UNIVERSITY OF CAPE TOWN

FACULTY OF HEALTH SCIENCES
(UNDERGRADUATE)

2016

Postal Address: University of Cape Town
Private Bag X3
7701 RONDEBOSCH

Dean's & Faculty Offices: Barnard Fuller Building
Anzio Road
Observatory

Office Hours: Mondays to Fridays: 08h30 - 16h30

Fax: (021) 447 8955

Telephones: Dean's Office (021) 406 6346
Faculty Office (021) 406 6346/6634
Accounts and Fees (021) 650 1704
Admissions (021) 650 2128

Internet: UCT’s Home Page http://www.uct.ac.za
Health Sciences
Home Page http://www.health.uct.ac.za
Dean's Office dean.hs@uct.ac.za
Faculty Office N/A
International Academic Programmes
Office int-iapo@uct.ac.za

The Registrar's and General Enquiries offices are located in the Bremner Building and remain open during the lunch hour. The Admissions Office and Student Records Office are located in the Masingene Building, Middle Campus, and are open from 08h30 to 16h30. The Cashier's Office is located in Kramer Building, Middle Campus, and is open from 09h00 to 15h30.

This handbook is part of a series that consists of

Book 1: Undergraduate Prospectus
Book 2: Authorities and information of record
Book 3: General Rules and Policies
Book 4: Academic Calendar and Meetings
Book 5: Student Support and Services
Book 6-11: Handbooks of the Faculties of Commerce, Engineering & the Built Environment, Health Sciences, Humanities, Law, Science
Book 12: Student Fees
Book 13: Bursary and Loan Opportunities for Undergraduate Study
Book 14: Financial assistance for Postgraduate Study and Postdoctoral Research
The University has made every effort to ensure the accuracy of the information in its handbooks. However, we reserve the right at any time, if circumstances dictate (for example, if there are not sufficient students registered), to
(i) make alterations or changes to any of the published details of the opportunities on offer; or
(ii) add to or withdraw any of the opportunities on offer.
Our students are given every assurance that changes to opportunities will only be made under compelling circumstances and students will be fully informed as soon as possible.
## CONTENTS

**GENERAL INFORMATION** ................................................................. 5  
Dean’s office, Faculty office and other central offices in the Faculty ............................................ 5  
Contact details of University and Faculty administrative offices dealing with student matters ... 7  
Contact details for the Health Sciences Student Council .............................................................. 8  
Term dates ................................................................................................................................. 8  
Definitions of terms used in this handbook ................................................................................. 9  
Programme, plan and course codes ........................................................................................... 10  

**RULES AND CURRICULA FOR UNDERGRADUATE PROGRAMMES** .............. 17  
Bachelor of Medicine and Bachelor of Surgery ........................................................................ 17  
Bachelor of Science in Medicine ................................................................................................. 51  
Bachelor of Science in Audiology and Bachelor of Science in Speech-Language Pathology .... 60  
Bachelor of Science in Occupational Therapy ........................................................................ 88  
Bachelor of Science in Physiotherapy ...................................................................................... 105  
Higher Certificate in Disability Practice .................................................................................... 125  

**GENERAL RULES FOR UNDERGRADUATE STUDENTS** ........................... 11  

**OTHER COURSES OFFERED** ..................................................................... 129  

**DEPARTMENTS IN THE FACULTY** ............................................................ 140  
List of Departments, Divisions and Units .................................................................................. 140  
Anaesthesia and Perioperative Medicine .................................................................................. 143  
Health and Rehabilitation Sciences ......................................................................................... 144  
Health Sciences Education ....................................................................................................... 148  
Human Biology .......................................................................................................................... 149  
Integrative Biomedical Sciences .............................................................................................. 152  
Medicine .................................................................................................................................... 154  
Obstetrics and Gynaecology ...................................................................................................... 169  
Paediatrics and Child Health .................................................................................................... 172  
Pathology ................................................................................................................................. 180  
Psychiatry and Mental Health ................................................................................................... 188  
Public Health and Family Medicine ......................................................................................... 192  
Radiation Medicine .................................................................................................................. 199  
Surgery ...................................................................................................................................... 201  

**RESEARCH STRUCTURES** ....................................................................... 209  

**ADDITIONAL INFORMATION** .................................................................... 224  
Formulae for undergraduate degrees with honours and distinction ....................................... 224  
Class medals, Dean’s Merit List and prizes .............................................................................. 226  
Guide to professional behaviour for undergraduate Health Sciences students ....................... 234  
Process to investigate reported student impairment or unprofessional conduct ....................... 238  
Guide to avoiding plagiarism ...................................................................................................... 242  
Policy on tuberculosis for undergraduate Health Sciences students ...................................... 247  
UCT Health Sciences Faculty e-learning and e-teaching policy ............................................. 249  
Student Transport Policy .......................................................................................................... 253  
Faculty Mission Statement ........................................................................................................ 257  
Faculty of Health Sciences Charter ......................................................................................... 257  
Faculty of Health Sciences Declaration .................................................................................... 259  
Distinguished Teachers in the Faculty ....................................................................................... 259  

**GENERAL INDEX** ...................................................................................... 265
Guide to the usage of this Handbook

The following is a general overview of the structure of this Handbook for the guidance of users. The contents are organised in a number of different sections (see below) each of which has a particular focus. The sections are interlinked by cross-references where relevant.

General Information: This section includes contact details, term dates, disciplines within departments, definitions of terminology used and other explanatory notes.

General rules for undergraduate students: The rules in this section must be read in conjunction with the degree-specific rules in the next section.

Rules and curricula for undergraduate programmes: This section gives an outline of each of the undergraduate degrees and courses within those degrees, as well as rules relating to curricula. Please note especially the readmission rules under each programme; students who fall foul of these rules are in danger of being refused readmission.

Other courses offered: This section lists courses that do not form part of the postgraduate degrees, and include stand-alone courses offered to students in this faculty or other faculties.

Faculty structure and departments: The second half of this book lists all the teaching and research staff in departments and research structures.

Additional information: This section gives details of prizes and awards, charters (e.g. the Teaching and Learning Charter) and also Faculty-specific policies for postgraduate students.

All students must also familiarise themselves with the University rules in Handbook 3, General Rules and Policies. Students are also expected to check annually whether the rules or curriculum requirements have changed since the last edition of this Handbook or of the General Rules book.
GENERAL INFORMATION

Dean’s office, Faculty office and other central offices in the Faculty

DEAN’S OFFICE AND FACULTY OFFICE
L2, Barnard Fuller Building and Wernher & Beit North
(Tel: 021 406 6346 and 021 406 6634)

Professor and Interim Dean:  
G Hussey, MBChB MMed Cape Town DTM&H RCP – London MSc CTM LSHTM FFCH CMSA

Associate Professor and Deputy Dean: Research:  
J Moodley, MBChB Natal MMed (Public Health) PhD Cape Town

Associate Professor and Deputy Dean: Postgraduate Education:  
D T Hendricks, BSc(Med)(Hons) PhD Cape Town

Associate Professor and Deputy Dean: Undergraduate Education:  
G Perez, BDent Algiers DHSM MDent (Community Dentistry) Witwatersrand

Deputy Dean: Clinical Health Services:  
R L Morar, MBChB UKZN DHMEF MMed (Community Health) Cape Town FCPHM SA

Faculty Manager: Academic Administration:  
B Klingenberg, BA HED UFS

Manager: Postgraduate Administration:  
D J A Winckler, BA Pret

Manager: Undergraduate Administration:  
J Stoffberg, BTech CPUT

PRIMARY HEALTHCARE DIRECTORATE
E47-25, Old Main Building, Groote Schuur Hospital (Tel: 021 406 6761)

Chair and Director (Joint appointment with School of Public Health & Family Medicine):  
S Reid, BSc(Med) MBChB Cape Town MFamMed Medunsa PhD UKZN

Senior Lecturers (Joint appointment with School of Public Health & Family Medicine):  
J Irlam, BSc (Med)(Hons) MPhil Cape Town
L Vivian, BSc (Hons) MSc London School of Economics PhD Cape Town

Lecturer (Joint appointment with School of Public Health & Family Medicine):  
S Crawford-Browne, MSocSc ClinSocW Cape Town

Assistant Lecturer:  
D Michaels, MSc (Epi) Columbia MPhil (Mat&Child Health) PhD (Pub Health) Cape Town

Honorary Lecturers:  
R Baum, PhD (Dram Arts) California
K du Pré le Roux, MBChB Cape Town IMCH MAIntHealth Sweden
6 GENERAL INFORMATION

B Gaunt, MBChB Cape Town MSc Int PHC London DipAnae DipObst SA

Junior Research Officer:
C Naidu, MSoc HonSoc Cape Town

Facility Manager:
S Naidoo, Dip RN St Aidan’s Mission Hospital Durban Dip RM RK Khan Hospital Durban Dip CHN MLSultan Tech Durban

