraduate/entry-requirements.aspx.

English language requirements

If English is not your first language, we typically require:

- GCSE/IGCSE English language (as a first language) grade A,
- or IB score of 6 at the standard level in English Language (as a first language),
- or an IELTS overall score of 7.5 with a minimum of 7.0 in every component.

Health and disability

All offers of places are conditional upon a satisfactory occupational health assessment. Applicants offered a place are required to return a completed health questionnaire to the HYMS occupational health service by the specified date before the start of the course. Some applicants may also be asked to undergo an independent medical examination, and/or a skills assessment, before they can be registered on the course.

Blood-borne viruses

The Department of Health requires all medical students and doctors to be free from infection with Hepatitis B, Hepatitis C and HIV viruses if they are to take part in exposure-prone medical procedures. HYMS occupational health services offer voluntary screening for these viruses, along with a free immunisation service, to all medical students at the start of their course. Students who are infected, or who do not wish to be screened, can continue with their training but are not allowed to assist in exposure-prone procedures and are unable to work in clinical areas where their infection could pose a risk to patients in their care.

Immunisations

We will tell you about immunisations at the time of your interview. The Department of Health and NHS institutions may issue specific requirements on transmissible diseases from time to time to reduce the risks to patients.

Applicants with disabilities

We welcome an application from you if you have a disability or a serious medical condition. We believe that you can make a valuable contribution to the practice of medicine, and we're committed to supporting and advising you in the application process.

All graduates are required to meet the outcomes of the medical course as specified in the GMC document 'Tomorrow's Doctors' (2009). Therefore, as with all potential applicants, it is important before you apply to gain insight into the demands of a medical career, and a realistic understanding of the roles of a doctor.

You should also think carefully about ways in which your particular situation might impact on patient care. In particular, you should think carefully about whether being a medical student might adversely affect your own health, and about whether your condition could impair your judgement or otherwise cause harm to patients, for instance by transmitting an infection. We strongly advise you to seek guidance about these issues before applying, from a consultant in occupational health or another suitably qualified doctor (other than your normal medical adviser).

We may request an occupational health assessment before we make an offer, if any of these questions need addressing more fully.

Rarely, we may decide that a disability or condition makes an applicant unsuitable to study medicine, on the grounds of patient safety or inability to meet the GMC requirements. This decision will only be taken after full discussion and consideration by the HYMS Fitness to Practise committee.

Dyslexia

Anyone offered a place at HYMS who has special needs due to dyslexia, or who has taken the extended version of the UKCAT because of dyslexia, should send an educational psychologist's report (or equivalent) with their occupational health questionnaire before the start of the course. This report should be dated within the last three years if written before the applicant's 16th birthday, or within the last five years if written when the applicant was 16 or over. Students can contact the university Disability Service at Hull or York (as appropriate) to request a screening for dyslexia. Although additional time may be approved in written exams, it is very unlikely to be allowed in clinical examinations.

Other requirements

All students must sign each year an Agreement to Conditions of Medical Training, which is sent to them in the month before they register as a student at either university. For the current version of this agreement, see www.hyms.ac.uk/undergraduate/before-you-arrive.aspx.

Criminal records

Applicants must inform the HYMS Associate Dean for Admissions in writing at the time of application of any prior criminal charges or convictions, spent or unspent, including but not limited to cautions, reprimands, final warnings, bind-over orders or similar, fixed penalty notices, penalty notices for disorder, ASBOs or VOOs. If an applicant incurs any of these between submitting their application and starting the course, they must inform the Associate Dean for Admissions immediately. This information will not be available to UCAS form assessors or interviewers and it will not affect the recommendation to offer a place, but the offer will require the prior approval of the HYMS Fitness to Practise committee, after full details of the circumstances have been provided by the applicant. In such a case, the HYMS Fitness to Practise committee is acting on behalf of both universities and all NHS Trusts in the HYMS area. All students are required to undergo an enhanced disclosure check by the Criminal Records Bureau (CRB) at the time of registration with the university. If the CRB check discloses any convictions, cautions, reprimands or final warnings not already declared, the application will be referred to the Fitness to Practise committee and the place may be forfeited.

Selection procedure

HYMS aims to be fair, open and transparent when selecting applicants. The following criteria are considered:

- academic ability, judged by prior academic performance and, where appropriate, predicted academic results,
- evidence of motivation and reasons for working in healthcare,
- evidence of a realistic understanding of healthcare issues and practice,
- written and oral communication skills, and teamworking skills,
- evidence of conscientiousness, self-motivation, responsibility and appropriate maturity and confidence.

Selection is a two-stage process: scrutiny of all available information leading to selection for interview, followed by interview for selected applicants. No places are offered without interview, which includes assessment of each candidate's suitability for a problem-based learning course and communication skills.

Assessment of UCAS forms

The form is scored by trained assessors against the criteria defined above, using a standard scoring system with appropriate quality assurance. Academic achievement is only part of this assessment; non-academic factors are equally important. The average UCAS form score for each candidate is considered in the light of their UKCAT score, and all candidates are then ranked. The top-scoring applicants are invited for interview.

