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THE UNIVERSITY OF BRITISH COLUMBIA

# **UBC Vancouver**

# **ACADEMIC**

# **CALENDAR**

**2019/20**

[www.calendar.ubc.ca/vancouver](http://www.calendar.ubc.ca/vancouver)



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Academic Staff

Department of Anesthesiology, Pharmacology, and Therapeutics  
Department of Biochemistry and Molecular Biology  
Department of Cellular and Physiological Sciences  
Department of Dermatology and Skin Science  
Department of Emergency Medicine  
Department of Family Practice  
Department of Medical Genetics  
Department of Medicine  
Department of Obstetrics and Gynaecology  
Department of Occupational Science and Occupational Therapy



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THE UNIVERSITY OF BRITISH COLUMBIA

Department of Ophthalmology and Visual Sciences

Department of Orthopaedics

Department of Pathology and Laboratory Medicine

Department of Pediatrics

Department of Physical Therapy

Department of Psychiatry

Department of Radiology

Department of Surgery

Department of Urologic Sciences



## Introduction

### Dean's Office

D. Kelleher, Dean, Faculty of Medicine and Vice-President, Health  
D. Money, Executive Vice-Dean  
G. Parhar, Executive Associate Dean, Clinical Partnerships and Professionalism  
R. Wong, Executive Associate Dean, Education  
R. McMaster, Interim Executive Associate Dean, Research  
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Fax: 604.822.6061  
Faculty of Medicine Website (<http://www.med.ubc.ca/about>)

### Our Vision: To Transform Health for Everyone.

Ranked among the world's top medical schools with the fifth-largest MD enrollment in North America, the UBC Faculty of Medicine is a leader in both the science and the practice of medicine. Across British Columbia, more than 11,000 faculty and staff are training the next generation of doctors and health care professionals, making remarkable discoveries, and helping to create the pathways to better health for our communities at home and around the world.

The Faculty — comprised of approximately 2,200 administrative support, technical/research and management and professional staff, as well approximately 650 full-time academic and 8,500 clinical faculty members — is composed of 19 academic basic science and/or clinical departments, three schools, and 23 research centres and institutes. Together with its University and Health Authority partners, the Faculty delivers innovative programs and conducts research in the areas of health and life sciences. Faculty, staff and trainees are located at university campuses, clinical academic campuses in hospital settings and other regionally based centres across the province.

For more information please visit the Faculty of Medicine website (<http://www.med.ubc.ca>).

<sup>1</sup>Times Higher Education 2018 Rankings: 21st in life sciences & 34th in clinical, pre-clinical and health QS World University 2018 Rankings: 31st in life sciences and medical degrees.

## Doctor of Medicine

### Doctor of Medicine > Introduction

The Faculty of Medicine offers the Medical Doctor Undergraduate Program (MDUP), which leads to the Doctor of Medicine (M.D.) degree. The program requires a minimum of 90 university credits in preparation plus four years of study in Medicine. A physician's education can be broadly divided into four phases:

1. Pre-medical preparation, which can be completed in a variety of faculties or programs.
2. Medical school training (four years).
3. Residency training (two years or more).
4. Continuing professional development.



The MDUP provides the medical school training referenced in the second phase above.

## Doctor of Medicine > Admission

### *Selection of a Program of Pre-Medical Studies*

Students planning to apply for admission to the Doctor of Medicine program should select courses that conform to the requirements of a bachelor's degree of their choice. **No particular degree program is considered ideal** as preparation for the study and practice of medicine. A variety of pre-medical academic backgrounds are considered desirable.

Students who have completed programs and who then enroll in unclassified non-degree programs for the sole purpose of improving their academic qualifications for admission are advised that only a small proportion of such candidates ultimately gain admission.

### *Prerequisites Requirements and Recommended Courses*

Candidates for admission must be Canadian Citizens or Permanent Residents and must have completed a minimum of 90 graded credits of university-level study (e.g., excluding pass/fail credits). These, including the required university-level prerequisite coursework (or their equivalents) must be completed by April 30 of the year for which admission is sought.

A full year of English (minimum of 6 credits) is the only prerequisite coursework required for entry into the Doctor of Medicine program. However, courses in biology, general/inorganic chemistry, organic chemistry and biochemistry are strongly recommended. Further information on recommended courses can be found at M.D. Undergraduate Admissions (<http://mdprogram.med.ubc.ca/admissions/>).

### *Medical College Admission Test*

All applicants must take the Medical College Admissions Test (MCAT) and request that their results be released to UBC. Information and online registration are available on the MCAT (<http://www.aamc.org/students/applying/mcat/>) website.

**Please note:** UBC is not a part of the American Medical College Application Service (AMCAS). You must therefore specify that you would like your test results released to UBC. This can only be done **after** your results have been sent to you. Please use the MCAT Score Reporting System to send your scores to UBC; refer to the Help Questions within the Score Reporting System for specific instructions. Applicants are strongly encouraged to review the "Scores Sent to Institutions" option to confirm that results have been successfully released to UBC. **This is not done automatically.**

Applicants are required to meet a minimum score in each component of the test. These scores will be determined each year by Admissions Committees. Applicants should check M.D. Undergraduate Admissions (<http://mdprogram.med.ubc.ca/admissions/>) for the current minimum requirements, dates of valid MCAT sittings, and deadline for receipt of test scores.

If you have written more than one MCAT, the MCAT with the best overall total score will be used. However, if MCAT 2015 has been written, these test results will be used, not scores from the previous version of the MCAT, even if the scores on the MCAT 2015 exam do not meet minimum requirements. If you have written MCAT 2015 more than once, the best overall total score will be used. For further information, applicants should review the Admissions Requirements and Evaluation Criteria sections of the Admissions website. It is the applicant's responsibility to ensure that all results are released to the UBC Faculty of Medicine and received by the Admissions Office.

### *Required Academic Standards*



Applications for admission will be considered from candidates who are Canadian Citizens or Permanent Residents and who will have completed all prerequisite courses prior to April 30 of the year for which admission is sought, have achieved the minimum required MCAT scores, and who have attained a minimum overall academic average of 70% based on all university-level courses attempted.

There is an overall threshold academic threshold (<http://mdprogram.med.ubc.ca/admissions/admission-requirements/>) below which full file review will not be performed.

All supporting documentation (including transcripts, AP/IB transcripts, foreign transcripts, exchange program or study abroad transcripts, etc.) that arrive in the Admissions Office after the posted application deadline will not be accepted and will result in the application being rendered ineligible.

Persons who have been required to withdraw from another medical school for academic reasons are **not** eligible to apply.

### *Selection Process*

The entering class is limited to 288 full-time students. The number of qualified applicants significantly exceeds the number of available positions. Therefore, not every qualified applicant will be offered admission. Admission is based on a selection process which strives to enroll the most highly qualified applicants who will be evaluated on the following criteria:

- An academic evaluations is calculated as follows:

Overall academic average, based on all university-level courses with grades attempted (including summer courses taken prior to the year of application and graduate courses with grades). The academic year (September - August) with the lowest academic average will be dropped (if applicable). At most, 30 credits can be dropped. If more than 30 credits are presented in one academic year, the 30 credits with the lowest grades will be removed. In order to have the academic year with the lowest academic average dropped, applicants must have 90 credits with grades remaining by the application deadline.

- MCAT scores.
- The evaluation of non-academic criteria based on the following:
  1. A list of extracurricular activities prepared by the applicant.
  2. A report of non-academic experiences and a rural interest statement.
  3. Interview, if granted.
  4. Three references, when requested.
  5. Rural/remote suitability (if applicable).
  6. Essay by Canadian Indigenous (Status Indians, Non-Status Indians, Métis, or Inuit) candidates who are applying to the Indigenous Stream.

Please refer to M.D. Undergraduate Admissions Evaluation Criteria (<http://mdprogram.med.ubc.ca/admissions/evaluation-criteria/>) for additional information.

The interview is a critical component of the admission process. The interview process follows the Multiple Mini-Interview (MMI) model. Applicants selected for an interview will be contacted by the admissions office and will also be asked to submit their reference letters. The interview dates are usually scheduled in February.

The selection of candidates for admission to the distributed M.D. undergraduate program is governed by guidelines established by the Admissions MD Subcommittee and approved by the Senate of UBC. The selection process reflects the values of the UBC Faculty of Medicine and all university partners in the UBC distributed M.D. undergraduate program. The process is designed to choose well-rounded students from a variety of backgrounds who meet the goals of the expanded, distributed program; who can be expected to perform well in the rigorous curriculum and small group learning format; and who can balance and enrich their



academic experience with strong non-academic skills and interests.

The UBC Faculty of Medicine's Executive Associate Dean, Clinical Partnerships and Professionalism, oversees the selection process to ensure that all applicants are given careful consideration without regard to age, gender, race, religion, sexual orientation, marital, or economic status. The Admissions Selection Committee reviews and discusses all interviewed applicants. At present, admission is limited to Canadian citizens and permanent residents of Canada. Preference is given to residents of British Columbia. Information on residency criteria can be found at BC Residency Requirements <http://mdprogram.med.ubc.ca/admissions/admission-requirements>. A maximum of 10% of the total seats may be made available to out-of-province applicants in the medical program each year.

The applicant will have the opportunity to indicate their regional medical program site preferences (Northern, Southern, Island, or Vancouver Fraser) after receiving an interview offer. Members of the Admissions Selection Subcommittee are not aware of an applicant's medical program site preference during the selection discussions. Following an admissions decision, successful applicants are allocated to sites based on their preferences. The first site choice is given priority, unless the available positions at that site have been filled, in which case he/she would be wait-listed for their preferred site if applicable.

### *UBC Faculty of Medicine Undergraduate Distributed Program*

The UBC Faculty of Medicine offers a distributed program involving 288 students at geographically separated campuses. 32 students will be in the Northern Medical Program located at the University of Northern British Columbia, 32 will be in the Island Medical Program located at the University of Victoria, and another 32 students will be in the Southern Medical Program at UBC Okanagan. The remaining 192 students will be in the Vancouver Fraser Medical Program located at UBC Vancouver.

### *Application Procedure*

Applicants are required to apply using the Faculty of Medicine's Online Application System (OAS). Applications will be available from early June until the application deadline. Information can be found at M.D. Undergraduate Admissions (<http://mdprogram.med.ubc.ca/admissions>). All inquiries should be addressed to M.D. Undergraduate Admissions, Faculty of Medicine, Dean's Office. Supporting documentation must be received by the Admissions office by the application deadline. Final post-secondary transcripts for students currently enrolled in a program of studies must be received by June 30 of the year for which admission is sought.

All applicants are required to pay an application fee (<http://mdprogram.med.ubc.ca/admissions/application-fees/>). An additional evaluation fee is required if transcripts are from an institution outside of BC. Applications with incomplete documentation or without the correct fee will not be eligible. Fees are non-refundable and are not applicable to tuition. All application fees are under review.

The Faculty of Medicine will interview a sub-set of approximately 640 applicants, based on results of file reviews of academic and non-academic evaluations. On receipt of an invitation, the applicant will be requested to provide their referees with reference forms, which will be available electronically. The completed reference letters must be received by the Admissions office by the date posted on the website. Each qualified applicant will participate in one interview, in Vancouver, which is typically scheduled in February. The interview process follows the Multiple Mini Interview (MMI) model. The interviewers consist of a combination of academic, clinical, community representatives and UBC's third- or fourth- year medical students, representing diverse geographic areas of BC. Please refer to M.D. Undergraduate Admissions (<http://mdprogram.med.ubc.ca/admissions/>) for more information.

Notification will be issued to all applicants starting in mid-May. Successful applicants are offered a position at a specific regional medical program site in the Faculty of Medicine. An offer is binding to a specific area, as outlined in the offer letter.

### *Indigenous Stream Applicants*

The Faculty of Medicine welcomes applications from qualified Indigenous Canadian applicants (Status Indian, Non-Status Indian,





Métis, and Inuit). The Indigenous admission process of the Faculty has a target of 5% of the annual complement of seats in the first year M.D. Undergraduate Program. Indigenous applicants can apply either to the regular stream of admission or to the Indigenous admission stream. Applicants who self-identify as Indigenous will be considered under the Indigenous admission process as well as under the regular admission process.

If you wish to apply as an Indigenous applicant, you will be required to submit proof of ancestry and write an essay which will be reviewed by the Indigenous Admissions Subcommittee. Based on your completed application, you may be offered an interview with the Indigenous Interviewing Panel. Please contact the Indigenous Student Initiatives Manager in the Faculty of Medicine at 604.822.8291, or email ([es.andrew@ubc.ca](mailto:es.andrew@ubc.ca)) for further information.

### *Post-Acceptance Requirements*

Upon receipt of an official letter of offer, each successful applicant must provide a deposit payable to the University of British Columbia by the date, and in the amount, specified in the letter. The deposit is non-refundable but will be applied to tuition fees if the student attends the Doctor of Medicine program in the academic session specified. Please see the Offers section of the Post-Acceptance Conditions (<http://mdprogram.med.ubc.ca/admissions/post-acceptance-conditions/>) for more information.

Upon acceptance, each applicant must submit evidence of immunizations (Tetanus/Diphtheria-Toxoid, Polio, MMR) and a negative TB skin test (if the skin test is positive, a chest x-ray is required) to the Student Health Service.

Undergraduate medical students without immunity to Hepatitis B are at risk for infection. Students who are Hepatitis B antigen positive may pose a risk of passing infection to others. All students are registrants of the College of Physicians and Surgeons of British Columbia and must abide by the Professional Standards and Guidelines for Blood-borne Pathogens in Registrants. Applicants are strongly encouraged to know their serological status for Hepatitis B prior to applying to the undergraduate program of the Faculty of Medicine. Students are advised that undergraduate medical students who have tested positive for Hepatitis B antigen will be monitored by the College, may face certain restrictions in the course of their medical training and may be constrained in their ability to practice.

All undergraduate medical students admitted to the Faculty of Medicine at UBC will have their vaccination records reviewed to determine their risk for communicable diseases. In compliance with College of Physicians and Surgeons of British Columbia Professional Standard, students must be tested for Hepatitis B, Hepatitis C and HIV upon entry into medical school and every three years during medical school. They must report these findings, if positive, to the College of Physicians and Surgeons of British Columbia for licensure. Undergraduate medical students who have not been vaccinated against Hepatitis B will be required to complete a vaccination series, unless they are able to demonstrate their Hepatitis B status. Sero-conversion will be tested in all medical students, either upon entry if they have received prior vaccination, or upon completion of a vaccination series.

The Student Health Service will test undergraduate medical students who continue to fail to sero-convert for the presence of Hepatitis B antigen. Students who demonstrate Hepatitis B infectivity or are positive for Hepatitis C or HIV will be monitored by the College of Physicians and Surgeons of British Columbia and may be required to complete a modified course of training and may pursue their studies only as long as their continued involvement does not pose a health or safety hazard to themselves or others and as long as they are able to meet the core requirements for a medical degree at UBC.

The Faculty of Medicine will make every reasonable effort to ensure that a modified course of training will meet professional licensing requirements. Licensing requirements and decisions are within the sole jurisdiction of the College of Physicians and Surgeons of BC. The Faculty of Medicine cannot guarantee that a modified course of training which will lead to the granting of an M.D. degree will be accepted or recognized by this or any other licensing body. All applicants who accept an offer are required to consent to a Criminal Record Check.

Counselling resources are available to any undergraduate medical student identified as Hepatitis B, Hepatitis C or HIV positive.