Site Facilitators (Joint appointments with School of Public Health & Family Medicine):
M Arendse, Dip Nursing Cape Town
C Beauzac, Hons DevStud UWC
T Xapa, Dip AdEd/BusPlan Cape Town

NGO Facilitators (Joint appointment with School of Public Health & Family Medicine):
P Botha, BSocSc SocW Cape Town BA(HonsSocW) UNISA
A-L Botsis, BA Grahamstown Higher Ed Dip Stell
Z Nyati, DipOfficeAdmin Cape Town

Site Coordinators:
S Adams
N Daniels
F Le Roux
Z Nyati, DipOfficeAdmin Cape Town

EDUCATION DEVELOPMENT UNIT
Second Floor, Anatomy Building
(Tel: 021 406 6646)

Director of Education Development Unit:
N Hartman, BArts Stell BSocSc(Hons) MSocSc PhD Cape Town

Associate Professor:
F Cilliers, MBChB HonsBSc MedSc MPhil(HED) Stell PhD Maastricht

Curriculum Development Officer:
M Alperstein, BSocSc (Nursing) UKZN Dip PHC (Ed) Witwatersrand MPhil (Adult Ed) Cape Town

IT Education Manager:
G Doyle, BSc (Hons) HDE Rhodes, MSc (IT) Cape Town

Lecturer:
L Pienaar, BSc (Physio) UWC MSc (Physio) Stell

IT Education: Technical Support and Administration Assistants:
S Mandyoli, BA (Hons) UWC
D Sias, BA HDE BEd (Hons) UWC
F van Breda, ND Horticulture CPUT

IT Education: Open Educational Resources Technical Support Assistant:
N Southgate, BSc (Biodiversity & Conservation Biology) UWC

IT Education: E-learning Instructional Designer:
K Whittaker, BA PGDip (Library and Information Science) Cape Town
CENTRE FOR BIOETHICS
L51 – 67 Old Main Building, Groote Schuur Hospital

The Bioethics Centre, formally established in 1992, grew out of the Bioethics Unit, which has functioned informally in the (then) Faculty of Medicine since 1988. Since 2009, the Bioethics Centre has been a joint Centre of the Faculty of Health Sciences and the Department of Philosophy in the Faculty of Humanities. Bioethics Centre staff are actively engaged in bioethics teaching and research, and provide a consultation service.

To arrange bioethics consultations please email: bioethicsconsult@uct.ac.za (all emails to this address are confidential).

For general enquiries to the Bioethics Centre please email: bioethics@uct.ac.za

Professor and Director:
D Benatar, BSocSc(Hons) PhD Cape Town

Emeritus Professor:
S R Benatar, MBChB DSc(Med) Cape Town FFA FRCP (Hon) FCP SA (Hon)

Honorary Senior Lecturer:
T E Fleischer, BA Indiana LLM Montreal JD California

Associate Professor:
J Anthony, MBChB Cape Town FCOG SA MPhil Stell

Senior Lecturers:
E Galgut, BA(Hons) MA Witwatersrand MA Cape Town PhD Rutgers
L Henley, MSocSc MPhil(Bioethics) PhD Cape Town
P Roux, MBChB MD MPhil(Bioethics) Cape Town FCP DCH SA

Lecturer:
G Hull, BA(Hons) Cantab MPhil PhD London

Post-doctoral Fellow:
J de Vries, MSc (Hons) Wageningen MSc European University Institute PhD Oxon

Contact details of University and Faculty administrative offices dealing with student matters

(Note: The Academic Administration section of the Faculty Office of Health Sciences is situated in the Wernher Beit North building, one level down from the Dean’s Office.)

<table>
<thead>
<tr>
<th>Query</th>
<th>Whom to approach</th>
<th>Telephone:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic transcripts/degree certificates</td>
<td>Records Office</td>
<td>(021) 650 3595</td>
</tr>
<tr>
<td>Admission: Undergraduate</td>
<td>Undergraduate Administration section of Faculty Office of Health Sciences</td>
<td>(021) 406 6328</td>
</tr>
<tr>
<td>Computer laboratory queries</td>
<td>ICTS, Anatomy Building, Health Sciences campus</td>
<td>(021) 406 6729</td>
</tr>
<tr>
<td>Deferred examinations</td>
<td>Records Office</td>
<td>(021) 650 3595</td>
</tr>
<tr>
<td>Fee problems/accounts</td>
<td>Central Fees Office (Kramer Law Building)</td>
<td>(021) 650 2142</td>
</tr>
</tbody>
</table>
Fee payments Cashier’s Office (Kramer Law Building) (09h30 to 15h30) (021) 650 2207 / 2146
Financial assistance Student Financial Aid Office (Kramer Law Building) (021) 650 2125
Medical Library queries Medical Librarian, Health Sciences Faculty Library (021) 406 6130
Registration issues Academic Administration section of Faculty Office of Health Sciences: Undergraduate (021) 406 6634
Student health matters Student Wellness (021) 650 1020
Undergraduate curriculum matters Undergraduate Administration section of Faculty Office (021) 406 6634
Undergraduate student support (other than academic support) Undergraduate Administration section of Faculty Office of Health Sciences (021) 406 6614

Health Sciences Student Council
Ground Floor (Next to the Cafeteria), Barnard Fuller Building
Phone number: 021 406 6421
Office Hours: 13h00-14h00 week-days

Term dates 2016
The 2016 term and registration dates for the various undergraduate degrees are given below:

<table>
<thead>
<tr>
<th>MBChB</th>
<th>2nd Year</th>
<th>3rd Year</th>
<th>4th and 5th Year</th>
<th>6th Year</th>
</tr>
</thead>
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<tr>
<td>1st Year</td>
<td>15 Feb – 24 Mar</td>
<td>18 Jan – 08 Apr</td>
<td>18 Jan – 08 Apr</td>
<td>11 Jan – 24 Jun</td>
</tr>
<tr>
<td></td>
<td>18 Jul – 02 Sep</td>
<td>18 Jul – 02 Sep</td>
<td>18 Jul – 11 Nov</td>
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<tr>
<td></td>
<td>12 Sep – 09 Nov</td>
<td>12 Sep – 18 Nov</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Registration date:</td>
<td>02 Feb 2016</td>
<td>18 Jan 2016</td>
<td>15 Jan 2016</td>
<td>08 Jan 2016</td>
</tr>
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</table>

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<tr>
<th>BSc AUDIOLGY AND BSc SPEECH-LANGUAGE PATHOLOGY</th>
<th>3rd Year</th>
<th>4th Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st Year</td>
<td>15 Feb – 24 Mar</td>
<td>11 Jan – 24 Mar</td>
</tr>
<tr>
<td></td>
<td>04 Apr – 10 Jun</td>
<td>04 Apr – 10 Jun</td>
</tr>
<tr>
<td></td>
<td>18 Jul – 02 Sep</td>
<td>18 Jul – 02 Sep</td>
</tr>
<tr>
<td></td>
<td>12 Sep – 09 Nov</td>
<td>12 Sep – 18 Nov</td>
</tr>
<tr>
<td>Registration date:</td>
<td>02 Feb 2016</td>
<td>25 Jan 2016</td>
</tr>
<tr>
<td>Registration date:</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>BSc OCCUPATIONAL THERAPY</th>
<th>3rd Year</th>
<th>4th Year</th>
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</thead>
<tbody>
<tr>
<td>1st Year</td>
<td>15 Feb – 24 Mar</td>
<td>11 Jan – 24 Mar</td>
</tr>
<tr>
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<td>04 Apr – 10 Jun</td>
<td>04 Apr – 10 Jun</td>
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<td>18 Jul – 02 Sep</td>
<td>18 Jul – 02 Sep</td>
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</table>
Definitions of terms used in this handbook

**Concession:** Formal Senate approval exempting a student from complying with a required rule.

**Curriculum:** Prescribed course of study for a degree or diploma.

**DP (Due Performance) requirement:** Required minimum level of performance during the year to qualify a student to do an examination in a particular course.

**Exemption and credit:** Exemption from a course means that a student need not complete this course since he/she has passed an equivalent course before. He/she is then also given credit towards the programme for the course he/she passed before.

**Health and Rehabilitation Sciences:** Physiotherapy, Occupational Therapy, Audiology, Speech-Language Pathology, Disability Studies and Nursing.

**HEQSF course level and NQF credits:** The University is required to align its qualifications with the Higher Education Qualifications Sub-framework or HEQSF (which forms part of the National Qualifications Framework). In terms of the Framework, the following criteria apply:

- A Bachelor’s degree of four or more years is at HEQSF exit level 8 and must have a minimum of 480 credits. Minimum credits at HEQSF level 7: 120; minimum credits at HEQSF level 8: 96.
- Courses with content pitched at first year level are at HEQSF level 5; those at second year level at HEQSF level 6; those at third year level at HEQSF level 7; and those at fourth to six year at HEQSF level 8.
- NQF credits: 1 credit is 10 notional hours of learning.

