

## Our MB ChB Programme

**(Dr Kate Owen speaking)** Our course is four years because it's graduate only entry, so all applicants will already have a degree at 2:1 or first level, so if you don't mind the hard work it's a good way to get through the course a little bit quicker.

**(Dr Richard Tunstall speaking)** We have to essentially get a five-year course into four years. We don't cut a year off, we actually have to be clever in how we teach.

**(Brogan speaking)** It makes it a lot more challenging in terms of time aspects, it really does put a pressure on you to push yourself to learn, you are really the one driving your own education.

**(N.A speaking)** It can be quite intimidating really but part of it is overcoming that and I think the environment that we learn in is very supportive of that.

**(Dr Kate Owen speaking)** The backgrounds of students come to the course are really varied and we now accept students from arts backgrounds as well as science backgrounds.

**(Hannah speaking)** I studied classics which is Greek and Latin literature, art philosophy all that sort of stuff so very very different but I've also spent a year working on a stroke unit as an auxiliary nurse.

**(Gavin speaking)** I worked in A&E for a year, which was a fantastic experience for me but that enabled me to then go on and apply here and be successful and I've taken the experience I've learn in A&E to my CBL group and to my own learning and here I am.

**(Nigel speaking)** Everybody is very motivated to be here, there's lot of discussions that we do have, for example in the Case Based Learning it makes those quite interesting and varied.

**(Emma speaking)** When you go and see a patient who has Crohn's disease and you've learned about Crohn's disease with your Crohn's patient in Block One. It's quite exciting if you can look back all over your stuff and see what happened with that patient see whether it's different.

**(Obioma speaking)** The early access to patients is just amazing because it puts everything into context and it really motivates you to want to find out what lies behind.

**(Hannah speaking)** From very early on, from like the first few weeks we went to a community health centre and we met up with some patients. We've seen some elderly people, some paediatric patients, people with chronic conditions. That's really really good, that you're introduced so early.

**(Dr Kate Owen speaking)** When they work with real patients they realise that medicine is not like it's in the textbook. So a simulated patient might learn what the right symptoms are to say for a heart attack but actually in real life it often isn't quite that easy.

**(Brogan speaking)** Real people give you a genuine honest answer. They're the people you're going to meet when you go into practice. You know they don't always give you the answer you want to hear or it's not always the classic triad of symptoms that you learn in a textbook, it brings in the real life factors

**(Emma speaking)** I go to GP every Wednesday each week. The idea is that I will take three consultations and receive feedback. We also watch the GP as they would usually do it. We get to go to an extended patient encounter each week which means that we get to go and visit someone in their home and see actually how the disease or condition is affecting their life.

**(Mike speaking)** What we learn in the lecture theatre I guess is applied straight on to the wards and we go around with consultants they're pointing out what's happening here, what happening in there and then you really do see a person with those things we're learning about.

**(Dr Gemma Searle speaking)** I think skills like communication especially they do take a while to develop so by introducing it earlier in the curriculum they've got more time to practice and perfect their skills before they use them as junior doctors.

**(Dr Amy Irwin speaking)** Over on here we come as a big family and we're all now parting ways and yeah sort of bittersweet. So I've got my job down in Surrey at Firmly Park Hospital which is part military and part civil. It should be exciting. I'll think it'll be good.

**(Obioma speaking)** Initially, I thought neurology because I spent four years doing Neuroscience but now I'm thinking more paediatrics so I may change again I don't know.

**(Dr David Jones speaking)** My first job is doing emergency medicine which would be exciting and hopefully everything that Warwick's taught me will be put in place when I start in August. So it's very exciting time at the moment.