### *Applicants with Disabilities*

Applicants to the Faculty with disabilities will be considered in accordance with UBC's policy on Academic Accommodation for Students with Disabilities. This policy does not eliminate the need for evaluation or the need to meet essential learning outcomes. Students seeking academic accommodation due to disability must:

- Provide the necessary documentation to Access and Diversity (the University does not provide or assume the cost of diagnostic services), and
- Bring the request for academic accommodation or for changes in accommodation needs to the attention of the appropriate personnel in a timely manner in order to allow for arrangement of accommodations.

Students with disabilities are encouraged to pursue their studies as long as their continued involvement does not pose a health or safety hazard to themselves or others, and as long as they are able to meet the core requirements for a medical degree. The Faculty of Medicine will make every reasonable effort to ensure that any modified course of training will meet professional licensing requirements. However, licensing requirements and decisions are within the sole jurisdiction of the College of Physicians and Surgeons of British Columbia. Similarly, access to the full-range of post-graduate training may be limited for students with certain disabilities.

For more information please contact Access and Diversity (<http://students.ubc.ca/success/student-supports/academic-accommodations>), 604.822.5844.

### *Reapplications*

Unsuccessful applicants may reapply in subsequent years without prejudice, although candidates who are repeatedly unsuccessful are encouraged to explore other career options.

### *Admission of Students by Transfer*

Transfer students may be accepted to the third year of the Doctor of Medicine program only if vacancies exist in that class. Transfers are generally not possible in any other year.

In order to be eligible, students requesting transfer must be in good standing in a Canadian or US medical school accredited by the Committee on Accreditation of Canadian Medical Schools and/or the Liaison Committee on Medical Education.

Students who meet the above criteria and wish to be considered for transfer should contact the Associate Dean, Admissions ([bruce.fleming@ubc.ca](mailto:bruce.fleming@ubc.ca)).

The application deadline for transfer students is January 31. Applicants must submit an outline of their University curriculum, application fees (see above), a letter indicating their reasons for wishing to transfer, and a letter from the dean (or designate) of the medical school which they currently attend. Interviews may be required.

Requests for partial year transfers will not be considered.

### *Applications from Current Graduate Students*

Admission of graduate students into the Faculty of Medicine will be made through the existing selection procedures as outlined above. Such students must complete all portions of the program in which they are registered, including the successful defense and submission of an approved thesis in final form to the Faculty of Graduate and Postdoctoral Studies and provide official proof of



completion by July 30 prior to admission to the Faculty of Medicine. Graduate students in non-thesis based programs must complete all required courses, projects, exams, practica, etc., and have all grades submitted by this deadline.

Deferrals will NOT be granted to allow an applicant to complete their graduate program.

Graduate students who are invited for an interview will be required to submit an electronic report confirming that the applicant is on track to complete the above requirements by the July 30 deadline. If the applicant is unable to confirm that these requirements will be met or if a response is not received by the stated deadline the interview offer will be rescinded.

For further information on the admission of graduate students, please visit M.D. Undergraduate Admissions (<http://mdprogram.med.ubc.ca/admissions/>).

### *Deferred Entry*

Requests for deferred entry will be considered only from students who have completed a first degree, and then only in exceptional circumstances.

**Note:** Deferral requests must be made only after an offer of admission has been made.

### *Registration*

Students in each year of the medical program will be notified of registration procedures.

No student will be allowed to register after the first day of Year 1 instruction in the year of enrolment, nor will they be admitted to any class after its first session, except by permission of the Dean.

## **Doctor of Medicine > Academic Regulations for Students Who Entered the Program in 2014/15 or Earlier**

### *Attendance*

Regular attendance is expected of students in all their classes (including lectures, laboratories, tutorials, seminars, etc.). All absences, whether planned or unplanned, must be reported through the Program's absence procedures.

A student wishing an "excused" absence, planned in advance, must submit a request through the Program's absence procedures.

All students registered in the distributed program at geographically separated campuses will be subject to the same academic regulations.

### *Examinations*

Examinations in the Faculty of Medicine may be held at various times throughout the year. These examinations are obligatory for all students.

Should a student be unavoidably absent from a sessional or final examination because of illness or other reason, the Dean's Office must be notified of the facts in the case before the end of the period during which the examination is scheduled. Failure to observe



this rule may result in a failure being recorded in the course.

When a sessional or final examination has been missed through illness or some other justifiable cause, application for deferred examination or special consideration must be made in writing to the Dean not later than 48 hours after the close of the examination period. If the absence was for reasons of health, a physician's certificate indicating the nature and duration of the illness must be submitted to the Dean's Office.

A student may be denied the privilege of writing a sessional examination in any subject because of unsatisfactory work or attendance, and in this case will be considered to have failed the course.

In any course which involves several components (for example tutorial performance, laboratory work and written examinations), a student is required to achieve satisfactory standing in all parts of the course. If the course is repeated, no exemption will ordinarily be granted from the work in any part.

Term essays and examination papers may be refused a passing mark if they are illegible or noticeably defective in English.

The passing mark in the Faculty of Medicine is 60%. In the case of Objective Structured Clinical Examinations (OSCE), students will be informed in advance of the expected number of stations they must pass. In the case of supplemental examinations, the passing mark is 65%.

Results of all assessments will be reviewed and approved by a promotions committee. Final examination results will be released by the Dean's Office.

## ***Subjects of the Final Examinations***

### **First Year**

Three longitudinal courses: Clinical Skills; Doctor, Patient, and Society; Family Practice Continuum.

Six sequential courses:

- Orientation
- Principles of Human Biology
- Host Defences and Infection
- Cardiovascular; Pulmonary
- Fluids, Electrolytes, Renal, and GU

### **Second Year**

Three longitudinal courses: Clinical Skills; Doctor, Patient, and Society; Family Practice Continuum.

Eight sequential courses:

- Gastrointestinal
- Blood and Lymphatics
- Musculoskeletal and Locomotor
- Endocrine and Metabolism



- Integument
- Brain and Behaviour
- Reproduction
- Nutrition, Growth and Development

### Third Year

Promotion of students from third to four year will be based on successful completion of written examinations, oral examinations, and clinical performance evaluations for each clinical clerkship.

The subjects in which students will be assessed in third year will be Anaesthesia; Dermatology; Emergency Medicine; Family Practice; Medicine; Obstetrics and Gynaecology; Ophthalmology; Orthopaedics; Pediatrics; Psychiatry; and Surgery.

### Fourth Year

Students must successfully complete senior clerkship electives, the Preparation for Medical Practice (PMP) course, and the Year 4 OSCE. Students will be assessed based on clinical performance evaluations, the PMP projects and tests, and the observed performances in the OSCE.

### *Medical Council of Canada Examinations*

All persons writing the Medical Council of Canada examinations are required to submit a separate examination fee to that body. This fee is set by the Council and is payable to The Registrar, Medical Council of Canada.

### *Grading Practices*

In the Faculty of Medicine, individual courses in the Doctor of Medicine undergraduate program are graded on a Pass (P), Fail (F) system. The Faculty defines Fail as below 60% and a Pass as 60% or greater, unless otherwise specified in the course Policy and Procedure Manual.

### *Advancement*

The Faculty will determine the student's fitness for promotion at the end of each session.

A student whose academic standing is unsatisfactory may be required either to withdraw from the Faculty or to repeat all or part of the academic work for the year.

If the progress of a student has been unsatisfactory in any given course or component of a course, the Faculty may permit supplemental examination in the course(s) failed, at the discretion of the Faculty, provided that attendance has been satisfactory. No student may repeat a course more than once. A course failure is formally and permanently noted on the student's transcript. The Faculty will identify supplemental work necessary for the student to prepare for the supplemental examination. It is the student's responsibility to consult with the Faculty or designated representative to complete the required supplemental work, and to complete the required supplemental examinations. If the student satisfies the requirements of the course(s) concerned and passes each supplemental examination according to the required passing standard, he/she will be allowed to continue in the program. If the student does not pass the supplemental examination, or otherwise does not fulfill program requirements, he/she may be required to withdraw from the program or to repeat a portion or the entire work of the year. A student who fails a year twice or fails any two of the four years of the program (need not be consecutive) will be required to withdraw from the program, in accordance with the University's Advancement Regulations. During the transition to the renewed curriculum, a student who fails any given year twice may also be required to withdraw from the program even though the curriculum may not be identical in these years. Students may



appeal this decision in accordance with the Appeal Process for Appeals on Academic Standing for Undergraduate Medicine in the Faculty of Medicine. A decision by the dean may be appealed to the Senate Committee on Appeals on Academic Standing.

Although satisfactory academic performance is prerequisite to advancement it is not the sole criterion in the consideration of the suitability of a student for promotion or graduation. The Faculty reserves the right to require a student to withdraw from the Faculty if considered to be unsuited to proceed with the study or practice of medicine.

### *Graduation Requirements*

A candidate for the Doctor of Medicine must have fulfilled all the requirements for entrance to the Faculty of Medicine and have attended the four full years of instruction which comprise the medical course. No one will be admitted to candidacy for the Doctor of Medicine who has not been in attendance for the final two years in the Faculty of Medicine at the University of British Columbia.

Each candidate for graduation must have passed all the required examinations in the subjects comprising the medical course, and have received acceptable ratings in certain courses for which satisfactory completion is required but specific marks are not assigned.

The Faculty will recommend to Senate the granting of the Doctor of Medicine to a student who has completed satisfactorily the academic requirements.

Each candidate for the Doctor of Medicine must make a formal application.

## **Doctor of Medicine > Academic Regulations for Students Entering the Program in 2015/16 or Later**

All students registered in the distributed program at geographically separated campuses will be subject to the same academic regulations.

### *Attendance*

The MDUP and M.D.-Ph.D. programs are designed with structured, sequential learning activities that build on prior knowledge and attainment of competencies. Some of these activities are only delivered once per academic year. An absence interrupts the learning process and may have an impact on the development and maintenance of competencies.

Students are required to attend all scheduled small group learning activities and clinical sessions unless otherwise indicated. Regular attendance is expected of students in all scheduled learning activities. All absences, whether planned or unplanned, must be reported through the Program's absence procedures.

A student wishing an "excused" absence, planned in advance, must submit a request through the Program's absence procedures.

An absence from the program for more than four weeks within an academic year will usually require an extension of the usual four-year timeframe for completion of the medical undergraduate program. Excessive, recurrent or extended absences could result in a requirement to repeat some or all of an entire academic year in accordance with the Faculty's attendance and leave policies. In determining the need for an extension of studies, the Faculty may consider the length of the absence(s), timing during the academic year, the student's year of studies, and the student's academic performance, including issues of professionalism.

Students may require a leave of absence for ill health or other unexpected personal or family circumstances. Each student's circumstance will be different, and will be handled on a case-by-case basis. Every effort will be made to accommodate the student's



completion of the program requirements within the normal duration of study. However, if the student misses a significant amount of the curriculum, the Faculty may require the student to repeat the missed curriculum or the year.

Students may request academic concession in circumstances that may adversely affect their attendance or performance in a course or program as per UBC's Academic Concession (Calendar page <http://www.calendar.ubc.ca/vancouver/index.cfm?tree=3,48,0,1>) policy. <http://www.calendar.ubc.ca/vancouver/index.cfm?tree=3,48,0,0#25>

### *Assessments and Examinations*

Examinations are a sub-set of assessments which include formal written and/or oral components. Assessments also include other types of formative and summative assessment including, but not limited to, workplace-based assessments and portfolios.

Assessments in the Faculty of Medicine will be held throughout the year. All assessments are mandatory for all students.

Should a student be unavoidably absent from an examination because of illness or other reason, the Dean's Office must be notified of the facts in the case before the end of the period during which the examination is scheduled. Failure to observe this rule may result in a failure being recorded in the course.

When an examination has been missed through illness or some other justifiable cause, application for deferred examination or special consideration must be made in writing not later than 48 hours after the close of the examination period. If the absence was for reasons of health, a physician's certificate indicating the nature and duration of the illness must be submitted to the Dean's Office.

A student may be denied the privilege of writing an examination in any subject because of unsatisfactory work or attendance, and in this case will be considered to have failed the course.

In any course that involves several components (for example portfolios, work based assessments, OSCEs, and written examinations), a student is required to pass all components of the course. If the course is repeated, no exemption will ordinarily be granted.

Written assessments may be refused a passing mark if they are illegible or noticeably defective in English.

The passing mark in the Faculty of Medicine is 60%. In the case of supplemental examinations, the passing mark is 65%. In the case of Objective Structured Clinical Examinations (OSCE), the passing mark for individual stations is 60%, but the number of stations required to pass any OSCE is determined by the Faculty and communicated before each OSCE.

Results of all assessments will be reviewed and approved by a promotions committee. Final examination results will be released by the Dean's Office.

### *Subjects of Assessments and Examinations*

Course content builds on prior knowledge. Assessments in a given course or year will focus on the content delivered in that course or year. Nevertheless, content from preceding courses and years in the MDUP, and content from prerequisites may also be assessed.

Course syllabi provide details about content and competencies that students are expected to obtain through the courses. Syllabi also provide details about assessments that will be used to validate achievement of these learning outcomes.

### **Medical Council of Canada Examinations**



All persons writing the Medical Council of Canada examinations are required to submit a separate examination fee to that body. This fee is set by the Council and is payable to The Registrar, Medical Council of Canada.

### *Grading Practices*

In the Faculty of Medicine, individual courses in the Doctor of Medicine undergraduate program are graded on a Pass (P), Fail (F) system.

### *Academic Performance Review and Advancement*

Student academic performance is reviewed at regular intervals throughout the four-year program by representatives of the Faculty including instructors and assessors. Information will be provided to the promotions committee to make decisions on student advancement.

Two kinds of formal academic performance review takes place, one at the end of term one (in Years 1, 2, and 4) or after each block (in Year 3) and another at the end of each year of the program to consider advancement. Both kinds of reviews evaluate recent academic performance in light of past performance.

For all courses and years, students must demonstrate satisfactory progress towards achieving the exit competencies. Satisfactory progress is demonstrated by passing all assessments in a given course. Doing so indicates that a student has met course milestones and learning objectives, thus demonstrating the level of competency students are expected to achieve by the end of a given course.

If the progress of a student has been unsatisfactory in any given course or component of a course, the Faculty may permit supplemental examination in the course(s) failed, at the discretion of the Faculty, provided that attendance has been satisfactory. No student may repeat a course more than once. A course failure is formally and permanently noted on the student's transcript. The Faculty will identify supplemental work necessary for the student to prepare for the supplemental examination. It is the student's responsibility to consult with the Faculty or designated representative to complete the required supplemental work, and to complete the required supplemental examinations. If the student satisfies the requirements of the course(s) concerned and passes each supplemental examination according to the required passing standard, he/she will be allowed to continue in the program. If the student does not pass the supplemental examination, or otherwise does not fulfill program requirements, he/she may be required to withdraw from the program or to repeat a portion or the entire work of the year. A student who fails a year twice or fails any two of the four years of the program (need not be consecutive) will be required to withdraw from the program, in accordance with the University's Advancement Regulations. Students may appeal this decision in accordance with the Appeal Process for Appeals on Academic Standing for Undergraduate Medicine in the Faculty of Medicine. A decision by the dean may be appealed to the Senate Committee on Appeals on Academic Standing.

The Faculty will determine the student's fitness for promotion at the end of each year of the program.

A student will not be promoted to the next year until all of the requirements for the current year have been met, including remedial work and supplemental assessments.

A student must pass all assessments within a year to advance to the next year.

A student who fails to meet promotion standards may be required either to repeat all or part of a year of the program or withdraw from the program.