Interview

Each candidate is interviewed by at least two people, one of whom is an experienced health professional, without seeing their UCAS form. All candidates are assessed on attributes that cannot be judged from a written application. Further details can be found at www.hyms.ac.uk/admissions/.

Ranking for final selection

Candidates are ranked again after interview. Places are offered to the top-ranked candidates. For up-to-date details see www.hyms.ac.uk.

Feedback

Feedback is given only to unsuccessful applicants, who must request it in writing. As there are very many able applicants, most unsuccessful applicants have simply been surpassed in rank order by others. The usual feedback provided is therefore the applicant's numerical score and position in the overall ranking.

Clearing

HYMS is unlikely to enter UCAS Extra or Clearing.

HYMS admission policy follows the Guiding Principles for the Admission of Medical Students agreed by the Council of Heads of Medical Schools (revised March 2010).



Diversity and widening access



The universities of Hull and York are committed to widening access to higher education. We welcome applicants who bring diverse experiences to the medical school community, including older students and graduates (over a quarter of each intake), and we encourage applicants to spend a gap year either at work or travelling, in the UK or abroad.



We are closely involved in national and local initiatives to encourage the recruitment of potential doctors from all sectors of society. Our own Widening Participation programme includes a range of local projects to raise the aspirations of young people in the region's schools and colleges, encouraging them to consider a career in medicine. HYMS students have a central role as ambassadors and role models in this programme, interacting with a wide range of young people. To find out more about all our projects, see www.hyms.ac.uk/about/widening-participation.aspx.



International students

We believe that students from outside the UK bring valuable additional experiences to the medical school.

Who is an overseas student?

This depends on your residential category. If you are from outside the European Union and not a British citizen, you are competing for one of the ten separately funded places for overseas students, who are defined as those applicants 'Overseas' by fee status. As part of our admission process, we review all UCAS applicants' self-selected Residential Category and then contact you later in the admission year if we require clarification. If you live anywhere in the EU or EEA, you must compete for one of the 130 places for 'Home' students.

Why choose HYMS?

Studying medicine abroad is a big step, so we help you to settle in and make you feel at home. Our international admissions assistant will advise and support you at every stage of your application and in the early years of the course. With only 70 first-year medical students on each campus, you all get to know each other within the first few weeks. You work in the same small group, meeting twice a week with two different tutors (PBL facilitator and clinical skills tutor), so you quickly get to know the school staff too. Your PBL facilitator is

also your personal adviser. You have friendly support and assistance with non-academic matters from the International Offices of both Hull and York universities.

Admissions requirements

Competition for places is intense. You must have an excellent command of the English language and meet the academic requirements and non-academic admissions criteria as described on pages 54–55. If you are invited for interview, this will normally take place in Hull or York at HYMS on one of the interview dates (shown in advance on www.hyms.ac.uk).

Accommodation

All international students are guaranteed university accommodation in their first year and given priority in subsequent years.



Maintaining international links

All our students have the chance to study abroad during the elective period in Year 5. HYMS is actively developing links with medical schools outside the UK. The degree of MB BS (Hull York) is an EU-recognised primary medical qualification.

Fees

To check your fee status, see www.ukcisa.org.uk/. EU students pay 'Home' fees and may be eligible for loans. Further information can be found at www.direct.gov.uk/en/EducationAndLearning/. Tuition fees for 'Overseas' students are fixed at least twelve months in advance, and are liable to a small annual increase. As an example, the tuition fee for entry in 2011 was £23,268. Up-to-date information is shown on www.hyms.ac.uk/undergraduate/international-students.aspx. You should allow between £8,000 and £10,000 a year to cover your living costs in the UK.



"Meeting the HYMS international assistant every week in our first year was a real help: we had a name and a face, someone we could talk to about any problems concerning us. She gave us great advice and was a real comfort in the first few weeks when we were all lost and confused! We're still great friends with her, even though we don't get to see her that often. I would recommend HYMS to other students because I think it's simply one of the best med schools in England! PBL and the early clinical exposure is a fantastic combination, and living up north is great — everything is cheap and everyone is friendly."

Fatima Ahsan, Year 5 student from Pakistan

Contacts

For admissions enquiries

telephone 01904 321690

For further copies of this prospectus

telephone 01482 465293

For the University of Hull prospectus

telephone 01482 465293

For the University of York prospectus

telephone 01904 433527

Student Recruitment and Admissions Service

The University of Hull
Hull HU6 7RX
telephone 01482 466100

The University of York
Heslington
York YO10 5DD
telephone 01904 324000

For the latest developments at the Hull York Medical School, visit www.hyms.ac.uk

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The HYMS region



The map shows the NHS area where you will be working on placement. In your first two years, your clinical placements will be close to Hull and York. After that, your placements follow a rota in a variety of settings around Hull, Grimsby, Scarborough, Scunthorpe and York.



The Hull York Medical School Undergraduate Prospectus 2012



THE HULL YORK
MEDICAL SCHOOL

admissions@hyms.ac.uk
www.hyms.ac.uk
UCAS course code A100
UCAS institution code H75