**ISCE:** Integrated Structured Clinical Examination.

**Joint staff:** Staff employed jointly by the University and the Provincial Government of the Western Cape (PGWC).

**OSCE:** Objective Structured Clinical Examination.

**OSPE:** Objective Structured Practical Examination.

**Convener:** Academic staff member in charge of offering the degree or a course within the degree programme.
**General Information**

**Readmission requirements:** Requirements a student must meet to be permitted to continue with the programme. A student who fails to meet one or more of these requirements may be refused readmission.

**Semester:** A half-year.

**Programme, plan and course codes**

Each study programme has a code, indicating:

- **M** = Faculty of Health Sciences
- **B** = Bachelor's degree
- + a 3-digit number

Example: BSc Physiotherapy = MB004.

**The undergraduate programme codes are as follows:**

- MB001  BSc (Medicine)
- MB003  BSc Occupational Therapy
- MB016  BSc Occupational Therapy Intervention Programme
- MB004  BSc Physiotherapy
- MB017  BSc Physiotherapy Intervention Programme
- MB010  BSc Speech-Language Pathology
- MB018  BSc Speech-Language Pathology Intervention Programme
- MB011  BSc Audiology
- MB019  BSc Audiology Intervention Programme
- MB014  MBChB
- MB020  MBChB Intervention Programme
- MU002  Higher Certificate in Disability Practice

Every course has a **course title** and a **course code**.

The structure is:

AAA1nnnS, where:

- **AAA** is a 3 alpha group identifying the department.
- **1** is a number identifying the year level at which the course is usually taken.
- **nnn** is a three character number that identifies the course uniquely.
- **S** is a single alpha character, specifying the time period during which the course is offered.

In many cases, the only change is the addition of a zero as the first identifying number.

For example: AHS373F becomes AHS3073F.

Courses use one of the following possible suffixes, which refer to the following time periods:

- **F**  First Semester
- **S**  Second Semester
- **W**  Full Year – First and Second Semesters

*Note: The course extension does not denote the volume of work in the course or the relative weighting of the course in that year of study. The volume of work is determined by the NQF credit value of the course.*
GENERAL RULES FOR UNDERGRADUATE STUDENTS

[Note: All students must also familiarise themselves with the general rules for all students at UCT, contained in Handbook 3 of this series.]

Registration dates and first-year orientation, late registration and attendance of non-registered students
FGU1.1 All first-year students are required to attend all academic orientation activities. Failure to do so without permission may prevent entry to first semester courses.

FGU1.2 All students are required to renew their registration formally each year by completing registration forms for submission to the Faculty Office. No retrospective registration is allowed.

FGU1.3 All students are required to adhere to the registration dates set out in this Handbook and/or notices sent to students by the University administration in the year preceding registration/re-registration. Students who register late are charged a penalty fine.

FGU1.4 Except by permission of the Senate, a person who has not registered for the current year shall not be allowed to attend academic commitments and shall have no access to University facilities. Students who have not re-registered because they have fees outstanding may apply formally to the Deputy Vice-Chancellor concerned, via the Faculty Office, for a specified “grace period” while they make arrangements to have their fees paid. In cases where students have been granted a grace period and allowed to attend despite not being registered, they may not be given results of any assessments.

Registration of students with professional bodies
FGU2.1 All undergraduate students are required to register with the Health Professions Council of South Africa upon admission to their respective degree programmes and are bound by that Council's regulations.

Final year MBChB students are registered as student interns with the Health Professions Council of South Africa and, upon their qualification, as interns, are bound by that Council's regulations. Qualified students are required to do two years' internship and a year's community service.

Upon qualifying in their final year of study, students in the BSc Audiology, BSc Speech-Language Pathology, BSc Occupational Therapy and BSc Physiotherapy degree programmes are required to register with the relevant professional board of the Health Professions Council of South Africa and do a year's community service before they may practise in their respective disciplines.

FGU2.2 From the second year of study, BSc Physiotherapy students are required to subscribe to the South African Society of Physiotherapy in order to obtain student professional malpractice insurance.

Hepatitis B immunisation
FGU3 It is compulsory for all undergraduate students to have received a full course of
Hepatitis B immunisation by the end of July of their first year of study. Students will not be permitted to register for the second year of study until they have submitted to the Faculty Office written proof that they have received a full course of such vaccination.

Rules for degrees and diplomas, and changes to courses and curricula

FGU4.1 Every candidate for a degree or diploma must attend and complete such qualifying courses or perform such work as may be specified in the rules for that degree, diploma or certificate. The University reserves the right to revise its rules from time to time, and any alteration of or addition to the rules for any degree or diploma shall, on the date specified in the notice of promulgation of such alteration or addition, become binding upon all candidates for that degree or diploma.

FGU4.2 The University has made every effort to ensure the accuracy of the information in its handbooks. However, it reserves the right at any time, if circumstances dictate, to:
(a) make alterations or changes to any of the published details of the courses and curricula on offer; or
(b) add to or withdraw any of the courses or curricula on offer.

Ethical norms, professional behaviour, impairment and fitness to practise healthcare

FGU5.1 Students doing degrees involving clinical work are expected to act in accordance with the ethical norms laid down by the Health Professions Council of South Africa. Students who are found guilty of unprofessional conduct may be required to terminate their registration in the Faculty.

A student who is found to be physically or otherwise impaired may also be required to terminate their registration in the Faculty.

Where a student who qualifies for the award of the degree or certificate for which he/she is registered, or where a student, in the course of his/her studies, following professional assessment, is deemed unfit to practise healthcare, the Dean will report the outcome of such professional assessment to the relevant regulatory body and inform the student accordingly.

[Note: The following definitions apply:

Impaired: The Health Professions Council (HPCSA) defines impairment as “a condition which renders a practitioner incapable of practising a profession with reasonable skill and safety”.

Unprofessional conduct: The HPCSA defines unprofessional conduct as “improper or disgraceful or dishonourable or unworthy conduct or conduct which, when regard is taken to the profession of a person who is registered in terms of this Act, is improper or disgraceful or dishonourable or unworthy”.

In terms of the Medical Dental and Supplementary Health Service Professions Act of 1974, a student or practitioner is required to:
(a) report impairment in another student or practitioner to the Council if he or she were convinced that such other student or practitioner was impaired as defined in the Act;
(b) self-report his or her impairment to the Council if he or she was aware of his or her own impairment or has been publicly informed of being impaired or has been seriously advised by
a colleague to act appropriately to obtain help in view of an alleged or established impairment.

FGU5.2 The University welcomes applications from applicants with special needs. However, there are some disabilities that would prevent someone from completing a particular health sciences curriculum (for example, someone who is deaf may not be able to hear a heartbeat through a stethoscope). For this reason applicants with disabilities are urged to communicate with the Faculty, via the University’s Disability Unit, to establish whether this would apply to them. The Faculty reserves the right to require an applicant (or an admitted student) to undergo a professional assessment to determine the extent and likely impact of a disability on his/her ability to meet the requirements of the curriculum, including such practical training and practice as is required in the health sciences discipline concerned. The University reserves the right to withdraw an offer to an applicant or cancel the registration of a student who fails to declare a disability that is found to be such as to make it impossible for him/her to meet the curriculum requirements in the health discipline concerned.

FGU5.3 Students are expected to behave professionally and dress appropriately. Professional behaviour includes attendance of all scheduled academic activities and respectful behaviour towards teachers, patients and colleagues.

[A guide to professional behaviour and appropriate dress in the hospitals and on the Health Sciences Faculty campus, as well as the processes that are followed to consider possible cases of impairment or of professional misconduct, are given at the back of this handbook.]

Assessment

FGU6.1 The performance of each student is subject to continuous assessment in all courses prescribed for the study programme. The student's academic standard of work performed during any course and, where relevant, the student’s attendance will be taken into account in determining the result obtained by him/her in that course and/or the student’s progression to the next year of study in the programme for which he/she is registered.

FGU6.2 The Senate may permit a student who fails a course if, in its judgement, he or she has performed adequately in the work of the course, to write a supplementary examination. The mark for the supplementary examination is usually added to the class (or year-) mark in order to determine the final result for the course.

Admission, progression, readmission and re-registration of candidates

FGU7.1 Applicants to this Faculty of Health Sciences who have been refused re-registration in this or another faculty will not generally be accepted.

FGU7.2 Except by permission of the Senate, a student shall not be admitted to register in the following academic year of study unless he/she has satisfactorily completed all the courses prescribed and satisfactorily performed all the work required for the preceding year.