Although satisfactory academic performance is prerequisite to advancement it is not the sole criterion in the consideration of the suitability of a student for promotion or graduation. The Faculty reserves the right to require a student to withdraw from the Faculty if





considered to be unsuited to proceed with the study or practice of medicine. For more information about the expectations of learners in the Faculty of Medicine, please refer to the Professional Standards for Learners and Faculty Members (<http://med.ubc.ca/files/2012/02/Professional-Standards-for-the-Faculties-of-Medicine-and-Dentistry.pdf>)

### **Graduation Requirements**

A candidate for the Doctor of Medicine degree must have fulfilled all the requirements for entrance to the Faculty of Medicine and have attended and successfully completed the four full years of instruction which comprise the medical program. No one will be admitted to candidacy for the Doctor of Medicine degree who has not been in attendance for the final two years in the Faculty of Medicine at the University of British Columbia.

Each candidate for graduation must meet all exit competencies as demonstrated by passing all the required assessments in the subjects comprising the medical program, and have received acceptable ratings in certain courses for which satisfactory completion is required but specific marks are not assigned.

The Faculty will recommend to Senate the granting of the Doctor of Medicine degree to a student who has successfully completed the academic requirements.

Each candidate for the Doctor of Medicine must make a formal application.

M.D. degrees may be approved at any regular meeting of the Senate during the Winter Session. Please see the Rolling Graduation (Calendar page:<http://www.calendar.ubc.ca/vancouver/index.cfm?tree=3,44,0,0#21001>) policy in the UBC Calendar.

## **Doctor of Medicine > Degree Requirements for Students Who Entered the Program in 2014/15 or Earlier**

The medical course extends through four academic sessions. All students in the distributed program will follow the same course of studies at the geographically separated campuses. All students will be based in Vancouver for the first half of first year, after which students in the Island Medical Program, Northern Medical Program, and Southern Medical Program will move to their respective campus to continue their studies.

The first half of the first year begins with a one-week orientation in which students are introduced to the problem-based learning (PBL) method, receive instruction in medical informatics and are oriented to the profession of medicine and the components of the curriculum. Following the orientation phase, Principles of Human Biology continues for 14 weeks. This course has the PBL tutorial as its primary teaching methodology with supporting lectures and labs. The underlying purpose of this course is to provide an introduction to the core concepts, basic principles, and the language of medicine. This will then enable students to participate effectively in the next component, the Foundations of Medicine. Basic science material is taught in the context of clinical cases and the material learned is interdisciplinary and integrated. The courses in this segment are Host Defenses and Infection, Cardiovascular, Pulmonary, and Fluids, Electrolytes, Renal, and GU. Clinical Skills I allows students to acquire effective communication skills and to learn how to conduct an interview of a patient. History taking and physical examination skills are learned in relation to the body systems covered in the Foundations of Medicine courses. Family Practice Continuum exposes students to patients and physicians in a medical office setting where they learn and practice clinical skills. This is supplemented by small-group tutorials. The Doctor, Patient, and Society course focuses on the scientific basis for the humanities and deals with issues of population health, health care systems, ethics, and the doctor-patient relationship.

In the second year of the curriculum, students continue with the Foundations of Medicine component. The courses in this year are Gastrointestinal, Blood and Lymphatics, Musculoskeletal and Locomotor, Endocrine and Metabolism, Integument, Brain and Behaviour, Reproduction, and Nutrition, Growth and Development. Clinical Skills II, Doctor, Patient, and Society and Family Practice Continuum also run as continuums through the second year in conjunction with the Foundations of Medicine blocks.



The third year is a clerkship and consists of 12 months of clinical studies.

The fourth year consists of senior electives and a Preparation for Medical Practice block.

Protected academic time for independent study has been set aside to allow and encourage students to take responsibility for their own progress in meeting the broad objectives for the undergraduate medical course.

The first two years of the program are given mainly at the university campuses of UBC Vancouver, UBC Okanagan, UVic, and UNBC. Clinical instruction is given in affiliated teaching hospitals and community resources throughout the province.

### ***Expenses***

Equipment, instruments, and supplies will be required throughout the four-year program. It is recommended that no purchases be made until details concerning the necessary equipment are provided at the beginning of classes by the courses concerned.

### ***Textbooks***

Information regarding textbooks will be provided before the start of each course.

### ***Courses Leading to the Doctor of Medicine***

Departmental and interdepartmental courses offered by the Faculty of Medicine are listed in detail in Courses (<http://www.calendar.ubc.ca/vancouver/courses.cfm>).

The subjects in which instruction is given in the four academic sessions leading to the Doctor of Medicine are as follows:

#### **First Year**

Three longitudinal courses: Clinical Skills; Doctor, Patient, and Society; Family Practice Continuum.

Six sequential courses:

- Orientation
- Principles of Human Biology
- Host Defences and Infection;
- Cardiovascular;
- Pulmonary;
- Fluids, Electrolytes, Renal and GU

#### **Second Year**

Three longitudinal courses: Clinical Skills; Doctor, Patient, and Society; Family Practice Continuum.

Eight sequential courses:

- Gastrointestinal



- Blood and Lymphatics
- Musculoskeletal and Locomotor
- Endocrine and Metabolism
- Integument
- Brain and Behaviour
- Reproduction
- Nutrition, Growth and Development

### Third Year

Clinical Clerkships: Anaesthesia, Dermatology, Emergency Medicine, Medicine; Obstetrics and Gynaecology; Ophthalmology; Orthopaedics, Pediatrics; Psychiatry; Surgery (including sub-specialties); Rural and Underserved Community Practice.

### Fourth Year

#### Senior Electives and a Preparation for Medical Practice course.

Information concerning elective offerings may be obtained from the Dean's Office, Undergraduate Education. In addition to formal courses offered by the Faculty of Medicine elective programs arranged by the student may be permissible in individual cases, subject to approval by the Faculty.

## Doctor of Medicine > Degree Requirements for Students Who Entered the Program in 2015/16

The following degree requirements apply to students starting the first year of the program in the 2015/16 academic year (the class expected to graduate in 2019).

The medical program extends over four academic years. All students in the distributed program will follow the same course of studies at the geographically separated campuses. All students will be based in Vancouver for the first half of first year (August – December), after which students in the Island Medical Program, Northern Medical Program, and Southern Medical Program will move to their respective campus to continue their studies.

In order to receive the M.D. degree, students must pass all assessments, all courses, and all years of the four-year MD undergraduate program. For more information about courses, please see the Courses Leading to the Doctor of Medicine section below.

During the program, protected time for independent study has been set aside to allow and encourage students to take responsibility for their own progress in meeting the competencies for the undergraduate medical program.

The first two years of the program are given mainly at the university campuses of UBC Vancouver, UBC Okanagan, University of Victoria, and University of Northern British Columbia. During third and fourth years, clinical instruction is given in affiliated teaching hospitals and community resources throughout the province.

Students must have the skills and abilities to ensure their own safety and the safety of the patients they encounter during their medical training. Please see Essential Skills and Abilities (<http://mdprogram.med.ubc.ca/files/2013/05/Essential-Skills-and-Abilities-Tec> <http://mdprogram.med.ubc.ca/files/2013/05/Essential-Skills-and-Abilities-Technical-Standards-April-2013.pdf>) for the Essential Skills and Technical standards required to complete the MD Undergraduate Program, as approved by UBC Senate. For any questions regarding these technical standards, please contact Student Affairs ([associate.dean@ubc.ca](mailto:associate.dean@ubc.ca)).



## Expenses

Equipment, instruments, and supplies will be required throughout the four-year program. Computer access via desktop/laptop is essential, and access to a mobile device is recommended. It is recommended that no purchases be made until details concerning the necessary equipment are provided at the beginning of classes by the courses concerned.

## Textbooks

Information regarding textbooks will be given before the start of each course. Approximate costs for purchasing textbooks and expendable supplies can be found using the Cost Calculator (<http://you.ubc.ca/tuition-scholarships/cost/cost-calculator/>).

## Courses Leading to the Doctor of Medicine

Departmental and interdepartmental courses offered by the Faculty of Medicine are listed in detail in Courses (<http://www.calendar.ubc.ca/vancouver/courses.cfm>).

The subjects in which instruction is given in the four years leading to the Doctor of Medicine are as follows:

### First and Second Year

The first year of the program starts in late August and ends in late May. The second year of the program starts in late August and ends in mid-April. The first two years of the program consist of seven courses:

- MEDD 410 (Transitions into Medical Education),
- MEDD 411 (Foundations of Medical Practice I),
- MEDD 412 (Foundations of Medical Practice II),
- MEDD 419 (Foundations of Scholarship and Flexible Enhanced Learning I),
- MEDD 421 (Foundations of Medical Practice III),
- MEDD 422 (Transition into Clinical Education), and
- MEDD 429 (Flexible Enhanced Learning II).

MEDD 410 spans three weeks and orients students to the medical profession and the components of the program, presents foundational biological and behavioural/psychosocial concepts, and introduces the learning activities and assessment types that students will engage in throughout the program.

MEDD 411, 412, 421, and 422 are full-time courses, each spanning 14 weeks (August – December or January – April), that offer a variety of learning activities including small group case-based learning, lectures, seminars, labs, clinical skills, family practice office visits, and self-directed learning. Each week, these learning activities will be focused on weekly clinical presentations/topics, and will address foundational program themes including:

- Clinical Medicine (e.g., infectious diseases and medical microbiology; cardiovascular; pulmonary; fluids, electrolytes, renal, and genitourinary; gastrointestinal; blood and lymphatics; musculoskeletal and locomotor; endocrine and metabolism; integument; brain and behaviour; reproduction; and nutrition, growth, and development),
- Medical Sciences (e.g., anatomy and embryology, physiology, medical microbiology and infectious disease, genetics, biochemistry and molecular biology, pathology, and histology),
- Diagnostic Sciences (e.g., diagnostic imaging, clinical laboratory techniques, and laboratory diagnosis),
- Treatment Methods (e.g., pharmacology, therapeutics, and complementary/alternative therapies; and non-pharmacological



disease management including counselling, surgery, rehabilitation, and nutrition and exercise),

- Care of Patients (e.g., communication, professionalism, medical ethics, collaboration and inter-professional care, health care system, leadership, quality improvement, patient safety, and eHealth informatics),
- Populations, Diversity, and Equity (e.g., public health, prevention, and control; geriatrics; first peoples; addictions; palliative care; global health; health advocacy), and
- Scholarship (e.g., scholarship and evidence-based medicine).

The weekly clinical presentations/topics and associated content progress in complexity from course to course. Also, as these courses progress, there is an increasing focus on preparation for clinical training. MEDD 422 (Transition into Clinical Education) continues to provide students with an enriched learning environment supporting enhanced understanding of foundational medical sciences and culminates in preparing the student to transition from more classroom-based learning to more clinical practice-based learning.

MEDD 419 (Foundations of Scholarship and Flexible Enhanced Learning I) runs longitudinally through first year with weekly half-day sessions concurrent with MEDD 411 and 412, plus a six week block at the end of MEDD 412. MEDD 429 (Flexible Enhanced Learning II) runs longitudinally through second year with weekly half-day sessions concurrent with MEDD 421 and 422, plus a three week block between MEDD 421 and winter holidays. These courses provide a foundation for scholarly inquiry and time to pursue a variety of scholarly and community service projects.

### Third Year

Third year typically starts in early June and ends in May the following year. It consists of one course, MEDD 431 (Clerkship), which includes content and clinical experiences in family medicine, internal medicine, obstetrics and gynaecology, pediatrics, psychiatry, surgery, anaesthesiology, emergency medicine, orthopaedics, and ambulatory medicine (e.g., dermatology, ophthalmology, geriatrics)

### Fourth Year

Fourth year typically starts in mid-July and ends at the end of April. It consists of eight sequential courses:

- MEDD 441, 442, 443, 444, 445, and 446 (4 week Senior Electives),
- MEDD 448 (Transition into Postgraduate Education and Practice). This 9 week course supports students to effectively transition from medical school to residency and medical practice.
- MEDD 449 (Flexible Enhanced Learning III) A four-week course to enable students to engage in scholarly and community service projects.

Information concerning elective offerings may be obtained from the Dean's Office, Undergraduate Education. In addition to formal courses offered by the Faculty of Medicine elective programs arranged by the student may be permissible in individual cases, subject to approval by the Faculty.

## Doctor of Medicine > Degree Requirements for Students Who Entered the Program in 2016/17

The following degree requirements apply to students starting the first year of the program in the 2016/17 academic year (the class expected to graduate in 2020).

The medical program extends over four academic years. All students in the distributed program will follow the same course of studies at the geographically separated campuses. All students will be based in Vancouver for the first half of first year (August – December), after which students in the Island Medical Program, Northern Medical Program, and Southern Medical Program will move to their respective campus to continue their studies.



In order to receive the M.D. degree, students must pass all assessments, all courses, and all years of the four-year MD undergraduate program. For more information about courses, please see the Courses Leading to the Doctor of Medicine section below.

During the program, protected time for independent study has been set aside to allow and encourage students to take responsibility for their own progress in meeting the competencies for the undergraduate medical program. The first two years of the program are given mainly at the university campuses of UBC Vancouver, UBC Okanagan, University of Victoria, and University of Northern British Columbia. During third and fourth years, clinical instruction is given in affiliated teaching hospitals and community resources throughout the province.

Students must have the skills and abilities to ensure their own safety and the safety of the patients they encounter during their medical training. Please see Essential Skills and Abilities (<http://mdprogram.med.ubc.ca/files/2013/05/Essential-Skills-and-Abilities-Technical-Standards-April-2013.pdf>) for the Essential Skills and Technical standards required to complete the MD Undergraduate Program, as approved by UBC Senate. For any questions regarding these technical standards, please contact Student Affairs ([associate.dean@ubc.ca](mailto:associate.dean@ubc.ca)).

### *Expenses*

Equipment, instruments, and supplies will be required throughout the four-year program. Computer access via desktop/laptop is essential, and access to a mobile device is recommended. It is recommended that no purchases be made until details concerning the necessary equipment are provided at the beginning of classes by the courses concerned.

### *Textbooks*

Information regarding textbooks will be given before the start of each course. Approximate costs for purchasing textbooks and expendable supplies can be found using the Cost Calculator (<http://you.ubc.ca/financial-planning/cost/#cost-calculator>).

### *Courses Leading to the Doctor of Medicine*

Departmental and interdepartmental courses offered by the Faculty of Medicine are listed in detail in Courses (<http://www.calendar.ubc.ca/vancouver/courses.cfm>).

The subjects in which instruction is given in the four years leading to the Doctor of Medicine are as follows:

#### **First and Second Year**

The first year of the program starts in late August and ends in late May. The second year of the program starts in late August and ends in mid-April. The first two years of the program consist of seven courses:

- MEDD 410 (Transitions into Medical Education),
- MEDD 411 (Foundations of Medical Practice I),
- MEDD 412 (Foundations of Medical Practice II),
- MEDD 419 (Foundations of Scholarship and Flexible Enhanced Learning I),
- MEDD 421 (Foundations of Medical Practice III),
- MEDD 422 (Transition into Clinical Education), and
- MEDD 429 (Flexible Enhanced Learning II).



MEDD 410 spans three weeks and orients students to the medical profession and the components of the program, presents foundational biological and behavioural/psychosocial concepts, and introduces the learning activities and assessment types that students will engage in throughout the program.

MEDD 411 and 412, are full-time courses, each spanning 14 weeks, and MEDD 421 and 422 are full-time courses, each spanning 15 weeks (August – December or January – April). All four courses offer a variety of learning activities including small group case-based learning, lectures, seminars, labs, clinical skills, family practice office visits, and self-directed learning. Each week, these learning activities will be focused on weekly clinical presentations/topics, and will address foundational program themes including:

- Clinical Medicine (e.g., infectious diseases and medical microbiology; cardiovascular; pulmonary; fluids, electrolytes, renal, and genitourinary; gastrointestinal; blood and lymphatics; musculoskeletal and locomotor; endocrine and metabolism; integument; brain and behaviour; reproduction; and nutrition, growth, and development),
- Medical Sciences (e.g., anatomy and embryology, physiology, medical microbiology and infectious disease, genetics, biochemistry and molecular biology, pathology, and histology),
- Diagnostic Sciences (e.g., diagnostic imaging, clinical laboratory techniques, and laboratory diagnosis),
- Treatment Methods (e.g., pharmacology, therapeutics, and complementary/alternative therapies; and non-pharmacological disease management including counselling, surgery, rehabilitation, and nutrition and exercise),
- Care of Patients (e.g., communication, professionalism, medical ethics, collaboration and inter-professional care, health care system, leadership, quality improvement, patient safety, and eHealth informatics),
- Populations, Diversity, and Equity (e.g., public health, prevention, and control; geriatrics; first peoples; addictions; palliative care; global health; health advocacy), and
- Scholarship (e.g., scholarship and evidence-based medicine).

The weekly clinical presentations/topics and associated content progress in complexity from course to course. Also, as these courses progress, there is an increasing focus on preparation for clinical training. MEDD 422 (Transition into Clinical Education) continues to provide students with an enriched learning environment supporting enhanced understanding of foundational medical sciences and culminates in preparing the student to transition from more classroom-based learning to more clinical practice-based learning.

MEDD 419 (Foundations of Scholarship and Flexible Enhanced Learning I) runs longitudinally through first year with weekly half-day sessions concurrent with MEDD 411 and 412, plus a six week block at the end of MEDD 412. MEDD 429 (Flexible Enhanced Learning II) runs longitudinally through second year with weekly half-day sessions concurrent with MEDD 421 and 422, plus a two week block between MEDD 421 and winter holidays and a two week block at the end of MEDD 422. These courses provide a foundation for scholarly inquiry and time to pursue a variety of scholarly and community service projects.

### Third Year

Third year typically starts in early June and ends in May the following year. It consists of one course, MEDD 431 (Clerkship), which includes content and clinical experiences in family medicine, internal medicine, obstetrics and gynaecology, pediatrics, psychiatry, surgery, anaesthesiology, emergency medicine, orthopaedics, and ambulatory medicine (e.g., dermatology, ophthalmology, geriatrics)

### Fourth Year

Fourth year starts in mid-July and ends at the end of April. It consists of eight sequential courses:

- MEDD 441, 442, 443, 444, 445, and 446 (4 week Senior Electives),
- MEDD 448 (Transition into Postgraduate Education and Practice). This 9 week course supports students to effectively transition from medical school to residency and medical practice.
- MEDD 449 (Flexible Enhanced Learning III) A four-week course to enable students to engage in scholarly and community service projects.



Information concerning elective offerings may be obtained from the Dean's Office, Undergraduate Education. In addition to formal courses offered by the Faculty of Medicine elective programs arranged by the student may be permissible in individual cases, subject to approval by the Faculty.

## Doctor of Medicine > Degree Requirements for Students Entering the Program in 2017/18 or Later

The following degree requirements apply to students starting the first year of the program in the 2017/18 academic year (the class expected to graduate in 2021) and onwards.

The medical program extends over four academic years. All students in the distributed program will follow the same course of studies at the geographically separated campuses. All students will be based in Vancouver for the first half of first year (August – December), after which students in the Island Medical Program, Northern Medical Program, and Southern Medical Program will move to their respective campus to continue their studies.

In order to receive the M.D. degree, students must pass all assessments, all courses, and all years of the four-year MD undergraduate program. For more information about courses, please see the Courses Leading to the Doctor of Medicine section below.

During the program, protected time for independent study has been set aside to allow and encourage students to take responsibility for their own progress in meeting the competencies for the undergraduate medical program.

The first two years of the program are given mainly at the university campuses of UBC Vancouver, UBC Okanagan, University of Victoria, and University of Northern British Columbia. During third and fourth years, clinical instruction is given in affiliated teaching hospitals and community resources throughout the province.

Students must have the skills and abilities to ensure their own safety and the safety of the patients they encounter during their medical training. Please see Essential Skills and Abilities (<http://mdprogram.med.ubc.ca/files/2013/05/Essential-Skills-and-Abilities-Technical-Standards-April-2013.pdf>) for the Essential Skills and Technical standards required to complete the MD Undergraduate Program, as approved by UBC Senate. For any questions regarding these technical standards, please contact Student Affairs ([associate.dean@ubc.ca](mailto:associate.dean@ubc.ca)).

### *Expenses*

Equipment, instruments, and supplies will be required throughout the four-year program. Computer access via desktop/laptop is essential, and access to a mobile device is recommended. It is recommended that no purchases be made until details concerning the necessary equipment are provided at the beginning of classes by the courses concerned.

### *Textbooks*

Information regarding textbooks will be given before the start of each course. Approximate costs for purchasing textbooks and expendable supplies can be found using the Cost Calculator (<http://you.ubc.ca/financial-planning/cost/#cost-calculator>).

### *Courses Leading to the Doctor of Medicine*

Departmental and interdepartmental courses offered by the Faculty of Medicine are listed in detail in Courses (<http://www.calendar.ubc>





<http://www.calendar.ubc.ca/vancouver/courses.cfm>).

The subjects in which instruction is given in the four years leading to the Doctor of Medicine are as follows:

### First and Second Year

The first year of the program starts in late August and ends in late May. The second year of the program starts in late August and ends in mid-April. The first two years of the program consist of six courses:

- MEDD 411 (Foundations of Medical Practice I)
- MEDD 412 (Foundations of Medical Practice II)
- MEDD 419 (Foundations of Scholarship and Flexible Enhanced Learning I)
- MEDD 421 (Foundations of Medical Practice III)
- MEDD 422 (Transition into Clinical Education), and
- MEDD 429 (Flexible Enhanced Learning II)

MEDD 411 spans 17 weeks and includes two weeks of orientation to the medical profession, during which foundational medical concepts and information about the learning activities and assessment types that students will engage in throughout the program are introduced.

MEDD 412, 421, and 422 each span 15 weeks (August – December or January – April)

All four courses offer a variety of learning activities including small group case-based learning, lectures, seminars, labs, clinical skills, family practice office visits, and self-directed learning. Each week, these learning activities will be focused on weekly clinical presentations/topics, and will address foundational program themes including:

- Clinical Medicine (e.g., infectious diseases and medical microbiology; cardiovascular; pulmonary; fluids, electrolytes, renal, and genitourinary; gastrointestinal; blood and lymphatics; musculoskeletal and locomotor; endocrine and metabolism; integument; brain and behaviour; reproduction; and nutrition, growth, and development),
- Medical Sciences (e.g., anatomy and embryology, physiology, medical microbiology and infectious disease, genetics, biochemistry and molecular biology, pathology, and histology),
- Diagnostic Sciences (e.g., diagnostic imaging, clinical laboratory techniques, and laboratory diagnosis),
- Treatment Methods (e.g., pharmacology, therapeutics, and complementary/alternative therapies; and non-pharmacological disease management including counselling, surgery, rehabilitation, and nutrition and exercise),
- Care of Patients (e.g., communication, professionalism, medical ethics, collaboration and inter-professional care, health care system, leadership, quality improvement, patient safety, and eHealth informatics),
- Populations, Diversity, and Equity (e.g., public health, prevention, and control; geriatrics; first peoples; addictions; palliative care; global health; health advocacy), and
- Scholarship (e.g., scholarship and evidence-based medicine).

The weekly clinical presentations/topics and associated content progress in complexity from course to course. Also, as these courses progress, there is an increasing focus on preparation for clinical training. MEDD 422 (Transition into Clinical Education) continues to provide students with an enriched learning environment supporting enhanced understanding of foundational medical sciences and culminates in preparing the student to transition from more classroom-based learning to more clinical practice-based learning.

MEDD 419 (Foundations of Scholarship and Flexible Enhanced Learning I) runs longitudinally through first year with weekly half-day sessions concurrent with MEDD 411 and 412, plus a six week block at the end of MEDD 412. MEDD 429 (Flexible Enhanced



Learning II) runs longitudinally through second year with weekly half-day sessions concurrent with MEDD 421 and 422, plus a two week block between MEDD 421 and winter holidays and a two week block at the end of MEDD 422. These courses provide a foundation for scholarly inquiry and time to pursue a variety of scholarly and community service projects.

### Third Year

Third year typically starts in early June and ends in May the following year. It consists of one course, MEDD 431 (Clerkship), which includes content and clinical experiences in family medicine, internal medicine, obstetrics and gynaecology, pediatrics, psychiatry, surgery, anaesthesiology, emergency medicine, orthopaedics, and ambulatory medicine (e.g., dermatology, ophthalmology, geriatrics)

### Fourth Year

Fourth year starts in mid-July and ends at the end of April. It consists of eight sequential courses:

- MEDD 441, 442, 443, 444, 445, and 446 (4 week Senior Electives).
- MEDD 448 (Transition into Postgraduate Education and Practice). This 9 week course supports students to effectively transition from medical school to residency and medical practice.
- MEDD 449 (Flexible Enhanced Learning III). A four-week course to enable students to engage in scholarly and community service projects.

Information concerning elective offerings may be obtained from the Dean's Office, Undergraduate Education. In addition to formal courses offered by the Faculty of Medicine elective programs arranged by the student may be permissible in individual cases, subject to approval by the Faculty.

## Doctor of Philosophy

Please see the [Ph.D. Program in Rehabilitation Sciences](#) and related fields.

## Doctor of Philosophy and Doctor of Medicine

The M.D./Ph.D. program is a combined program jointly offered by the Faculty of Medicine and the [Faculty of Graduate and Postdoctoral Studies](#). Its purpose is to provide selected and highly qualified students the opportunity to combine their medical school experience with intensive scientific training in pursuing a career as clinician-scientists. The program is designed such that students can receive a Doctor of Medicine and a Doctor of Philosophy after seven years of study. The program is built upon the regular Doctor of Medicine curriculum, but is further "customized" to meet the unique career goals of individual students based on their background, previous research experience, and their chosen medical field of expertise. Graduates of the M.D./Ph.D. program are trained as competent physicians as well as skilled scientists who can sustain a successful and competitive clinical investigative career

In order to be eligible for admission, students must have completed a Bachelor of Science with first-class standing (or equivalent), and have fulfilled all the requirements of acceptance into the Doctor of Medicine program, as well as the doctoral requirements of the Faculty of Graduate and Postdoctoral Studies. The Medical College Admission Test (MCAT) is required, but the Graduate Records Examination (GRE) is optional.

Applications (<http://www.grad.ubc.ca/apply/online>) to the M.D./Ph.D. program should be submitted on-line.

The applications to the M.D. Program should be sent to the Dean's Office, Faculty of Medicine.

Potential candidates must be selected by the M.D. Admissions Selection Committee prior to being accepted to the M.D./Ph.D.



program.

For further information, please visit the Program (<http://www.med.ubc.ca/mdphd>), or contact Dr. Torsten Nielsen, Program Director, 604.822.7198.

## Master of Global Surgical Care

### *Program Overview*

The Master of Global Surgical Care (MGSC) is a program within the Faculty of Medicine.

This online two-year, 30 credit specialized program is designed to prepare surgical care professionals from many disciplines to address surgical challenges and contribute to finding solutions in low resource settings globally.

The program provides a strong foundation for present and future global surgical care professionals by developing knowledge and skills in the interpretation and use of published experience and research, balanced with applied learning in low resource settings. Students will spend four to eight weeks in an underserved location globally, producing practical “on-the-ground” skills. The location of the placement is determined by the student in consultation with a program advisor.

A blended model of practicum based learning and on-line teaching methods facilitate the participation of candidates from across Canada and around the world.

### *Admission Requirements*

Candidates must meet [minimum admission requirements](#) established by the Faculty of Graduate and Postdoctoral Studies. Applicants should: (a) hold a health-care-related degree such as Doctor of Medicine (MD), Nursing (BSN), Midwifery (BMW), etc.; and (b) have been involved or specifically plan to be involved in surgical care programs in underserved regions globally, whether clinically, educationally, administratively or in research.

For complete application and admission information please see the MGSC program’s website (<http://internationalsurgery.med.ubc.ca/education-courses/graduate-certificate-in-global-surgical-care/>).

Applicants who do not meet the academic requirements stated above, but who have had other significant formal training, relevant professional experience, and/or otherwise possess demonstrable knowledge or expertise that would prepare them adequately for successful study in the graduate program, may be granted admission on the recommendation of the Director of the Branch for International Surgical Care and the approval of the Dean of Graduate and Postdoctoral Studies.

Applicants from a university outside Canada in which English is not the primary language of instruction must present evidence of English language proficiency prior to being extended an offer of admission. For more information, refer to the Faculty of Graduate and Postdoctoral Studies’ entry in the Academic Calendar regarding English Language Proficiency Requirements. Applicants who do not meet English language proficiency requirements may be granted admission on the recommendation of the Director of the Branch for International Surgical Care and the approval of the Dean of Graduate and Postdoctoral Studies.

### *Transfer Credit*

The transfer credit policy is outlined by the Faculty of Graduate and Postdoctoral Studies. For more information, refer to the Faculty of Graduate and Postdoctoral Studies’ entry in the Academic Calendar regarding [Transfer Credits](#).



## Program Requirements

Students will be required to complete 30 credits of SURG and SPPH courses which include a 6 credit Global Surgical Care Field Practicum.

- SURG 510 (3)
- SURG 512 (3)
- SURG 514 (3)
- SURG 516 (3)
- SPPH 517 (3)
- SURG 518 (3)
- SURG 542 (3)
- SURG 560 (6)
- Electives (3) Approved by the Program Director

## Canadian Low Resource Settings Stream

The MGSC Canadian Low Resource Settings Stream is an interdisciplinary specialized stream. Students can choose to complete the MGSC with an intense focus on the unique issues affecting surgical care in rural and remote low resource settings in Canada.

In order to complete the MGSC Canadian Low Resource Settings Stream, students must declare their interest in completing the stream to the Program Director upon entry into the program and must complete the following requirements:

- SURG 560(6) – Global Surgical Care Field Practicum must be completed in Canada
- SURG 542(3) – Topic selected for Directed Study in Global Surgical Care must be closely connected to Canada and approved by the Program Director as an appropriate topic for the Canadian Low Resource Settings Stream

Satisfactory progress as defined by the Faculty of Graduate and Postdoctoral Studies for Master's students must be maintained. Students must complete their requirements within 5 years of starting the program. For more information, refer to the Faculty of Graduate and Postdoctoral Studies' entry in the Academic Calendar regarding [Academic Progress](#).

## Master of Occupational Therapy

Please see the [M.O.T. Program in Occupational Therapy](#).

On completion of all academic courses and clinical fieldwork requirements, graduates in Occupational Therapy are eligible to write the national Certification Examination offered by the Canadian Association of Occupational Therapists (CAOT).

The Occupational Therapy program at UBC is accredited by the CAOT, and meets or exceeds the academic accreditation standards of the World Federation of Occupational Therapists (WFOT). Graduates are eligible to apply for membership in CAOT and WFOT.

UBC graduates who successfully complete the examination are eligible to apply for registration in the College of Occupational Therapists of British Columbia (COTBC).

Registration with the College of Occupational Therapists of British Columbia (COTBC) is required to practice in BC.



## Master of Physical Therapy

Please see the [M.P.T. Program in Physical Therapy](#).

On completion of all academic courses and clinical fieldwork, graduates in Physical Therapy are required to write the Physiotherapy Competency Examination (PCE, formerly PNE). Successful completion of the PCE is required for registration with the College of Physical Therapists of BC. Registration is required in order to practice physiotherapy in BC.