FGU7.3 A student in any undergraduate degree who fails one or more courses prescribed in any year of study may be required to repeat some or all of the courses prescribed for that year, including courses he/she may have passed before, unless the Senate exempts him/her from re-attendance and/or re-examination in a course or courses
passed by him/her on grounds that he/she has attained a standard regarded by the Senate as satisfactory in the course/s concerned. Students who are repeating courses which they have passed will be liable for fees for such courses.

FGU7.4 The Senate may refuse to admit an applicant to a study programme leading to registration as a health professional, or may cancel the registration of a student already admitted to such programme, or may refuse to readmit a student registered for such a programme, if he/she:
(a) has not met the minimum admission or readmission requirements set for the course or qualification concerned which include, but are not limited to:
   i. failure to attend academic or clinical service commitments;
   ii. failure to make sufficient academic progress;
(b) has been found guilty of unethical behaviour or unprofessional conduct;
(c) has, following professional assessment, been found unfit to practise healthcare.

FGU7.5 An undergraduate student who is repeating one or more courses in any academic year of study and who applies and is permitted to register for one or more courses from the next academic year of study in addition to the courses which he/she is repeating, will be subject to the readmission rules of the Faculty in respect of the full load of courses for which he/she is registered.

FGU7.6 Except by permission of the Senate, an undergraduate student who fails the same course twice, or who fails a course in a year in which he/she is repeating this or another course (where this is allowed), may be required to withdraw from the programme for which he/she is registered.

FGU7.7 A first year undergraduate student who was admitted to an undergraduate programme in the Faculty subject to his/her obtaining conditional Matriculation Board exemption is required to submit proof of having applied for such exemption before he/she will be allowed to register for the second year of study.

FGU7.8 An undergraduate student who fails any course or courses may be permitted by the Senate to write a supplementary examination and/or may be required to spend additional clinical training time in one or more of the courses failed and repeat the examination/s in the course/s failed.

Examination dates and results
FGU8 It is the responsibility of students themselves to check with the Faculty Office what decisions have been taken by the Faculty Examinations Board/s regarding their academic progress (for example whether they are required to write supplementary examinations or do extra clinical time). Students themselves are also responsible for checking with the Faculty Office the dates, times and venues of examinations and supplementary/deferred examinations (where this applies).

Fieldwork and insurance cover
FGU9.1 Undergraduate students receive clinical instruction in a variety of settings, which include community settings. The Faculty will take every precaution at its disposal to ensure the safety of students who are trained in community settings. While the University arranges professional indemnity and some personal accident insurance cover for all registered students, students who use their own vehicles to travel to fieldwork sites are advised to take out their own insurance cover for their vehicles.

FGU9.2 In many cases, University transport is made available to enable groups of
undergraduate students to attend fieldwork sites that are some distance from the Faculty's campus. Students who are required to attend fieldwork requirements for which Faculty transport is not available will be responsible for their own transport and transport costs to fieldwork sites.

Withdrawal from a programme or course

FGU10.1 Students wishing to withdraw from a study programme for which they are registered must complete the required forms and submit these to the Faculty Office by the specified dates to avoid being charged the full year's fees (see Fees handbook).

FGU10.2 Students wishing to change their curricula (where this is allowed) must do so before the University deadlines for such changes, to avoid being charged a penalty fee (see Fees handbook).

Leave of absence and readmission after absence

FGU11.1 A student may apply for short leave of absence (three to five days) from his/her studies on grounds of illness or bereavement, or in other exceptional cases at the discretion of the course conveners. To apply, he/she is required to submit a completed “short leave of absence” form, which can be collected from the Undergraduate Student Administration Office. Written evidence of the reason for the short leave of absence should be provided.

Students are required to obtain permission for the short leave of absence from all conveners of the courses for which they are registered, and the conveners will sign the form to indicate whether they approve or deny the application for leave of absence. The application form must also be countersigned by the overall Year Convener (in the case of MBChB) or the Head(s) of Department(s) of the course(s) from which he/she wishes to take leave of absence. The completed form is then to be submitted to the Faculty Office.

Taking leave of absence should in no way compromise the attendance requirements of the course. It is important to note that short leave of absence, for whatever reason, is not automatically granted simply because a student has applied for it, and the application may be denied. Should a student choose to take leave without permission being granted, there will be serious consequences for the student upon his/her return from leave; this could include being refused permission to write the final examinations (i.e. being refused a Due Performance certificate).

[Please note:

- In the case of a medical condition or illness, a medical certificate must be obtained. This application is usually retrospective, but may be submitted in advance, e.g. if the student is having an operation.

- A medical certificate offered retrospectively will be accepted only if it was submitted on the day the student returns and if it is clear that the consultation with the doctor took place while the student was sick. A certificate in which a medical practitioner states that the student reports that he/she was ill is not acceptable.

- In the case of bereavement, a student is required to submit a copy of the death certificate upon his/her return from the funeral. This application is usually made beforehand.

- In the case of illness for only a portion of a day, or any other exceptional situations of very short duration, an explanatory letter may be accepted. This application is usually retrospective.]
A student in clinical years of an undergraduate degree who misses more than a week (with permission) and is unable to make up the time may have to repeat the block.

Students may be granted long leave of absence for a specified period for medical or compassionate reasons, usually to the end of the academic year. A student who has been granted leave of absence until the end of the current year and fails to register in the following year will be required to reapply formally for admission to the programme. The student’s academic record and period of absence will be taken into account in deciding whether the student may return. The Faculty Examinations Committee will decide a student’s progression on the basis of his/her performance at the time he/she took leave of absence. (If, for example, a student has transgressed readmission rules at the time he/she went on leave of absence, the Committee may at its next meeting decide to exclude the student.)

Save in exceptional circumstances, no leave of absence shall be granted in the last quarter of the year, or granted retrospectively, or granted more than once. (See General Rules handbook.)

Unbroken registration is normally required to ensure that students' knowledge and/or clinical skills do not deteriorate. In the event that a student has interrupted his/her studies for more than a year, the Faculty, if it has decided that a student may return, may require the student to repeat one or more courses which the student may already have passed. Each case will be considered on merit, and the student’s academic record and period of absence will be taken into account before a decision is made.
RULES AND CURRICULA FOR UNDERGRADUATE PROGRAMMES

BACHELOR OF MEDICINE AND BACHELOR OF SURGERY (MBChB)
[MB014 or MB020 (Intervention Programme)][SAQA ID:3195]

Conveners:
Prof G Fieggen (Department of Surgery) and Prof G Louw (Department of Human Biology)

This degree qualifies the holder thereof, after an internship, community service, and upon registration with the Health Professions Council of South Africa, to practise as a medical doctor. Students doing MBChB courses towards a Cuban degree may find outlines of courses designed specifically for them in the section entitled “Other courses offered” on page 113 in this handbook.

Age limit
FBA1 The degree shall not be conferred until the student has attained the age of 21 years.

Curriculum
The curriculum for the MBChB aims to produce a competent, undifferentiated doctor with the attitudes, knowledge and skills to enter the healthcare field with confidence. This entails a balance between preventive, promotive, curative and rehabilitative healthcare, in a primary healthcare setting. It promotes communication skills, teamwork, professional values and competent clinical practice, in the context of the primary, secondary and tertiary healthcare systems. The educational approach equips students with critical thinking and lifelong learning skills. The curriculum for fifth year has changed with effect from 2015. Some fifth year courses (no longer reflected in the 2015 handbook) will be moved to final year and reflected in the 2016 handbook.

Duration of the degree programme
FBA2 The curriculum for the degree extends over at least six years of full-time study.

Curriculum outline

<table>
<thead>
<tr>
<th>Number</th>
<th>Course</th>
<th>NQF Credits</th>
<th>HEQSF Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>PPH1001F</td>
<td>Becoming a Professional</td>
<td>15</td>
<td>5</td>
</tr>
<tr>
<td>PPH1002S</td>
<td>Becoming a Health Professional</td>
<td>15</td>
<td>5</td>
</tr>
<tr>
<td>HUB1006F</td>
<td>Introduction to Integrated Health Sciences: Part I</td>
<td>30</td>
<td>5</td>
</tr>
<tr>
<td>HUB1007S</td>
<td>Introduction to Integrated Health Sciences: Part II</td>
<td>35</td>
<td>5</td>
</tr>
<tr>
<td>CEM1011F</td>
<td>Chemistry for Medical Students</td>
<td>18</td>
<td>5</td>
</tr>
<tr>
<td>PHY1025F</td>
<td>Physics</td>
<td>18</td>
<td>5</td>
</tr>
<tr>
<td>SLL1044S</td>
<td>Beginners Afrikaans for Medical Students</td>
<td>18</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td><strong>Total credits per year</strong></td>
<td><strong>149</strong></td>
<td></td>
</tr>
</tbody>
</table>

FBA3.2 A student who fails a first or second semester course may be required to register for the Intervention Programme before continuing with the standard programme. [See FBA5 for details about the Intervention Programme.]