The Physical Therapy program at UBC is accredited by an external organization, and students must graduate from an accredited program in order to write the PCE.

Upon receipt of a license to practice, graduates in Physical Therapy are eligible for membership in the Canadian Physiotherapy Association (CPA) and its provincial branch, the Physiotherapy Association of British Columbia (PABC).

## Master of Physical Therapy and Doctor of Philosophy in Rehabilitation Sciences

Please see the [Master of Physical Therapy \(M.P.T.\) and Doctor of Philosophy \(Ph.D.\) in Rehabilitation Sciences Dual Degrees program option](#)

## Master of Rehabilitation Science

Please see the [M.R.Sc. Program in Rehabilitation Sciences](#).

## Master of Science

Please see:

- [M.Sc. Program in Rehabilitation Sciences](#)
- [M.Sc. Program in Surgery](#)

## Graduate Certificate in Global Surgical Care

This is an online program that aims to prepare surgical care professionals from many disciplines to address surgical challenges and contribute to finding solutions in low resource settings globally.

### *Admission Requirements*

Candidates must meet [minimum admission requirements](#) established by the Faculty of Graduate and Post-Doctoral Studies. Applicants should: (a) hold a health-care-related degree such as Doctor of Medicine (MD), Nursing (BSN), Midwifery (BMW) etc.; and (b) have been involved or specifically plan to be involved in surgical care programs in underserved regions globally, whether clinically, educationally, administratively or in research.

For complete application and admission information please see the GCGSC program's website (<http://internationalsurgery.med.ubc.ca/education-courses/graduate-certificate-in-global-surgical-care/>).



Applicants who do not meet the academic requirements stated above, but who have had other significant formal training, relevant professional experience, and/or otherwise possess demonstrable knowledge or expertise that would prepare them adequately for successful study in the graduate program, may be granted admission on the recommendation of the Director of the Branch for International Surgical Care and the approval of the Dean of Graduate and Postdoctoral Studies.

Applicants from a university outside Canada in which English is not the primary language of instruction must present evidence of English language proficiency prior to being extended an offer of admission. For more information, refer to the Faculty of Graduate and Postdoctoral Studies' entry in the Academic Calendar regarding English Language Proficiency Requirements. Applicants who do not meet English language proficiency requirements may be granted admission on the recommendation of the Director of the Branch for International Surgical Care and the approval of the Dean of Graduate and Postdoctoral Studies.

### *Certificate Requirements*

All students must complete the following four courses (12 credits): SURG 510 (3); SURG 512 (3); SURG 514 (3); SURG 516 (3). Satisfactory progress as defined by the Faculty of Graduate and Postdoctoral Studies for Master's students must be maintained. Students must complete their requirements within 5 years of starting the program. For more information, refer to the Faculty of Graduate and Postdoctoral Studies' entry in the Academic Calendar regarding [Academic Progress](#).

## **Graduate Certificate in Orthopaedic Manipulative Physical Therapy**

### *Program Overview*

The UBC Graduate Certificate in Orthopaedic Manipulative Physical Therapy (GCOMPT) is a 21-credit specialized program for experienced physical therapists who aim to advance their evidence-based knowledge and skills in orthopaedic manual and manipulative physical therapy practice. The certificate is intended to be completed over a 2-year period of part-time study.

By the end of this program, students will be able to provide advanced orthopaedic manipulative physiotherapy assessment and treatment that will enhance their provision of effective, evidence-based treatment of musculoskeletal conditions.

The 21 credits required to complete the Graduate Certificate in Orthopaedic Manipulative Physical Therapy program consist of:

PHTH 580 (9); PHTH 581 (3); RHSC 501 (3); RHSC 587 (3); and RHSC 589 (3).

These courses will typically be offered over a 2-year period from September to August.

### *Student Admission Criteria*

Candidates must hold an entry-level degree in physical therapy with a minimum B+ average (76%) in senior level courses.

Candidates must also have a minimum of one-year of recent clinical experience in orthopaedics.

Candidates must have successfully completed the Level II Upper and Lower courses and examinations in the Canadian Physiotherapy Orthopaedic Division Advanced Orthopaedic Manual and Manipulative Physiotherapy program, or the equivalent.

Candidates must have completed 10 hours of direct mentorship with a CAMPT-accredited physical therapist and 20 hours of indirect study.



Candidates must be physical therapists registered in British Columbia. Malpractice insurance is mandatory.

Applicants who do not hold any degrees in which English was the primary language of instruction must present evidence of competence to pursue studies in the English language prior to being extended an offer of admission. Other applicants may be asked to demonstrate English proficiency, even if they hold a degree in which the primary language of instruction was English.

Acceptable English language proficiency tests for applicants to the GCOMPT program are:

- TOEFL (Test of English as a Foreign Language): a minimum score of 627 (paper version); 263 (computer version); 108 (Internet version).
- MELAB (Michigan English Language Assessment Battery): a minimum overall score of 88.
- IELTS (International English Language Testing Service): a minimum overall band score of 7.5 is required with a minimum score of 7.0 in each component of the academic (NOT general) IELTS test.
- CAEL (Canadian Academic English Language Assessment): a minimum overall score of 80.
- CELPIP (Canadian English Language Proficiency Index Program): a minimum score of 5 for each component of the academic (NOT general) CELPIP test.
- PTE (Pearson Test of English): a minimum overall score of 76 (CEF level 1) on the academic (NOT general) PTE test.

Note: these tests must have been taken within two (2) years of starting the program. For example, if you plan to start the program in September 2014, you must have test results that are dated no earlier than September 1, 2012.

Students who apply for, and are denied, admission into this program may submit a written appeal to the Head of the Department of Physical Therapy.

### ***Student Code of Conduct***

Students enrolled in the program must comply with UBC's policy on student conduct (<http://students.ubc.ca/campus/student-code-conduct>) as well as adhering to the practice standards mandated by the College of Physical Therapists of BC (<http://www.cptbc.org>). Failure to comply with these standards may result in a student being required to withdraw from the program.

### ***Mentorship Requirement***

Students should familiarize themselves with the course outlines of PHTH 580 and PHTH 581 prior to enrolment (these will be posted on the Department website) and be aware of the course requirements, including the clinical assignment in PHTH 580 which requires students to identify and undertake formal mentorship with an FCAMPT-certified physical therapist. Students will be responsible for all expenses related to this mentorship, and these expenses are not included in the program or course fees.

## **Graduate Certificate in Rehabilitation**

This interdisciplinary, online Graduate Certificate in Rehabilitation ([http://www.mrsc.ubc.ca/site\\_page.asp?pageid=3](http://www.mrsc.ubc.ca/site_page.asp?pageid=3)) is targeted to occupational therapists, physical therapists, and other health professionals who want to update their knowledge and skills to better meet the demands of the current health care environment. The program provides useable, evidence-based skills for the rehabilitation workplace. Each course draws on the research and rehabilitation practice experience of those currently shaping the field

The five courses in the program (RHSC 501, 503, 505, 507, 509) enable participants to develop essential knowledge and skills



required for best practice in rehabilitation. Learners who successfully complete the five courses will receive the Certificate.

### Admission

• **Academic Requirements:**

- Completion of a recognized baccalaureate degree at an accredited academic institution.
- Recommended: completion of an introductory course in statistics.
- Academic standing of a minimum 76% (B+) average in senior-level courses (300- and 400-level)
- English competency: Applicants from a university outside Canada in which English is not the primary language of instruction must present evidence of competency to pursue studies in the English language prior to being extended an offer of admission.

**Professional requirements:**

To achieve 'professional' eligibility, an applicant must be:

- an occupational therapist, physical therapist, rehabilitation practitioner, or professional in a related health and human services discipline, and
- eligible to practice in their discipline.

### Contact Information

Rehabilitation Sciences (GCR)  
T325-2211 Wesbrook Mall  
Vancouver, BC, Canada V6T 2B5

**GCR (Online program)**

Tel: 604.827.5374

Email: [info@mrsc.ubc.ca](mailto:info@mrsc.ubc.ca)

Web: [www.mrsc.ubc.ca](http://www.mrsc.ubc.ca) (<http://www.mrsc.ubc.ca>)

## Graduate Program in Cell and Developmental Biology

J. Church, Program Director

The Graduate Program in Cell and Developmental Biology (<http://www.cell.ubc.ca>) offers opportunities for advanced study and research in cell and developmental biology through a coordinated program of studies leading to Master of Science and Doctor of Philosophy degrees in the Faculty of Graduate and Postdoctoral Studies. The Program is flexible and is intended to accommodate the diverse backgrounds of students and the broad nature of research in cell and developmental biology.

In addition to coursework, students are expected to engage in original and significant research from the start of their studies. A student's overall training program is decided upon by the student, their research supervisor, and their Advisory Committee.

Acceptance into the Program is dependent upon meeting the general entrance requirements of the Faculty of Graduate and Postdoctoral Studies, being accepted by the Cell and Developmental Biology Graduate Program Advisory Committee, and being accepted by a faculty member who is willing to act as the student's supervisor.

For more information, see also [Cell and Developmental Biology](#).





## Graduate Program in Neuroscience

Liisa Galea, Program Director

The Graduate Program in Neuroscience (<http://www.neuroscience.ubc.ca/index.html>) is a multidisciplinary program which offers a coordinated program of graduate studies leading to M.Sc. and Ph.D. degrees in neuroscience. The objectives of the Program are to educate graduate students as neuroscientists with intensive experience in at least one area of research, and to ensure that students in the Program develop a broadly based knowledge of the neurosciences.

For more information, see also [Neuroscience](#).

## Interdisciplinary Oncology Program

A. Brooks-Wilson, Program Director

The Interdisciplinary Oncology Program (<http://www.iop.ca/index.asp>) (IOP) is in its fifth full academic year. Awareness of the Interdisciplinary Oncology Program has been growing among research supervisors, and the Program is increasingly considered an excellent option for scientists who focus on cancer research but hold appointments in various departments throughout UBC.

For more information, see also [Interdisciplinary Oncology](#).

## Postgraduate Medical Education (M.D.)

### Postgraduate Medical Education (M.D.) > Introduction

The Faculty of Medicine is prepared to assist and advise students in applying for postgraduate education positions. The Office of the Associate Dean, Undergraduate Education, should be consulted early in the final year for information on the application process.

Placement or assignment of postgraduate positions is not a function of the Faculty of Medicine. The Canadian Resident Matching Service in Ottawa performs this service for all applicants to PGY-1 positions.

### *Canadian Resident Matching Service*

All accredited postgraduate training in Canada is university integrated. Students do not apply to hospital programs but rather to university programs.

The Canadian Resident Matching Service (CaRMS) is a non-profit corporation that works in close co-operation with the Association of Canadian Medical Colleges. Since its establishment in 1970 it has matched every graduating class. CaRMS uses a computer program that quickly computes the traditional selection process for postgraduate training by matching students and programs with their highest possible choices. It guarantees the process to be fair and unbiased.

Visit CaRMS (<http://www.carms.ca>) for a brochure and information regarding participation in the matching program.

### *Resident Education*



Specialty training at the University of British Columbia is now offered in one of two streams, namely Family Medicine or a Royal College specialty program. Recruitment is now directly from medical school to these programs. All training must be taken in institutions approved by the Royal College of Physicians and Surgeons of Canada or the College of Family Physicians of Canada. All programs are totally integrated and directed by the Faculty of Medicine. All residents are appointed by the British Columbia Interns and Residents Paying Agency and the University of British Columbia. All residents are required to register as postgraduate residents of the University in order to receive accreditation for their training. Postgraduate courses are offered by individual departments or divisions of the Faculty of Medicine in 78 medical, surgical, and laboratory specialties. These courses conform to the specialty training requirements of the Royal College of Physicians and Surgeons of Canada and the College of Family Physicians of Canada and are numbered 700 or higher.

Applications for resident staff appointments should be made to the Program Director of the appropriate division or department of the University. Further information can be found at Postgraduate Programs (<http://www.med.ubc.ca/postgrad>).

### *Division of Continuing Medical Education*

A Division of Continuing Medical Education has been established within the Dean's Office. Its purposes are to initiate and support programs in continuing medical education for physicians in practice, to initiate and support health sciences inter-professional programs of continuing education, to initiate and support efforts designed to define needs in continuing medical education, to initiate and support programs of evaluation in continuing medical education, to initiate and support experiments in new methods of learning in undergraduate and continuing medical education, and to improve methods of information dispersal in continuing medical education leading to improved patient care.

### *Postgraduate (Residency) Training Programs*

Postgraduate courses are offered by individual departments or divisions of the Faculty of Medicine. Graduates of International Medical Schools must be a Canadian Citizen or Landed Immigrant to apply for residency training in the province of British Columbia. These courses satisfy the specialty training requirements of the Royal College of Physicians and Surgeons of Canada and the College of Family Physicians of Canada and are approved as a prerequisite for the examinations in each specialty. All residents must register as postgraduate residents of the University.

The Royal College of Physicians and Surgeons of Canada requires a minimum of four to six years of specialty training dependent on the individual specialty. A broad-based clinical PGY1 year is a mandatory component of many specialty programs but is not a requirement for entrance into such programs as pediatrics, internal medicine and the primary surgical specialties. UBC is committed to community-based, integrated, Family Medicine and Royal College specialist training. Candidates must expect to perform a significant amount of their training in a rural setting. A number of local, regional, and more remote smaller community hospitals have been successfully integrated into such programs as family medicine, pediatrics, psychiatry, obstetrics and gynecology, ophthalmology, and general surgery. Ongoing assessments are made through each of the training years and, on satisfactory completion of the program, candidates may apply to sit the certification examination of the Royal College of Physicians and Surgeons of Canada.

Candidates are eligible to sit the certification examinations of the College of Family Physicians of Canada upon completion of the two-year Family Practice program.

Supervision of each training program is the responsibility of the University department or division concerned. Selection of candidates for each program is at the discretion of the resident training program of each department to whom application should be made.

The training programs run throughout the calendar year, commencing July 1. A variety of service rounds, conferences and seminars, small group tutorials, and divisional sessions having a bearing on patient care, but within which a teaching component is clearly defined, are offered.



For application information and pre-requisites, please visit CaRMS (<http://www.carms.ca>).

## Postgraduate Medical Education (M.D.) > Anesthesia

A five year specialist training program in anesthesia, recognized and fully accredited by the Royal College of Physicians and Surgeons of Canada (RCPSC). The Residency Training Program also administers a 12-month curriculum in Family Practice Anesthesia (FPA).

Training occurs at hospital sites in Vancouver and throughout British Columbia. The goal is to achieve a balance of general training, subspecialty training, tertiary care, and community care experiences. There are high expectations of residents but positive support is provided so that residents may achieve their full potential.

The goal of the program is to graduate excellent, well-rounded physicians who, as Medical Experts, possess the specialized knowledge and skills required in modern anesthetic practice, including perioperative care, acute and chronic pain management, critical care, and subspecialty anesthesia. Teaching and evaluation also encompass the other CanMEDS competencies: Communicator, Collaborator, Manager, Health Care Advocate, Scholar, and Professional.

Teaching takes place primarily in the operating room where residents work one-on-one with faculty Anesthesiologists. Additional learning opportunities include off-service rotations, academic day sessions, the Visiting Professor Program, simulator sessions, Journal Club, events sponsored by the Post-Graduate Medical Education (PGME) Office, various courses (for example ATLS, ACLS, PALS, and NRP), libraries, research days, formal rounds, conferences and formative oral and written examinations. Residents are encouraged to develop lifelong learning habits during the five year program.

Further information about the Department of Anesthesiology, Pharmacology and Therapeutics Anesthesia Residency Program is available on the department website ([http://www.apr.ubc.ca/anesthesiology/Residency\\_Program](http://www.apr.ubc.ca/anesthesiology/Residency_Program)).

## Postgraduate Medical Education (M.D.) > Community Medicine

Postgraduate training in Community Medicine consists of five years in an accredited community medicine training program. One year consists of an academic year in the School of Population and Public Health, where the resident becomes familiar with the sciences basic to Community Medicine, such as epidemiology, biostatistics, community health, and occupational and environmental hygiene. The resident may use this year to complete a Master of Health Sciences degree or as partial fulfillment of a Master of Public Health degree. Most residents spend years two and three of the program in clinical training in family medicine, although the option for completing one year of basic clinical training is also available. Years four and five consist of increasing responsibility in the areas of public health practice, clinical epidemiology, occupational and environmental health, First Nations and Inuit health, basic research, or health planning. Research is encouraged as a component of the program. Rotations are conducted in public health agencies of regional health authorities, the BC Ministry of Health, or with agencies of the Government of Canada. Academic half days are held each Friday on campus. Resident attendance at the academic half day is mandatory. A minimum of nine months of elective rotations are tailored to the resident's specific interests.

The program is part of the matching process, nevertheless applications from practitioners are encouraged.

## Postgraduate Medical Education (M.D.) > Dermatology and Skin Science

The Department of Dermatology and Skin Science offers a five-year training program fully accredited by the Royal College of Physicians and Surgeons of Canada. The program is based at a variety of teaching hospitals and clinics in BC, where residents receive training in both inpatient and outpatient dermatology. Residents rotate through subspecialty clinics in the areas of cutaneous oncology, photo-medicine (lasers & photo-medicine), dermatologic surgery, wound healing, immuno-dermatology, connective tissue



disorders, paediatric dermatology, contact dermatitis, and urgent access clinics.

Under staff supervision, clinical responsibilities gradually increase through the 5 year period of training. The academic half-day curriculum incorporates morphology conferences, reviews of standard dermatology textbooks, interactive dermatopathology sessions, journal clubs, staff lectures, and formal patient rounds.

After two years of general rotations, emphasis during the core three-year residency program is placed on excellence in clinical dermatology and the relevant basic science. Clinical and basic science research are an integral part of the training. Elective time for research, community, national and international electives are available for senior residents.

The department also offers clinical fellowships in Mohs micrographic surgery, laser medicine/photobiology, and immunodermatology.

Graduate programs leading to an M.Sc. or Ph.D. are also offered in conjunction with the Clinical Investigator Program (CIP) and Experimental Medicine Program of the Department of Medicine. Postdoctoral fellowships are also available within the department's research laboratories.

## Postgraduate Medical Education (M.D.) > Family Practice

The Family Practice Residency is a two-year program in which the resident is given progressively increasing responsibility in patient care and management. Within the Family Practice Units and in community practices, residents are involved directly with ambulatory patients to whom they relate as family physicians and provide primary care on an episodic, continuing, and preventative basis under the supervision of clinical faculty.

In addition, residents receive training in various hospitals in medicine, surgery, pediatrics, obstetrics and gynaecology, emergency, psychiatry, geriatrics, and musculoskeletal medicine. Formal rounds, seminars, tutorials, daily chart rounds, and journal clubs round out the residents' training in areas particularly pertinent to Family Practice.

Training occurs at the following principal sites: Vancouver Fraser, St. Paul's, Victoria, Chilliwack, Prince George, Aboriginal (Victoria), Nanaimo, Abbotsford, Surrey, Rural (Okanagan-based and Prince George-based rural training), and IMG sites (Vancouver, Rural Fraser and Rural Vancouver Island). In the past few years, we have developed more regional sites in Coastal (North Shore) and Kamloops, as well as rural training sites in Terrace, Fort St. John, Strathcona (Comox and Campbell River), Kootenay Boundary (Trail) and Okanagan South (Penticton).

An additional one-year training program of enhanced vocational skills is offered in emergency medicine, palliative medicine, care of elderly, and anesthesia. Shorter training periods are offered in maternal health, psychiatry, addiction medicine, women's medicine, global health, surgical skills, and other areas of interest to practicing physicians. The department also offers a two-year, part-time clinician scholar program designed to enhance the research capacity of marginalized, rural, and/or remote populations and communities.

## Postgraduate Medical Education (M.D.) > Internal Medicine

The training program includes ward work and case conferences on general medical and sub-specialty ward services supervised by members of the Faculty. The residents are given progressive responsibility for patient care on medical wards. Investigation and management of disease in ambulatory patients is provided under the direction of faculty members in the General Internal Medicine and medical specialties.

The Department of Medicine utilizes the following facilities: Vancouver General Hospital, UBC Hospital, St. Paul's Hospital, BC Cancer Agency, G. F. Strong Rehabilitation Centre, and the Mary Pack Arthritis Centre. The distributed expansion sites include



Victoria, Kelowna, and Prince George. Several Community Care Medicine electives are offered at a variety of non-tertiary care centres throughout British Columbia, both inside and outside of the Lower Mainland.

In the Department of Medicine and its sub-specialties, courses will be given as indicated in Courses (<http://www.calendar.ubc.ca/vancouver/courses.cfm>). At present the following have training programs in addition to the courses listed: Cardiology, Critical Care Medicine, Endocrinology, Gastroenterology, General Internal Medicine, Geriatric Medicine, Haematology, Infectious Disease, Medical Oncology, Nephrology, Neurology, Physical Medicine and Rehabilitation Medicine, Respiratory Medicine, and Rheumatology.

The objectives of this program are to provide up to four years training in medicine for graduate physicians interested in a career in medicine in a community hospital or in an academic centre.

The core training program will consist of graduated experience in the clinical teaching units at Vancouver General Hospital, St. Paul's Hospital, Royal Columbian Hospital, Royal Jubilee Hospital, and Prince George Regional Hospital. Rotations are offered in all of the subspecialty training programs.

## Postgraduate Medical Education (M.D.) > Medical Genetics

The Department of Medical Genetics (<http://www.medgen.ubc.ca>) offers a fully integrated five-year program leading to certification and fellowship in the Royal College of Physicians and Surgeons of Canada in the specialty of Medical Genetics. This program integrates basic and clinical genetics. Residents complete course work through the Medical Genetics Graduate Program (<http://www.calendar.ubc.ca/vancouver/courses.cfm?page=name&code=MED5>).

Core clinical experience includes rotations in Pediatrics, Internal Medicine, and Obstetrics and Gynaecology. There are laboratory rotations in molecular genetics, cytogenetics, embryopathology and biochemical genetics and includes a scholarly research project (clinical or laboratory). Core and advanced training in clinical genetics in the Provincial Medical Genetics Program involves exposure to a wide variety of prenatal, pediatric, and adult patients referred from throughout the province.

The hospitals and laboratories affiliated with the program include Children's and Women's Health Centre of British Columbia, Vancouver General Hospital and Health Sciences Centre (12th and Oak and UBC Pavilions), St. Paul's Hospital, and the BC Cancer Agency.

For more information, see Medical Genetics Residency Training Program (<http://medgen.med.ubc.ca/clinical-genetics/residency-training/>), or contact Courtnae Cameron ([ubcgctp@cw.bc.ca](mailto:ubcgctp@cw.bc.ca)), 604.875.3486.

## Postgraduate Medical Education (M.D.) > Medical Microbiology

The Division of Medical Microbiology offers a five-year training program accredited by the Royal College of Physicians and Surgeons of Canada. Emphasis is placed on the appropriate delivery of diagnostic tests, infection prevention and control, antimicrobial stewardship and clinical consultations in both inpatient and outpatient settings, on the investigation, diagnosis, treatment, and prevention of infectious diseases. The five-year program is comprised of a basic clinical year, two core years of medical microbiology, one year in an elective program approved by the program director, and one year of approved clinical training in infectious diseases. The residency is one of five streams in the Department of Pathology and Laboratory Medicine (<http://www.pathology.ubc.ca>) and offers opportunities for interactions in the sub-disciplines and specialties within anatomic, general, and neuropathology, and in medical biochemistry.

## Postgraduate Medical Education (M.D.) > Obstetrics and Gynaecology



A five year specialist training program in Obstetrics and Gynaecology (<http://obgyn.ubc.ca/education/residency/>), recognized and fully accredited by the Royal College of Physicians and Surgeons of Canada (RCPSC).

Training occurs at hospital sites in Vancouver and throughout British Columbia. The goal is to achieve a balance of general training, subspecialty training, tertiary care, and community care experiences. There are high expectations of residents but positive support is provided so that residents may achieve their full potential.

The goal of the program is to graduate excellent, well-rounded physicians who, as medical experts, possess the specialized knowledge and skills required in modern practice, including general and complex obstetrical care, management of gynecologic conditions and surgery. Residents become adept at managing infertility and oncology cases as well. Teaching and evaluation also encompass the other CanMEDS competencies: Communicator, Collaborator, Manager, Health Care Advocate, Scholar, and Professional.

Teaching takes place in the Labour and Delivery units, operating room as well as outpatient clinics. The residents are supervised on a one on one basis by faculty. Additional learning opportunities include academic day sessions, simulation sessions, Journal Club, events sponsored by the Postgraduate Medical Education (PGME) Office, various courses (for example ATLS, ACLS, NRP and FCCS). There is an annual Academic day which gives the residents an opportunity to present research that they have been working on. Twice a week there are formal rounds that are videoconferenced throughout the province. The DA Boyes Society meeting also takes place yearly giving the residents a chance to engage in and learn from experts in the province and the world. There are formative oral and written examinations administered periodically throughout the year. Residents are encouraged to develop lifelong learning habits during the five year program.

## Postgraduate Medical Education (M.D.) > Ophthalmology and Visual Sciences

The Department of Ophthalmology and Visual Sciences offers practical experience in examination, investigation and management of patients in the neuro-ophthalmology, retina, cornea, glaucoma, refraction and contact lens, oculo-plastics, genetic and low vision clinics under supervision in addition to general ophthalmology and pediatric ocular motility clinics throughout the week. Instruction and assistance is given in the practical performance of major and minor ophthalmic surgical procedures. The management of patients with emphasis on solving diagnostic problems and performance of medical and surgical therapy is undertaken on both an in-patient and out-patient basis with follow-up clinics.

## Postgraduate Medical Education (M.D.) > Orthopaedics

The Department of Orthopaedics offers a fully integrated five-year program leading to Certification by, and Fellowship of, the Royal College of Surgeons of Canada in the specialty of Orthopaedics. The program includes core experience in the principles of surgery (comprehensive, plastic, intensive care, vascular and orthopaedics), as well as core and advanced training in the areas of comprehensive orthopaedics, adult reconstruction, musculoskeletal oncology, trauma, sports related and arthroscopy, hand and microvascular, spine and pediatric orthopaedics (including trauma). Additionally, protected time in basic research (such as biology or bioengineering) is encouraged.

The hospitals affiliated with the program include Vancouver General Hospital, UBC Hospital, St. Paul's Hospital, BC Children's Hospital, Burnaby General Hospital, Royal Columbian Hospital, Eagle Ridge Hospital, and University Hospital of Northern BC.

## Postgraduate Medical Education (M.D.) > Pathology

Royal College of Specialists of Canada approved training is available in all sub-specialties of laboratory medicine. These include anatomical pathology, general pathology, hematopathology, medical microbiology, medical biochemistry, neuropathology and transfusion medicine. The individual programs are designed to fulfill the training requirements of the respective Royal College programs. Residents rotate through the major university teaching hospitals and are expected to accept increasing responsibilities as



they progress. Weekly educational seminars within and between departments include active resident participation. Reviews of interesting cases are also a standard experience. Opportunities are available to gain skills and understanding on biotechnological and molecular applications of diagnoses, bioethics as pertinent to laboratory medicine, and laboratory information management and administration. Residents' progress through the training program is assessed regularly.

## Postgraduate Medical Education (M.D.) > Pediatrics

The 4 year Pediatrics Postgraduate program is distributed to two partner sites and affiliated teaching hospitals in the Lower Mainland and throughout the province.

The training program includes ward work and case conferences on general medical and sub-specialty ward services supervised by members of the Faculty. The residents are given progressive responsibility for patient care on medical wards. Investigation and management of disease in ambulatory patients is provided under the direction of faculty members in the General Pediatric Medicine and medical specialties. There is significant exposure to community and Social Pediatrics through rotations in community settings including outside of the Lower Mainland. There is also significant opportunity for experience in Global Health.

In the Department of Pediatrics there is ample subspecialty exposure. At present, the following have subspecialty training programs: Adolescent Health, Allergy/Immunology, Cardiology, Critical Care, Dermatology, Developmental Pediatrics, Emergency, Endocrinology, Gastroenterology, General Pediatrics, Haematology / Oncology, Infectious Disease, Neonatology, Nephrology, Neurology, Respiriology, and Rheumatology. There are opportunities for research and affiliation with BC Children's Hospital Research Institute.

The program's objective is to provide graduate physicians, interested in a career in a community hospital or an academic centre, with three core years training in Pediatrics. The core training program will consist of graduated experience in the clinical teaching units at the BC Children's Hospital. Rotations are offered in all of the sub-specialty training programs. The fourth year may be a General Pediatric year, preparing trainees for community pediatrics practice, or the first of two or three years of subspecialty training in one of the above programs.

## Postgraduate Medical Education (M.D.) > Psychiatry

The Royal College of Physicians and Surgeons of Canada sets the training objectives and standards for all Canadian Postgraduate Training Programs and the Department of Psychiatry at UBC is accredited by the Royal College with external review in 2016 until the next accreditation visit in 2019.

Currently there are 114 residents in the five-year program with 22 PGY1 residents being enrolled each year. The academic year runs from July 1 to June 30. Training to be a general psychiatrist takes five years. In 2012 a further year of training in the subspecialties of Child, Geriatric, and Forensic Psychiatry was made available.

Clinical training takes place on hospital in-patient wards, at out-patient units, at community mental health centres and subspecialty clinics. Mandatory rotations include: general hospital in-patient/OPD, child, chronic care, addiction, consultation-liaison, geriatric, and community psychiatry. There is provision for 12 months of elective time.

For those residents with expertise and interest in research, a specially tailored training track has been developed that maximizes research time within the Royal College's training guidelines. Many research opportunities exist for all trainees outside of this track with projects being developed by the third year of training and completed during elective time in the last year of training. One day per week is dedicated to academic seminars.

The philosophy of our program is to train psychiatrists in the broad aspects of the bio-psycho-social model of medicine and psychiatry and to prepare those who are interested for further subspecialty training or Fellowships.



## Postgraduate Medical Education (M.D.) > Radiation Oncology and Developmental Radiotherapeutics

### *PGY-1*

The purpose of PGY-1 is to introduce the trainee to independent decision-making in clinical practice. The development of a mature physician-patient relationship, and acquired competence in primary technical skills across a broad range of medical practice, is required.

The rotations included in this year are radiation oncology (8 weeks), internal medicine (8 weeks), surgery (8 weeks), gyne-oncology (4 weeks), pediatrics (4 weeks), family medicine (4 weeks), radiology (4 weeks), palliative care (4 weeks), and elective (8 weeks).

PGY-1 year is not a rotating internship; it contains rotations more geared toward oncology and more likely to be beneficial for future oncologists. At the end of the year, residents will not be eligible for a general license in BC.

### *PGY2-5*

PGY-2. Includes six months of approved resident training in internal medicine (that includes three months of training in Medical Oncology).

PGY-4. During the training in Radiation Oncology, an additional six months may be approved by the Program Director for training in clinical, basic science or research training relevant to the objectives of the specialty, and acceptable to the Director of the Residency program and to the Royal College.