FBA3.3 Semesters 3 and 4 (second year)

<table>
<thead>
<tr>
<th>Number</th>
<th>Course</th>
<th>NQF Credits</th>
<th>HEQSF Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>PTH2000W</td>
<td>Becoming a Doctor Part IA</td>
<td>43</td>
<td>6</td>
</tr>
<tr>
<td>SLL2002H</td>
<td>Becoming a Doctor Part IB</td>
<td>18</td>
<td>6</td>
</tr>
</tbody>
</table>
### FBA3.4 Semesters 5 and 6 (third year)

<table>
<thead>
<tr>
<th>Number</th>
<th>Course</th>
<th>NQF Credits</th>
<th>HEQSF Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>PPH3000H</td>
<td>Integrated Health Systems Part IB</td>
<td>25</td>
<td>7</td>
</tr>
<tr>
<td>MDN3001H</td>
<td>Becoming a Doctor Part IA</td>
<td>68</td>
<td>7</td>
</tr>
<tr>
<td>SLL3002H</td>
<td>Becoming a Doctor Part IB</td>
<td>30</td>
<td>7</td>
</tr>
<tr>
<td>PTY3009H</td>
<td>Integrated Health Systems Part IA</td>
<td>59</td>
<td>7</td>
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</table>

**Total credits per year** ........................................ 176

### FBA3.5 Semesters 7 and 8 (fourth year)

<table>
<thead>
<tr>
<th>Number</th>
<th>Course</th>
<th>NQF Credits</th>
<th>HEQSF Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>SLL3003W</td>
<td>Clinical Languages</td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td>PRY4000W</td>
<td>Psychiatry</td>
<td>30</td>
<td>8</td>
</tr>
<tr>
<td>AAE4002W</td>
<td>Anaesthesia Part I</td>
<td>20</td>
<td>8</td>
</tr>
<tr>
<td>OBS4003W</td>
<td>Obstetrics</td>
<td>30</td>
<td>8</td>
</tr>
<tr>
<td>MDN4011W</td>
<td>Medicine</td>
<td>60</td>
<td>8</td>
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<tr>
<td>MDN4015W</td>
<td>Pharmacology &amp; Applied Therapeutics</td>
<td>20</td>
<td>8</td>
</tr>
<tr>
<td>PED4016W</td>
<td>Neonatology</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td>PPH4056W</td>
<td>Health in Context</td>
<td>40</td>
<td>8</td>
</tr>
</tbody>
</table>

**Total credits per year** ........................................ 210

### FBA3.6 Semesters 9 and 10 (fifth year)

<table>
<thead>
<tr>
<th>Number</th>
<th>Course</th>
<th>NQF Credits</th>
<th>HEQSF Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>PED5001W</td>
<td>Caring for Children</td>
<td>40</td>
<td>8</td>
</tr>
<tr>
<td>CHM5003W</td>
<td>Surgery</td>
<td>40</td>
<td>8</td>
</tr>
<tr>
<td>MDN5003H</td>
<td>Pharmacology &amp; Applied Therapeutics</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>CHM5004H</td>
<td>Trauma</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td>OBS5005W</td>
<td>Gynaecology</td>
<td>20</td>
<td>8</td>
</tr>
<tr>
<td>CHM5005H</td>
<td>Orthopaedic Surgery</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td>MDN5005W</td>
<td>Dermatology</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td>MDN5006W</td>
<td>Rheumatology</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td>CHM5007W</td>
<td>Neurology and Neurosurgery</td>
<td>20</td>
<td>8</td>
</tr>
<tr>
<td>CHM5008W</td>
<td>Ophthalmology</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td>CHM5009W</td>
<td>Otorhinolaryngology</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td>CHM5010W</td>
<td>Urology</td>
<td>10</td>
<td>8</td>
</tr>
</tbody>
</table>

**Total credits per year** ........................................ 220

### FBA3.7 Semesters 11 and 2 (sixth year)

<table>
<thead>
<tr>
<th>Number</th>
<th>Course</th>
<th>NQF Credits</th>
<th>HEQSF Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHM6000W</td>
<td>Surgery</td>
<td>41</td>
<td>8</td>
</tr>
<tr>
<td>MDN6000W</td>
<td>Medicine (including Allied Disciplines)</td>
<td>41</td>
<td>8</td>
</tr>
<tr>
<td>OBS6000W</td>
<td>Obstetrics and Gynaecology</td>
<td>41</td>
<td>8</td>
</tr>
<tr>
<td>PED6000W</td>
<td>Paediatrics and Child Health</td>
<td>41</td>
<td>8</td>
</tr>
<tr>
<td>PPH6000W</td>
<td>Family Medicine and Palliative Medicine</td>
<td>21</td>
<td>8</td>
</tr>
<tr>
<td>PRY6000W</td>
<td>Psychiatry</td>
<td>21</td>
<td>8</td>
</tr>
<tr>
<td>AAE6000W</td>
<td>Anaesthesia Part II</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td>PPH6001W</td>
<td>Primary Health Care Elective</td>
<td>20</td>
<td>0</td>
</tr>
</tbody>
</table>
RULES AND CURRICULA FOR UNDERGRADUATE PROGRAMMES

<table>
<thead>
<tr>
<th>Number</th>
<th>Course</th>
<th>NQF Credits</th>
<th>HEQSF Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>MDN6004W</td>
<td>Exit Examination on Procedural Competence</td>
<td>0</td>
<td>8</td>
</tr>
<tr>
<td>PPH6005W</td>
<td>Short Elective</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td>PTY6012W</td>
<td>Forensic Medicine</td>
<td>10</td>
<td>8</td>
</tr>
</tbody>
</table>

Total credits per year: 200

Total credits for programme: 1126

Clinical instruction for MBChB students

FBA4 Clinical instruction may be given in (amongst others) the Groote Schuur, Somerset, Victoria, Mowbray Maternity, Red Cross War Memorial Children's and Princess Alice Orthopaedic Hospitals; and by the staff of the City Park Hospital, Valkenberg Hospital, day hospitals, municipal clinics, the Public Vaccination Station and at various fieldwork sites. Every student is expected to provide him/herself with the required instruments for clinical work.

**Intervention programme [MB020][SAQA ID:3195]**

FBA5.1 A student who fails PPH1001F, HUB1006F, PHY1025F and/or CEM1011F in the first semester of the first year of study may be transferred to the Intervention Programme (Parts 1 and 2).

FBA5.2 A student who fails HUB1007S or PPH1002S in the second semester of the first year of study may be transferred to the Intervention Programme (Part 2).

FBA5.3 A student who entered MBChB having done Chemistry and/or Physics before (usually in a Science degree), and having received an exemption in first semester MBChB for Chemistry and/or Physics, but who is transferred to IP, shall be required to do Chemistry and/or Physics in IP, regardless of how well he/she passed this before he/she enrolled for MBChB.

FBA5.4 A student entering IP who passed Chemistry and/or Physics in the first semester MBChB with 70% or more is exempt from repeating these in IP. A student who obtained 69% and less for Chemistry and/or Physics in first semester MBChB has to repeat these in the Intervention Programme.

FBA5.5 A student who failed PPH1001F Becoming a Professional in semester 1 and is required to enter the Intervention Programme will be required to repeat this course while registered for the Intervention Programme.

FBA5.6 The student in the Intervention Programme must register for, attend and pass the following courses:

**First Year Intervention Programme Part 1**

<table>
<thead>
<tr>
<th>Number</th>
<th>Course</th>
<th>NQF Credits</th>
<th>HEQSF Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>HSE1001S</td>
<td>Fundamentals of Integrated Health Sciences Part I</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>CEM1111S</td>
<td>Chemistry for Medical Students</td>
<td>0</td>
<td>50</td>
</tr>
</tbody>
</table>

**Second Year Intervention Programme Part 2**

<table>
<thead>
<tr>
<th>Number</th>
<th>Course</th>
<th>NQF Credits</th>
<th>HEQSF Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>CEM1011X</td>
<td>Chemistry for Medical Students</td>
<td>18</td>
<td>5</td>
</tr>
<tr>
<td>HSE1002F</td>
<td>Fundamentals of Integrated Health Sciences Part II</td>
<td>105</td>
<td>5</td>
</tr>
<tr>
<td>PHY1025F</td>
<td>Physics</td>
<td>18</td>
<td>5</td>
</tr>
</tbody>
</table>
Attendance, completion of coursework, progression rules and Due Performance requirements

FBA6.1 A student who has successfully completed the Intervention Programme (Parts 1 and 2 or Part 2, as the case may be) will proceed to Semester 2 of the standard curriculum. He/she will register for:

HUB1007S Introduction to Integrated Health Sciences Part II

PPH1002S Becoming a Health Professional.

Once the student has passed these two second semester courses, he/she may proceed to semester 3 (second academic year of the standard curriculum).