PGY2-5. Three years of radiation oncology (36 months): BC Cancer Agency, Vancouver Clinic, and one to two months mandatory rotations in one of other 3 centers in Cancer Centers in BC (FVCC-Surrey (two months), CCSI-Kelowna (minimum one month) or VICC-Victoria (minimum one month)).

- site-specific rotations (eight weeks long: head and neck, gynecological oncology, lymphoma, breast, etc.)
- weekly academic half day: didactic instruction in radiobiology, pathology, physics, radiology, principles and practice of oncology and radiation oncology treatment planning
- annual formal practice radiotherapy planning examinations
- support for annual attendance at Northwestern Radiobiology Course (Seattle, Edmonton, Vancouver)
- presentation at national and international meetings encouraged
- mid-rotation feedback sessions and end of rotation oral assessments
- fall and spring exams for senior residents

### *Core Academic Activities*

Clinical Oncology

- ACU
- Bedside and individual tutorials

Treatment Planning (occurs in the contexts of):

- individual rotations
- treatment planning drills





#### Radiobiology

- introductory didactic lecture series
- tutorials
- seminar series
- Northwestern Radiobiology Course (Seattle, Edmonton, Vancouver)

#### Physics

- physics course with weekly tutorials for PGY2 and PGY3
- end of the course written and oral exams
- seminars/problem-based series

#### Pathology

- case-based teaching with clinical and pathological input

#### Radiology

- introduction to normal and abnormal radiological anatomy
- academic sessions
- weekly seminars

#### Other Programs

- Facilitate General Surgery, Respiriology, Otolaryngology, Medical Oncology, Pediatric/Hematology/Oncology/OBGyn and other programs.

## Research

Residents' research is a small but important and integral part in the Residency Training in Radiation Oncology. While the residents in PGY2-4 will be encouraged and expected to carry out research projects, these activities must be balanced against many other academic and educational activities during their residency training.

Purpose of resident research:

- To learn research methodology, importance of correct research question, choice and application of proper statistical methods, systematic approach to literature review.
- To develop the ability to successfully present conducted research work in oral and written form.
- To fulfill some of the Can Meds requirements in the overall program education:
  1. Collaboration: residents are expected to independently build a relationship with other professionals (scientists, radiation therapists, physicists, other physicians and colleagues) in order to complete their work.
  2. Management: residents will learn how to manage their time, staff and resources needed to complete the projects.
  3. Scholasticism: the research activities would help develop residents' scholarly abilities and foster professional curiosity
  4. Communication: clear communication of research findings (in written and oral form) will enhance residents communication abilities.

Residents are expected to produce a total of three projects during their residency training (PGY2-PGY4). The projects are expected to be presented at the Annual Residents Day in May/June of each year. Residents may be encouraged to send their research to other meetings. This should be at the discretion of the Program Director and the Residents Research Facilitator.



Every year we have a Residents' Day Award, where all the residents present their annual research projects. Every second year, there is a grant writing competition (Peter Poon Award). Residents are encouraged to present their research projects at national and international meetings.

Residents in good academic standing, with Program Director approval, may seek Radiation Oncology electives in other centres in Canada, the US or overseas. A six month block in research is available as well, and is again at the discretion of the Program Director. The BC Cancer Research Centre and the Genome Sequence Centre have tight collaboration with the Radiation Oncology Department and the entire BC Cancer Agency. Research activities are encouraged and supported by the Program Director, Department Head and Radiation Oncology staff.

## Postgraduate Medical Education (M.D.) > Radiology

The postgraduate program in Radiology is a five-year program fully approved for certification and fellowship in the Royal College of Physicians and Surgeons of Canada. The second year provides core training in physics, chest radiology, abdominal imaging, musculoskeletal radiology, neuroradiology, and trauma radiology. The key modalities include radiography, computed tomography, and ultrasound. There are also introductions to magnetic resonance imaging, and nuclear medicine. Breast imaging is studied for one month each year. During the third year, the resident consolidates skills in film interpretation and basic procedures by functioning as a general radiologist under appropriate supervision. Pediatric radiology begins with two months in the third year, with two additional months over the remaining two years. Residents begin to acquire skills in interventional radiology in second year, and angiography rotations begin in the third. Obstetric ultrasound rotations occur in the fourth and fifth years. Provided that the Royal College requirements are satisfied, these last two years also provide opportunities to pursue special interests in any of the sub-specialty areas, or to develop a research project. Residents provide on-call service to perform and interpret emergency imaging studies. There are also multiple opportunities to develop teaching skills.

The academic program consists of daily sub-specialty rounds, and weekly Grand Rounds, and academic half-day sessions. The latter includes a two-year rotating series of core seminars, and a series of three or four lectures by internationally recognized visiting professors. Residents are expected to pursue at least one research project, conduct one clinical audit, and present a Grand Round. Residents attend the annual international Vancouver Imaging Review conference. Additional training in non-Medical Expert competencies, including ethics, biostatistics, study design and quality assurance is also offered. All residents attend the four-week American Institute for Radiologic Pathology course in Silver Spring, Maryland, at the department's expense.

## Postgraduate Medical Education (M.D.) > Surgery

The Department of Surgery postgraduate program for resident training has approved specialty programs in cardiac surgery, general surgery, neurosurgery, otolaryngology-head and neck surgery, plastic surgery, pediatric general surgery, radiation oncology, thoracic surgery, and vascular surgery.

Post Graduate Year 1 [PGY-1] positions are available in general surgery, neurosurgery, otolaryngology-head and neck surgery, plastic surgery and radiation oncology. Subspecialty residency training programs are filled with candidates who have completed an approved residency in a base surgical specialty. General surgery is required for pediatric general surgery; and either cardiac surgery or general surgery is required for vascular surgery and thoracic surgery. There is also a pathway to enter cardiac surgery after completion of general surgery. Entry into all PGY-1 positions is governed by the Canadian Resident Matching Service (CaRMS) Program.

Detailed descriptions for PGY1 positions are available at CaRMS (<http://www.carms.ca>).

A list of the program directors for each of the specialties follows: Drs. A. Campbell and R. Cook [co-directors], Cardiac Surgery; Dr. M. Hameed, General Surgery; Dr. R. Akagami, Neurosurgery; Dr. F. Kozak, Otolaryngology-Head and Neck Surgery; Dr. M. Hill, Plastic Surgery; Dr. E. D. Skarsgard, Pediatric General Surgery; Dr. H. Carolan, Radiation Oncology; Dr. K. G. Evans, Thoracic Surgery; and Dr. R. Sidhu, Vascular Surgery.



Further information on surgical programs in the affiliated hospitals (Vancouver Hospital and Health Sciences Centre, St. Paul's Hospital, Royal Columbian Hospital, and BC Children's Hospital in addition to numerous hospitals across the province) is available at Department of Surgery (<http://www.surgery.ubc.ca>) and Postgraduate Programs (<http://www.med.ubc.ca/postgrad>).

Residents enter the primary surgical specialties (Cardiac Surgery, General Surgery, Neurosurgery, Otolaryngology-Head and Neck Surgery, and Plastic Surgery) directly following completion of the M.D. degree or equivalent. The first two years of these programs include Surgical Foundations which is under the direction of Dr. R. Sidhu, Director, Postgraduate Education, Department of Surgery. The Surgical Foundations in Surgery incorporates clinical rotations as mandated by the Royal College of Physicians and Surgeons of Canada (RCPSC) training requirements in each entry-level discipline, together with weekly seminars and technical skills sessions, covering the Principles of Surgery curriculum and leading to eligibility for the Principles of Surgery examination of the RCPSC.

## Bachelor of Medical Laboratory Science

### Bachelor of Medical Laboratory Science > Introduction

Medical Laboratory Science is the study of the scientific principles underlying the disciplines practised in diagnostic and medical research laboratories (Clinical Chemistry, Cytology, Cytogenetics, Haematology, Histology, Histochemistry, Microbiology, Microscopy, Molecular Biology, Immunopathology, Toxicology).

To earn a Bachelor of Medical Laboratory Science students must complete a two-year general program, following completion of the prerequisite courses. Emphasis is on data analysis and an understanding of the underlying principles of the sub-disciplines of Medical Laboratory Science. The aim is to produce a "generalist" medical laboratory scientist, an individual who can adapt to and understand the changes that are occurring and will continue to occur in the medical laboratory.

Students are amply trained to pursue careers in teaching, administration, research and development, and industry. Students will also have fulfilled virtually all of the prerequisites for application to medical, dental, or graduate school.

### Bachelor of Medical Laboratory Science > Advising and Application

The B.M.L.Sc. Program Coordinator is available to assist undergraduate students in their general academic planning, in interpreting faculty regulations and course requirements, and in resolving academic problems which may arise.

Students should read the Frequently Asked Questions (FAQ) on the Pathology website (<http://pathology.ubc.ca/educational-programs/bmlsc/>). Further questions can be sent to the B.M.L.Sc. Program Coordinator.

Email is the preferred means of communication. Enquiries should be addressed to: [medlab@pathology.ubc.ca](mailto:medlab@pathology.ubc.ca). We regret that we are unable to provide one-on-one, in person advising.

Applications for the program must be made online (<http://www.pathology.ubc.ca/educational-programs/bmlsc/prospective-students/how-to-apply/>). Procedures, policies, and admission requirements to UBC are specified in Admissions (Calendar page: <http://www.calendar.ubc.ca/vancouver/index.cfm?tree=2,27,0,0#24> <http://www.calendar.ubc.ca/vancouver/index.cfm?tree=2,27,0,0#24063>).

More information is available from Pathology (<http://pathology.ubc.ca/educational-programs/bmlsc/>).

### Bachelor of Medical Laboratory Science > Admission Requirements



Applications for the program must be made online

(<http://www.pathology.ubc.ca/educational-programs/bmlsc/prospective-students/how-to-apply/>). Procedures, policies, and admission requirements to UBC are specified in Admissions (Calendar page: <http://www.calendar.ubc.ca/vancouver/index.cfm?tree=2,27,0,0#241> <http://www.calendar.ubc.ca/vancouver/index.cfm?tree=2,27,0,0#24063>).

Applicants for admission must meet the requirements of **either** Set A or B (not both).

### ***Set A, Medical Laboratory Technologist Route***

Applicants must have the following<sup>1</sup>:

1. completion of the Medical Laboratory Technologist (general) diploma of the Canadian Society of Medical Laboratory Science (CSMLS) or an equivalent diploma, plus
2. completion of CHEM 233 and 235 (or 203 and either 204 or the combined CHEM 213 and CHEM 245) (Organic Chemistry); plus
3. CHEM 205 (or 201).
4. CHEM 211 is not required but is **strongly recommended** for program admission.

<sup>1</sup>CHEM 211 is not required but is strongly recommended for program admission

### ***Set B, Science Route***

Science undergraduates and graduates must complete the following UBC courses (or their equivalents) prior to entry to the B.M.L.Sc. program:

#### **First Year**

CHEM 121 and 123 or 111 and 113<sup>2</sup>

BIOL 112, 121 and 140<sup>2</sup>

English: 6 credits first-year level

Mathematics: 6 credits first-year level<sup>2</sup>

Physics: 6 credits first-year level<sup>2</sup>

#### **Plus the following second-year level courses:<sup>1</sup>**

BIOL 200

BIOL 201

CHEM 205 or 201

CHEM 233 and 235 (or 203 and either 204 or both CHEM 213 and CHEM 245)

MICB 202

Arts Elective: 6 credits, any year level

<sup>1</sup> CHEM 211 is not required but is **strongly recommended** for program admission.

<sup>2</sup> The chemistry, biology, mathematics, and physics requirements may be fulfilled with SCIE 001.



Students applying for admission directly from secondary schools are not eligible for admission to the B.M.L.Sc. program. Secondary school students should first apply through the Faculty of Science, completing the requirements in Set B, then apply to the B.M.L.Sc. program during their second year of studies.

### *International applicants*

Qualified Canadian citizens and permanent residents are given priority in the selection process. The BMLSc Program has a limited enrollment, and the number of qualified applicants is expected to exceed the number of seats available in the program. While applications from qualified international students are accepted, they will be considered for admission only if seats are available. International applicants must meet the language requirements specified under English Language Admission Standard (Calendar page <http://www.calendar.ubc.ca/vancouver/index.cfm?tree=2,19,911,0#18812>) and the general admission requirements as specified under Admissions (<http://www.calendar.ubc.ca/vancouver/index.cfm?tree=2,0,0,0>) in addition to the requirements for the B.M.L.Sc. Program.

## **Bachelor of Medical Laboratory Science > General Academic Regulations**

Students accepted into the B.M.L.Sc. program are expected to follow a strict program of study. Changes to the required program must be requested in writing to the Director anytime prior to the commencement of classes or up to two weeks after the commencement of classes. Students who change their program of study without the written permission of the Director shall suffer the consequences of rescheduling, timetable changes, and cancelled courses which in subsequent years may result in lengthening the time to complete the program.

After two weeks of lectures, students are not permitted to change the program for which they are registered except in special circumstances and with the permission of the Director.

After the close of registration, all changes in course registration must be made by students at the B.M.L.Sc. Office. Program changes must be approved by the Director. These changes are processed by the B.M.L.Sc. Office. Students may not take courses for which they have not registered, and may be considered as having failed in all courses dropped without permission.

### *Examinations*

Formal examinations are held in December or in April. Some courses also hold midterm examinations in October and/or February.

Except in cases of medical, emotional, or other reasons deemed acceptable by the Director, missed exams will result in a grade of zero. If you are unable to write an exam due to illness, you must inform the Program Assistant **before the exam**. A doctor's letter must be received by the Director within 48 hours of the missed examination. If you are unable to write an exam for a reason other than illness, contact the Program Assistant on the day of the exam and provide a written explanation to the Director within 48 hours.

Missed exams will be made up at the discretion of the Director and Course Coordinators. Missed final exams may have to be written during the supplemental examination period.

Regular attendance is expected of students in all their classes, including lectures, laboratories, tutorials, and seminars. Students who neglect their academic work and assignments may, on the recommendation of the Head of the department, be excluded by the Dean from the final examinations.

No failed course may be repeated more than once without special permission of the Dean. This does not apply to courses in first-year English, which may be repeated twice.



### Supplemental Examinations

Supplemental examinations are not a right but a **privilege** granted by the Director after consideration of a student's complete academic standing. A student who has written final examinations but failed a course or courses may be granted permission to write supplementals in courses for which supplemental examinations are provided. Supplemental exams are given in late July or early August. To be eligible to write a supplemental exam, the student must have:

1. Passed the laboratory work, written the final examination and obtained at least 40% standing in the course in which the supplemental is granted;
2. In all but the final (graduating) year a candidate who has been granted a supplemental may write it only once. A student who fails a supplemental examination must repeat the course. However, in the graduating year a supplemental examination may be written twice with permission of the Director.

### Limitation of Enrolment

Enrolment in the B.M.L.Sc. program is limited to a maximum of 24 new students each academic year.

### Transfer Credit

Students may not receive transfer credit for courses completed at other institutions where those courses were used to obtain a degree. All courses submitted for transfer credit are subject to the approval of Enrolment Services.

### Student Academic Performance

The minimum passing grade in each program course is 50%.

In courses with a laboratory component, students must successfully complete and pass all laboratory requirements in order to pass the course.

Fail standing in session will be assigned unless a student meets the following conditions:

- passes in all credits attempted;
- if taking more than 12 credits, passes in at least three-fifths of them and obtains an overall average of at least 60% in three-fifths of the credits taken;
- if taking 12 or fewer credits, passes in at least one-half of them.

## Bachelor of Medical Laboratory Science > Degree Requirements

### Bachelor of Medical Laboratory Science

Third Year <sup>1</sup>	
PATH 300 <sup>2</sup> (or CHEM 205 and 211 or Arts electives or first year English) <sup>3</sup>	6 (7)
CHEM 315 <sup>4</sup>	1
PATH 301	4
PATH 303	4



PATH 304	4
PATH 305	4
PATH 306	2
PATH 327	4
PATH 375	3
Total Credits	32 (33)

#### Fourth Year<sup>5</sup>

BIOL 300 or HCEP 400	3
PATH 402	4
PATH 404	6
PATH 405	2
PATH 406	6
PATH 407	4
PATH 408	3
PATH 415	2
Total Credits	30

<sup>1</sup> CHEM 311 is an optional course available to students in third year.

<sup>2</sup> Science students only.

<sup>3</sup> Registered Medical Laboratory Technologist holders only.

<sup>4</sup> BMLSc students who have not taken CHEM 211 will be required to take it in third year, in preparation for CHEM 315.

<sup>5</sup> PATH 438 is an optional course available to students in fourth year.

### English Requirement

To qualify for the Bachelor of Medical Laboratory Science degree, students must satisfy the English requirement of the University of British Columbia. To do this, students must obtain credit for two of ENGL 110, 111, 112, 120 and 121, or their equivalents if taken at another institution. ENGL 112 is recommended.

All students admitted to the B.M.L.Sc. program must take immediate steps to satisfy the English requirement.

### Arts Requirement

Students must complete 12 credits of Arts courses, consisting of 6 credits of first-year English and 6 additional credits in Arts courses.

## Bachelor of Midwifery

### Bachelor of Midwifery > Introduction

Director's Office  
C. Jevitt, CNM, ARNP, PhD, FACNM  
320-5950 University Boulevard  
Vancouver, BC V6T 1Z3  
Telephone: 604 822 0771



Fax: 604 822 8030  
Email: Cecilia.jevitt@ubc.ca  
Midwifery Website (<http://www.midwifery.ubc.ca>)

The Midwifery Program prepares students to provide primary care for women and their families through pregnancy and up to the third month after birth. Midwives, although independent practitioners, work as part of the health care team. The four-year program combines broad-based knowledge and understanding in the humanities, and the social and bio-medical sciences.

## Bachelor of Midwifery > Academic Advising

Advising sessions are available to perspective/current students by appointment with the Manager of Student Services. Ongoing advising regarding academic progress and career planning are arranged by appointment with either faculty lead for the academic year or the Manager of Student Services.

## Bachelor of Midwifery > Admission

### *Application*

Students wishing to apply to the Midwifery Education Program (<http://www.midwifery.ubc.ca/midwifery.htm>) must complete both an online application for admission to the University of British Columbia (Enrolment Services) and an online Supplemental Application to the Division of Midwifery.

Application	Deadline (for Winter Session beginning the following September)
UBC online application for admission ( <a href="http://www.you.ubc.ca/ubc">http://www.you.ubc.ca/ubc</a> )	December 1
Midwifery online application ( <a href="http://www.midwifery.ubc.ca/midwifery/admission/SupplementalApplication.htm">http://www.midwifery.ubc.ca/midwifery/admission/SupplementalApplication.htm</a> )	January 15

Official transcripts for all completed and in-progress high school and post-secondary work are to be sent to Enrolment Services no later than January 15.

### *Academic Requirements*

Admission to the Midwifery Program requires successful completion of high school including Mathematics and Chemistry to at least the grade 11 level; as well as the following post-secondary requirements:

- 7 credits of human biology (UBC BIOL 153 or equivalent)
- 3 credits of English (UBC ENGL 112 or equivalent)

Applicants with a minimum of 24 transferrable post-secondary credits will be evaluated on the basis of their post-secondary academic performance. Applicants with fewer than 24 transferrable post-secondary credits will be evaluated based on both high school and post-secondary academic performance.

### *Additional Application Requirements*





Applicants must complete and submit an online application to the Midwifery Program by January 15. The information and documents required to be submitted as part of this additional application are found on the Midwifery Program website (<http://www.midwifery.ubc.ca/midwifery/admission/SupplementalApplication.htm>). Late or incomplete applications will not be considered.

Admission to the four-year Bachelor of Midwifery will be offered to those students who not only demonstrate academic potential but also demonstrate the qualities, commitment, and motivation to practice as a midwife. Candidates may be invited for an interview at the discretion of the Admissions Committee.

### *Disclosure*

The Midwifery Program has a limited enrolment. Since the number of qualified applicants is expected to exceed the number of places available, fulfilment of published requirements is not a guarantee of admission. The Faculty reserves the right of selection of all students for admission to the program.

In response to human health resource challenges in British Columbia, the admissions process gives priority to qualified applicants who are also BC residents and/or Aboriginal.

### *Transfer Credit*

The University will consider granting transfer credit for all transferable post-secondary courses completed. The number of credits that can be applied to the Midwifery degree will be determined by the Program in accordance with University regulations regarding transfer credit. Three (3) credits of transfer credit may be applied to elective courses. Transfer credit for core midwifery courses will be evaluated on a case by case basis.

### *Readmission*

The Faculty reserves the right to readmit students and to stipulate conditions attached to readmission. Application for readmission to the Program will be reviewed on an individual basis.

### *Post-Acceptance Requirements*

Upon acceptance each student will receive a letter asking them to confirm their seat in the program. They will sign a form acknowledging the fact that they will need to relocate for one or more terms, at their own expense, in order to fulfill clinical requirements.

All undergraduate students admitted to the Division of Midwifery in the Faculty of Medicine will have their vaccination records reviewed to determine their risk for communicable diseases.

Upon acceptance, each student must submit to the Student Health Service evidence of immunizations (Tetanus/Diphtheria-Toxoid, Polio, MMR, Hepatitis B) and a negative TB skin test (if the skin test is positive, a chest x-ray is required). Students who have not demonstrated immunity to any of these conditions prior to entry should arrange to complete the immunization(s) through UBC Student Health Services as soon as possible after matriculation. Students who do not comply with the immunization requirements will not be able to participate in a clinical placement, thereby jeopardizing their ability to graduate from the program.

Undergraduate midwifery students who continue to fail to sero-convert will be tested for the presence of Hepatitis B antigen by the Student Health Service. Students who demonstrate Hepatitis B infectivity may be required to complete a modified course of training and may pursue their studies only as long as their continued involvement does not pose a health or safety hazard to themselves or



others, and as long as they are able to meet the core requirements for a midwifery degree at UBC.

Counselling resources are available to any undergraduate midwifery student identified as Hepatitis B positive.

### *Applicants with Disabilities*

Applicants to the Division of Midwifery with disabilities will be considered in accordance with UBC's policy on Academic Accommodation for Students with Disabilities. This policy does not eliminate the need for evaluation or the need to meet essential learning outcomes. Students seeking academic accommodation due to disability must:

- Provide the necessary documentation to Access and Diversity (the University does not provide or assume the cost of diagnostic services); and
- Bring the request for academic accommodation or for changes in accommodation needs to the attention of the appropriate personnel in a timely manner in order to allow for arrangement of accommodations.

Students with disabilities are encouraged to pursue their studies as long as their continued involvement does not pose a health or safety hazard to themselves or others, and as long as they are able to meet the core requirements for a Bachelor of Midwifery Degree. The Division of Midwifery will make every reasonable effort to ensure that any modified course of training will meet professional licensing requirements. However, licensing requirements and decisions are within the sole jurisdiction of the College of Midwives of British Columbia.

For more information please contact the Access and Diversity (<http://students.ubc.ca/about/access>), 604.822.5844.

## **Bachelor of Midwifery > Academic Regulations**

The minimum passing grade in each midwifery course is 65%. In clinical midwifery courses the student is required to have successfully completed clinical practice before being allowed to write the final exam.

Although satisfactory academic performance is prerequisite to advancement, it is not the sole criterion in the consideration of the suitability of a student for promotion or graduation. The Faculty reserves the right to require a student to withdraw from the program if considered to be unsuitable to proceed with the study or practice of midwifery.

A student whose academic standing is unsatisfactory may be required either to withdraw from the program or to repeat all or part of the academic work of the year.

A student who fails two courses in one academic year may be required to withdraw from the program, or to repeat all or part of the academic work of that year.

## **Bachelor of Midwifery > Degree Requirements**

### *Elective Requirements*

Midwifery (<http://www.midwifery.ubc.ca>) maintains a list of suggested electives. These are the preferred electives which students are encouraged to take in order to meet the elective requirements.

### *Midwifery Education Program: Curriculum Overview*



For Students Commencing the Program in September 2016 or earlier

Year 1	
GRSJ 310	3
MIDW 101	3
MIDW 102	4
MIDW 103	3
MIDW 104	3
MIDW 105	13
MIDW 110	3
MIDW 125	3
Total Credits	35
Year 2	
MIDW 205	8
MIDW 215	2
MIDW 220 <sup>1</sup>	10
MIDW 221 <sup>1</sup>	1
MIDW 240	9
Elective	3
Total Credits	33
Year 3	
MIDW 305	6
MIDW 310 <sup>2</sup>	5
MIDW 320	12
MIDW 322 <sup>3</sup>	8
MIDW 325	3
One of MIDW 350 OR MIDW 360 and 370 OR MIDW 380 <sup>4</sup>	4-12
Total Credits	30-38
Year 4	
MIDW 405	3
MIDW 420	12
MIDW 430	5
MIDW 440	13
Total Credits	33
Total Program Credits	131-139
MIDW 499 <sup>5</sup>	1-15

<sup>1</sup> Option to take in summer between Years 1 and 2.

<sup>2</sup> Starts in Term 1, finishes in Term 2.

<sup>3</sup> Optional.

<sup>4</sup> Offered in Term 3, between Years 3 and 4.

<sup>5</sup> Optional/remediation.



For Students Commencing the Program in September 2017 or later

Year 1	
GRSJ 310	3
MIDW 101	3
MIDW 102	4
MIDW 103	3
MIDW 104	3
MIDW 106	3
MIDW 107	3
MIDW 108	7
MIDW 115 <sup>1</sup>	3
MIDW 125	3
Total Credits	35
Year 2	
MIDW 200	6
MIDW 201	3
MIDW 210	3
MIDW 215	2
MIDW 230	6
MIDW 240	9
Total Credits	29
Year 3	
MIDW 305	6
MIDW 310 <sup>1</sup>	5
MIDW 320	10
MIDW 322	8
MIDW 325	3
One of MIDW 350 OR MIDW 360 and 370 OR MIDW 380 <sup>2</sup>	4-12
Total Credits	44-48
Year 4	
MIDW 405	3
MIDW 420	12
MIDW 435	4
MIDW 440	13
Total Credits	32
Total Program Credits	140-144

<sup>1</sup> Students must take one of MIDW 115 or MIDW 310.

<sup>2</sup> Offered in Term 3, between Years 3 and 4.



### *Costs Other than Sessional Fee*

There are additional expenses for travel and clinical practice. Students should be prepared for clinical practice outside the Vancouver area and should include travel and living costs for these experiences when estimating total expenses. See Midwifery (<http://www.midwifery.ubc.ca>) for more information regarding additional costs.

## **Bachelor of Midwifery > Canadian Midwifery Regulators Consortium**

Canadian-educated midwifery candidates are eligible to write the Canadian Midwifery Registration Examination (<http://cmrc-ccosf.ca/node/23>) (CMRE) if they have completed an approved program of midwifery education within the jurisdiction where the candidate is writing the exam.

The CMRE is a national written examination designed to assess applicants for midwifery registration to ensure that they meet entry-level competency standards set out in Canadian Competencies for Midwives ([http://cmrc-ccosf.ca/files/pdf/National\\_Competencies\\_ENG\\_rev08.pdf](http://cmrc-ccosf.ca/files/pdf/National_Competencies_ENG_rev08.pdf)). Its goal is to ensure that midwives gaining registration are competent and safe practitioners providing a consistent standard of care across Canada.

Candidates must provide proof of program completion with a pass score to the College of Midwives of BC (<http://www.cmbc.bc.ca>). It is the candidate's responsibility to ensure that transcripts are provided by the educating body. If transcripts are not available, a letter from the educating body indicating: a) that all assessment components have been completed; and b) that the candidate has passed all aspects of the program, will be accepted.

## **Undergraduate Medical Education (M.D.)**

The possession of the Doctor of Medicine does not, in itself, confer the right to practice medicine in any province in Canada. Each province has a college of physicians and surgeons, as mentioned previously, and these colleges have the final authority to grant a licence to practice medicine within their jurisdictions. The possession of the Licentiate of the Medical Council of Canada (<http://www.mcc.ca>) (LMCC) is one of the major requirements of the provincial colleges of physicians and surgeons for registration.

To be eligible for licensure in BC, graduates will be required to have completed at least two years of postgraduate training. Please refer to the link below for additional information.

<http://www.cpsbc.ca/for-physicians/registration-licensing/applying>

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**H. Bach**, Ph.D.

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**W. Ghesquiere**, Community Internal Medicine

**J. Grant**, Pathology and Laboratory Medicine

**M. Hull**, HIV/AIDS

**T. Lau**, Pharmaceutical Sciences

**V. Leung**, Pathology and Laboratory Medicine

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**D. Money**, Obstetrics and Gynaecology

**C. Nishi**, Pharmaceutical Sciences

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**A. Chalmers**, Medicine  
**L. Hurd Clarke**, Human Kinetics  
**A. V. Krassioukov**, Rehabilitation Medicine  
**I. Mitchell**, Computer Science



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**P. Rennie**, B.Sc. (W.Ont.), Ph.D. (Alta.)  
**M. Wilson**, M.D. (Br.Col.)

#### Associate Members

**P. Abolmaesumi**, B.Sc., M.Sc. (Sharif), Ph.D. (Br.Col.), P.Eng. (Ont.)  
**R. Bebb**, M.D. (Br.Col.)  
**R. Branda**, B.Sc., Ph.D. (MIT)  
**S. Cenk Sahinalp**, B.Sc., Ph.D. (UMD)  
**K. Chambers**, B.Sc., M.D., M.H.Sc. (Br.Col.)  
**S. Chang**, M.D. (Br.Col.)  
**K. Chi**, M.D. (Ott.)  
**J. Crook**, M.D. (Tor.), FRCSC  
**G. Cundiff**, M.D. (Texas)  
**S. Dedhar**, Ph.D. (Br.Col.)  
**S. Elliot**, M.D. (Br. Col.)  
**R. Gallagher**, B.Sc. (Br. Col.)  
**C. S. Higano**, M.D. (Wash.)  
**D. Huntsman**, M.D. (Nfld.)  
**W. Jefferies**, B.Sc., D.Phil.  
**E. Jones**, M.D. (Br.Col.)  
**C. Kollmannsberger**, M.D. (Munich)  
**D. Kuhl**, B.A. (Winn.), M.D. (McM.), M.H.Sc. (Tor.), Ph.D. (Br.Col.)  
**H. Ma**, B.A.Sc. (Br.Col.), S.M., Ph.D. (M.I.T.)  
**S. Ma**, Ph.D. (Br.Col.)  
**L. Machan**, M.D. (Alta.)  
**A. MacNab**, M.B., B.S. (Lond.)  
**T. Nielsen**, B.Sc., Ph.D., M.D. (McG.)  
**R. Rohling**, B.A.Sc. (Br.Col.), M.Eng. (McG.), Ph.D. (Camb.)  
**S. Salcudean**, B.Eng., M.Eng. (McG.), Ph.D. (Calif., Berkeley), P.Eng., FIEEE, Fell.ASI, CRC, FCAE  
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