FBA6.2 A student who has successfully completed the Intervention Programme and continues with the second semester of the standard curriculum may be exempted from repeating PPH1002S Becoming a Health Professional if he/she has passed this course with more than 65% before entering IP. No exemption is possible from HUB1007S, regardless of how well his course may have been passed before.

FBA6.3 Students must meet the Due Performance (DP) requirements for a course that has such requirements in order to qualify to write the examination in that course. DP requirements reflect their importance in the development of professional attitudes. Continuous assessment, contribution to teamwork and group-work, responsibility for self-learning and respect amongst fellows are key features of the curriculum that are assessed in DP requirements.

FBA6.4 Students are required to obtain an overall pass mark of at least 50% for each course and (unless otherwise specified) if the course includes more than one sub-discipline, to pass each of the subcomponents of the course with at least 50%.

FBA6.5 Apart from continuous assessment throughout each course, students are also assessed and/or examined at the end of a course or clinical block, and are required to undergo such written, clinical and oral examinations at the end of the year as may be prescribed.

FBA6.6 **Failure of a course in Semesters 3 to 6 (second and third academic years of study):**

a. A student who fails any course in the second or third year MBChB may be required to repeat all courses, including those already passed.

b. (b) Except by permission of the Senate, students who repeat the Special Study Module (SSM) will be required to pass the repeat SSM in the same year in which they are repeating other second year courses. They will also be required to complete the repeat SSM in a discipline other than that of their original SSM.

FBA6.7 **Failure of a course in Semesters 7 to 12 (fourth, fifth and final academic year of study):** A student who fails any course in the clinical years (semesters 7 to 12) may be:

a. required to do additional clinical training during the vacation, and undergo a supplementary examination; or

b. required to repeat all courses prescribed for these semesters; or

c. required to repeat those courses for which he/she obtained less than 60%; or

d. refused readmission if he/she falls foul of the readmission rules under FBA7 below.
A student who has passed but obtained less than 55% for any of the courses in fourth year, or who, in the opinion of the Faculty Examination Committee, has otherwise not obtained a sufficiently solid foundation in any clinical course or subcomponents of such course, may be required to undergo additional, remedial clinical training in the disciplines/s concerned during the primary healthcare elective block, and undergo an assessment during and/or at the end of such additional training time.

Students are required to complete a logbook and portfolio for certain clinical year courses by a due date. Should these be incomplete, or should a student despite warning fail to complete the requisite amount of clinical work and/or coursework by the due date in the clinical years of study, the student may be refused access to the final examination in the course/s concerned.

A student may be refused permission to renew his/her registration in the following semester, or may cancel his/her registration, if he/she:
(a) fails a course which he/she is repeating;
(b) is in the Intervention Programme and fails any course in it;
(c) fails to complete the courses prescribed for semesters 1 and 2 (first year) by the end of his/her second year of study;
(d) fails to complete the courses prescribed for the first six semesters (years 1 to 3) by the end of his/her fifth year of study;
(e) fails to complete the courses prescribed for the first eight semesters (years 1 to 4) by the end of his/her sixth year of study;
(f) in any one year fails more than half the course load for which he/she is registered;
(g) in a year in which he or she is repeating a course, fails any course;
(h) will be unable to complete the whole degree within eight years of study;
(i) has been found guilty of unprofessional behaviour or has been found to be impaired.

A student who is permitted to renew his/her registration despite not having met the requirements set out above may be required to follow a specific curriculum and may be set specific performance and readmission criteria determined by the Senate.

This degree may be awarded with distinction, with first class honours or with honours.

MBChB students who wish to apply to interrupt their MBChB studies in order to do a BMedScHons specialising in Applied Anatomy, Biological Anthropology, Bioinformatics, Cell Biology, Physiology, Exercise Science, Human Genetics, Medical Biochemistry or Infectious Disease and Immunology, shall generally be required to have passed third year MBChB with an average of at least a 70% in the following courses, with no less than 60% for any single course:
RULES AND CURRICULA FOR UNDERGRADUATE PROGRAMMES

- CEM1011F or CEM1111S and CEM1011X Chemistry for Medical Students (the latter two chemistry courses are taken by Intervention Programme students); and
- PHY1025F Physics; and
- HUB1006F and HUB1007S Introduction to Integrated Health Sciences I and II or (for Intervention Programme Students) HSE1001S and HSE1002F Fundamentals of Integrated Health Sciences I and II; and
- HUB2017H, LAB2000S and LAB3009H Integrated Health Systems I and II; and
  AAE2001S/PED2001S/CHM2001S/RAY2004S Special Study Module; and
- LAB3020W, Molecular Medicine; or
  (a) to have passed third year MBChB as well as an approved third year level Bachelor of Science course with an average of at least 70%; and
  (b) to have undergone a successful interview with a selection committee.

Intercalated BMedScHons, Master’s and PhD studies for MBChB students

FBA9.1 MBChB students who wish to apply to interrupt their MBChB studies in order to do a BMedScHons specialising in Applied Anatomy, Biological Anthropology, Bioinformatics, Cell Biology, Physiology, Exercise Science, Human Genetics, Medical Biochemistry or Infectious Disease and Immunology, shall generally be required to have passed third year MBChB with an average of at least a 70% in the following courses, with no less than 60% for any single course:
- CEM1011F or CEM1111S and CEM1011X Chemistry for Medical Students (the latter two chemistry courses are taken by Intervention Programme students); and
- PHY1025F Physics; and
- HUB1006F and HUB1007S Introduction to Integrated Health Sciences I and II or (for Intervention Programme Students) HSE1001S and HSE1002F Fundamentals of Integrated Health Sciences I and II; and
- HUB2017H, LAB2000S and LAB3009H Integrated Health Systems I and II; and
  AAE2001S/PED2001S/CHM2001S/RAY2004S Special Study Module; and
- LAB3020W, Molecular Medicine; or
  (a) to have passed third year MBChB as well as an approved third year level Bachelor of Science course with an average of at least 70%; and
  (b) to have undergone a successful interview with a selection committee.

FBA9.2 MBChB students doing an intercalated honours degree who wish to continue with MBChB after completing the honours programme shall be required, whilst registered for the BMedScHons programme concerned, to also register for and pass MDN3003H Introduction to Clinical Practice II.

FBA9.3 On completing the honours programme, the student is permitted to return to the remaining years of the MBChB after graduating with the BMedScHons.

FBA9.4 A student in the MBChB who holds a BMedScHons may be admitted concurrently to a research master’s in the clinical years of the MBChB on recommendation of the Faculty and with permission of the Senate. A student thus registered whose research dissertation is of sufficient scope may subsequently be permitted, on application
and with special permission of the Senate, to upgrade to a PhD. The Faculty may require the student to spread the load of the clinical years of the MBChB whilst registered for research degree studies. The student will graduate with the MBChB when the requirements for that degree have been met, and continue thereafter with the PhD.

Course outlines for MBChB curriculum

**PPH1001F  BECOMING A PROFESSIONAL**
15 NQF credits at HEQSF level 5  
**Convener:** L Olckers  
**Course entry requirements:** None  
**Course outline:**  
This course introduces first year students in all health sciences professions to professionalism and professional conduct. The course aims to promote the conduct, knowledge, attitudes and values associated with being a professional and a member of a professional team. Students learn interpersonal skills, including being non-judgemental, empathetic, ethical and respectful of human rights when working with colleagues, clients, patients and community members who may have different values and traditions. Students learn theory on interviewing and interpersonal skills, which is applied in simulated and real interviews; theory related to group and social roles applied in simulated experiences to build team membership and leadership skills; and critical analysis of and reflection on professional conduct, diversity, health and human rights. The educational approach is participatory and experiential and all students are required to engage actively in small learning groups. Academic, digital and information literacies are systematically integrated from the outset. The course also includes a workshop on HIV-AIDS, designed to introduce students to the relevance of HIV-AIDS issues in their private and professional lives.  
**DP requirements:** Attendance at all small group learning sessions and other academic commitments, including the HIV-AIDS workshop; completion of all set assignments and assessment activities.  
**Assessment:** Continuous, performance-based assessment provides students with regular feedback. In-course assignments comprise 60% of the total mark. The final, summative exam assessment makes up 40% of the total mark.

**PPH1002S  BECOMING A HEALTH PROFESSIONAL**
15 NQF credits at HEQSF level 5  
**Convener:** L Olckers  
**Course entry requirements:** PPH1001F  
**Course outline:**  
This course builds on the knowledge and skills gained in PPH1001F Becoming a Professional. Focus is on the primary health care approach and disability. The course equips students to work collaboratively on a community-oriented project based on the primary healthcare principles and approach including comprehensive healthcare (promotive, preventive, curative, rehabilitative and palliative care within the primary, secondary and tertiary levels of care), intersectoral collaboration, community involvement, and accessibility of and equity in healthcare. Students are required to apply the knowledge, skills and values from PPH1001F to develop an appreciation of the contribution of all healthcare professionals to the promotion, maintenance and support of health and the healthcare of individuals, families and communities within the context of disability. The educational approach is participatory and project-based and all students are required to engage actively in the project and in small learning groups. Academic, digital and information literacies are systematically integrated from the outset. The course includes a basic life support skills workshop.  
**DP requirements:** Attendance at all group sessions, community and health service site visits and the life support skills workshop; completion of all assignments and assessment activities.
Assessment: Continuous, performance-based assessment provides students with regular feedback and comprises 60% of the total mark. The final summative assessment makes up 40% of the total mark.

HUB1006F  INTRODUCTION TO INTEGRATED HEALTH SCIENCES PART 1
30 NQF credits at HEQSF level 5
Convener: Dr K Bugarirth, Dr G Gunston and Dr F Amien
Course entry requirements: Attendance of and participation in all HUB1006F-related activities in the orientation programme such as “Introduction to Life Cycle”, “Introduction to PBL” and the “Health and Safety” seminar
Course outline:
The theme of the course is the human life cycle. Students are introduced to the key physical, psychological, social and developmental factors and issues that shape the human life cycle from conception to death. Problem-based learning (PBL) is the central learning activity of the course. Each student is allocated to a PBL group that meets regularly to discuss and analyse a number of carefully designed cases illustrating the key objectives of the course. In addition, students are provided with a range of activities (including lectures and practical sessions) to support their learning. At the conclusion of this course, students will have gained an introductory overview of the human life-span as well as the necessary core knowledge and skills from a range of disciplinary domains (e.g. anatomy, physiology, psychology and sociology).

DP requirements: Attendance of all academic activities, including lectures, problem-based learning sessions, tutorials, workshops, and BHS practical sessions. Submission of all written assignments on time and completion of all in-course assessment activities. Students may not miss any PBL sessions, tutorials, workshops or BHS practical sessions without the written permission of the academic staff responsible for these activities.
Assessment: Both in-course and end-of-course assessments include written and practical components. The written components use a case-based format. In contexts where students are unable to write an in-course assessment, for what is deemed a legitimate reason, a deferred assessment may be given. A medical certificate on ground of illness, or appropriate supporting documentation for all approved non-medical reasons, must be submitted when applying for a deferred assessment. In instances where students fail to provide legitimate reasons, with supporting documentation, for being unable to complete an assessment activity, or fail to take a scheduled deferred assessment, a mark of zero will be given for that assessment. A student will not be allowed to miss more than one assessment or have more than one opportunity to take a deferred assessment. In-course assessments are weighted 40% (practical tasks and test: 10%; written class tests: 30%) and of end-of-course assessments are weighted 60% (written theory examination: 50% and structured practical examination: 10%). Sub-minima may be applicable.

HUB1007S  INTRODUCTION TO INTEGRATED HEALTH SCIENCES PART II
35 NQF credits at HEQSF level 5
Convener: Dr G Gunston, Dr K Bugarirth and Dr F Amien
Course entry requirements: PPH1001F, HUB1006F, CEM1011F and PHY1025F
Course outline:
The course introduces students to key principles and concepts of the basic sciences of anatomy, biochemistry and physiology, and of public health and family medicine. Problem-based learning (PBL) is the central learning activity of the course. Each student is allocated to a new PBL group that meets regularly to discuss and analyse a number of carefully designed cases illustrating the key objectives of the course. In addition, students are provided with a range of activities to support their learning (including lectures, practical sessions, tutorials and workshops). At the conclusion of this course, students will have acquired an integrated understanding of key South African health challenges within a broader social and environmental context; the epidemiology of the major causes of disease in South Africa; the basic structure and function of all organ systems of the human body; and the basic structure and function of the biochemical components of the human body.
DP requirements: Attendance of all academic activities, including lectures, problem-based learning sessions, tutorials, workshops, and BHS practical sessions; submission of all written assignments on time and completion of all in-course practical activities. Students may not miss any scheduled activities without the written permission of the academic staff responsible for these activities. Students are required to apply for short leave of absence and submit appropriate supporting documentation should they miss a scheduled activity due to illness or approved non-medical reasons.

Assessment: Assessment includes in-course and end-of-course assessments. Regular self-assessment activities also provide feedback to students on their progress. Assessments include written, computer-based and practical components. Written components use a case-based format. When students are unable to write an assessment for what is deemed a legitimate reason, a deferred assessment may be given. A medical certificate on ground of illness, or appropriate supporting documentation for all approved non-medical reasons, must be submitted when applying for a deferred assessment. Should a student fail to provide legitimate reasons, with supporting documentation, for being unable to complete an assessment activity, or fail to take a scheduled deferred assessment; a mark of zero will be given for that assessment. A student will not be allowed to miss more than one assessment or have more than one opportunity to take a deferred assessment. In-course assessments are weighted 40% and end-of-course assessments are weighted 60% of the final course mark. Sub-minima may apply. If a supplementary examination is awarded, the year mark is included in the final mark.

CEM1011F CHEMISTRY FOR MEDICAL STUDENTS
(Faculty of Science)
18 NQF credits at HEQSF level 5
Convener: Dr S Wilson
Course entry requirements: None
Course outline:
This introductory course is designed to provide first year medical students with knowledge of the fundamental aspects of chemical theory. The course also serves as a diagnostic tool to explore students' scientific knowledge and the possible need for intervention. It comprises 60 formal contact hours during which selected topics in physical and organic chemistry relevant to biochemistry, physiology, pharmacology, chemical pathology and medical microbiology are covered. Topics have been selected to equip students with the basic understanding of those key chemical principles they require for the medical programme. Formal contact sessions are augmented by a practical course and weekly tutorials. Specific support activities are provided to students who show difficulty in understanding the scientific domain. During the practical component, students are required to demonstrate that they are able to use a variety of laboratory techniques with precision and accuracy. The practical course also seeks to expose students to the methods used in the acquisition, recording and manipulation of scientific data and expects students to derive inferences from such data.
Lecture times: Monday - Thursday, 1st period; Friday, 1st & 5th period
DP requirements: Attendance and completion of practical sessions; attendance of tutorial sessions and writing weekly tutorial tests; completion of worksheets; writing class tests and taking the practical examination.
Assessment: The class record contributes 45% and comprises a practical record (10%); tutorial tests (5%); two class tests (20%); and a practical examination (10%). The summative examination contributes 55% and consists of a three-hour written theory examination.

PHY1025F PHYSICS 1025
(Faculty of Science)
18 NQF credits at HEQSF level 5
Convener: Dr S W Peterson
Course entry requirements: None
Course outline:
The course aims to provide a foundation in physics for later courses in the biological and physical sciences in the medical curriculum. Topics covered include mathematical skills for physics; Newton's laws of translational motion, force, friction, work and energy; bodies in static equilibrium; density and pressure in fluids; fluid flow, viscosity, temperature, gas laws, heat and heat transfer; first law of thermodynamics, human metabolism and first law; wave motion, transverse and longitudinal waves, interference of waves; sound, ear's response to sound, Doppler effect, ultrasound and medical imaging; electric charge and field, electric potential and potential difference, electric current, resistivity and simple circuits; light, reflection and refraction, thin lenses, the human eye.

DP requirements: Attendance of all scheduled tutorials and practical sessions; completion of all set written course activities (i.e. tutorial assignments, practical reports and course tests); and a minimum class record of 35%.

Assessment: Coursework counts 40% and comprises of two class tests (15% each) and a laboratory record (10%); and the final examination counts 60%.

SLL1044S  BEGINNERS' AFRIKAANS FOR MBCHB
Offered in the Faculty of Health Sciences
18 NQF credits at HEQSF level 5
Convener: Dr M Lewis

Course entry requirements: This course is available only to students who have no prior knowledge of Afrikaans and who are registered for the MBChB degree. Students with limited knowledge of Afrikaans will be allowed entry to the course at the discretion of the course convener.

Course outline: This is a course on the basic grammar of Afrikaans. It prepares beginner students in Afrikaans for the SLL2002H (Becoming a Doctor Part IB) course and is taken a year prior to SLL2002H registration. By the end of the course, students are ready to apply the acquired grammatical knowledge in a medical context.

Lecture times: Arranged internally.

DP requirements: Attendance of all lectures.

Assessment: One oral summative assessment, for which students receive a PA (pass) or F (fail) grade.

PTY2000S  INTEGRATED HEALTH SYSTEMS PART IB
35 NQF credits at HEQSF level 6
Convener: Dr J Ramesar

Course entry requirements: HUB2017H

Course outline: The integrated courses HUB2017H, PTY2000S and PTY3009H extend across years 2 and 3 and provide a detailed understanding of normal structure and function of the human body and consequences of disease. Students learn core material in the basic health sciences (gross anatomy, embryology, histology, cell biology, medical biochemistry, molecular biology and physiology) and infectious diseases (medical microbiology, virology and immunology); they study changes in normal structure and function due to disease (anatomical pathology, chemical pathology and haematology) and learn principles of pharmacology/therapeutics and early management. Emphasis is placed on psycho-social matters relating to each case, drawing in relevant aspects of family medicine, primary healthcare, public health, and mental well-being. Students also learn clinical skills, interpretation of data, professional values and ethics, and procedural skills related to the cases studied. They learn about the impact of illness and disease on the individual, family and society, and the role of the healthcare services in alleviating illness. Case-based, group learning is supported by lectures, practical sessions and stand-alone modules. Students are guided to develop key life skills required for an effective healthcare professional, including a multidisciplinary team approach. Cases have relevance to healthcare issues regionally and nationally.

DP requirements: Attendance of all problem-based learning sessions, tutorials, stand-alone units and practical sessions; completion of all set assignments and all assessment activities.
**Assessment:** HUB2017H and PTY2000S are assessed together in a final examination at the end of second year. Students must achieve an overall pass in semesters 3 and 4 (year 2) in order to progress to year 3. Students are required to complete a series of in-course assessments during semesters 3 and 4 that contribute 60% of the total mark by the end of semester 4. A summative assessment is held at the end of the year that contributes 40% of the total mark for year 2. March class test: 10%; June class test: 25%; September class test: 15%; November examination: 40%; Language of Medicine assessment: 5%; and portfolio: 5%. A student who fails all class tests in the year and who achieves a failing year mark will not be considered eligible for a supplementary examination, irrespective of the mark achieved. Students who fail the year and are granted a supplementary examination will have their supplementary results calculated in exactly the same way as their original course mark. The only difference is that the marks from the supplementary exam will substitute for the original November examination mark. The original March, June and September class test marks and portfolio of work mark will be retained in calculating the final supplementary results.

**PPH2000W BECOMING A DOCTOR PART 1A**

SLL2002H Becoming a Doctor IB and SLL3002H Becoming a Doctor Part IIB are integrated with the course content of PPH2000W and PPH3000H, but separate course outlines are given below.

43 NQF credits at HEQSF level 6
Convener: Dr N Parker and Dr R Weiss
Course entry requirements: All year 1 MBChB courses

Course outline:
This course integrates family medicine, clinical skills, and language and communication and builds on what has been learnt in BP and BHP in 1st year. Students learn and practise interviewing skills, history-taking and physical examination skills and learn concepts of professionalism and human rights. They use diagnostic equipment and apply basic skills essential for diagnosis. They use reflective journals to record their personal development as professionals. They are exposed to primary, secondary and tertiary care in both the public and private sectors. They learn appropriate clinical skills on simulated models and peers and later on patients. They also learn language and communication skills and, by the end of the course, are able to obtain the main points of history from a patient in English, isiXhosa and Afrikaans. The family medicine strand develops understanding of delivery of healthcare, its management and organisation, and aspects of health promotion and disease. Students gain practical experience of the doctor-patient relationship, of a bio-psycho-social approach to patient care and the consultation process, and develop skills in the basic clinical examination of patients within a community setting. Tutorials integrate the learning of clinical skills with language acquisition and understanding of cultural aspects of patient interaction. Later, learning takes place in community practices, clinics and other centres, where students interact with patients.

DP requirements: Attending all clinical skills sessions, all language and communication activities, tutorials and practicals, all family medicine tutorials and off-campus visits; completion of portfolios of learning; and undergoing assessment activities. Students may not miss more than two sessions in each of family medicine, languages, or clinical skills during semesters 3 to 5 without official leave of absence or a medical certificate. Students will be marked as absent for the sessions which they miss without producing a valid medical certificate.

Assessment: An integrated, structured clinical examination (ISCE) covers the three components of the course. An ISCE tests practical skills, the ability to conduct an appropriate consultation, to communicate with patients and peers, and to communicate (in English, Afrikaans and isiXhosa) at a level sufficient for a basic sharing of health-related information. Students also complete a portfolio of learning using a reflective model. These portfolios are assessed. In-course assessments (assignments, written assessments and ISCEs held during and at the end of semester 3) constitute 50% of the final mark for PPH2000W. The ISCEs, written assessment and assignments during and at the end of semester 4 constitute 50% of the final PPH2000W mark. Each of the course components contributes equally to the course mark and must be passed independently. If a student fails one of the components, a maximum mark of 45% (where the fail mark is ≤ 45%) or 46% to 49% (where the fail mark is >45%) is recorded as the final mark. If a student passes the
supplementary examination (if awarded) for the failed component(s), the original pass mark for the component(s) is used to calculate the final mark.

**SLL2002H  BECOMING A DOCTOR: PART IB**  
Offered to students registered for the MBChB degree only.  
18 NQF credits at HEQSF level 6  
**Convener:** Drs I van Rooyen (Afrikaans) and (Xhosa) TBA  
**Course entry requirements:** SLL1044S or equivalent  
**Course outline:**  
The course teaches basic Afrikaans and isiXhosa communication skills for doctors. The content of the languages course is synchronized with the content of PPH2000W (*Becoming a Doctor Part IA*). The focus of the course is on communication skills and specifically on those skills required for a doctor-patient interaction, including skill in asking questions and in effectively entering into dialogue with the patient. The course also deals with the unique pronunciation and stylistic variants of individual patients, culture-specific words and expressions, and the possible ‘indigenisation’ of language.  
**Lecture times:** 6th – 8th period, Tuesdays to Fridays.  
**DP requirements:** Completion of all in-course assessments. Students may not miss more than two class attendance sessions per language.  
**Assessment:** Two oral summative assessments in semester 3 (50%) and two oral summative assessments in semester 4 (50%).

**HUB2017H  INTEGRATED HEALTH SYSTEMS PART IA**  
57 NQF credits at HEQSF level 6  
**Convener:** Dr C Slater  
**Course entry requirements:** HUB1007S. Attendance of all academic activities during Orientation Week.  
**Course outline:**  
The integrated courses HUB2017H, LAB2000S and LAB3009H extend across years 2 and 3 and provide the student with a detailed understanding of the normal structure and function of the human body and how these are affected when the body suffers from disease. Students learn core material in the basic sciences (gross anatomy, embryology, histology, cell biology, medical biochemistry, molecular biology and physiology) and infectious diseases (medical microbiology, virology and immunology); changes in normal structure and function caused by disease (anatomical pathology, chemical pathology and haematology); and the principles of pharmacology/therapeutics and early management. Emphasis is placed on psychosocial matters relating to each case, drawing in relevant aspects of family medicine, primary healthcare, public health, and mental well-being. Students also learn clinical skills, interpretation of data, professional values and ethics, and certain procedural skills directly related to the cases studied. They study the impact of disease on the individual, family and society, and the role of the healthcare services in alleviating illness. Case-based group learning is supported by lectures, practical sessions and stand-alone modules. Students learn key life skills required of an effective healthcare professional, including a multidisciplinary team approach. The cases all have relevance to healthcare issues regionally and nationally.  
**DP requirements:** Attendance of all problem-based learning sessions, tutorials, stand-alone units and practical sessions; completion of all set assignments and assessment activities.  
**Assessment:** HUB2017H and LAB2000S are assessed together in a final examination at the end of second year. Students must achieve an overall pass in semesters 3 and 4 (year 2) in order to progress to year 3. Students are required to complete a series of in-course assessments during semesters 3 and 4 that contribute 60% of the total mark by the end of semester 4. A summative assessment is held at the end of the year that contributes 40% of the total mark for year 2. March class test: 10%; June class test: 25%; September class test: 15%; November examination: 40%; Language of Medicine assessment: 5%; and portfolio: 5%. A student who fails all class tests in the year and who achieves a failing year mark will not be considered eligible for a supplementary examination, irrespective of the mark achieved. Students who fail the year and are granted a
supplementary examination will have their supplementary results calculated in exactly the same way as their original course mark. The only difference is that the marks from the supplementary exam will substitute for the original November examination mark. The original March, June and September class test marks and portfolio of work mark will be retained in calculating the final supplementary results.


**SPECIAL STUDY MODULE**
16 NQF credits at HEQSF level 6

**Convener:** Dr V Zweigenthal

**Course entry requirements:** All first year MBChB courses

**Objective:** The Special Study Module (SSM) is designed to give students an opportunity for independent supervised work in an area of interest and develop skills for rigorous scientific medical practice.

**Course outline:**
The Special Study Module (SSM) comprises a compulsory four-week period of supervised study, designed to complement the core curriculum and to broaden the learning experience. During this experience, each student undertakes a project designed to give opportunities to explore particular interests and develop intellectual and practical skills in a selected subject area. Each student selects one module from a list of modules offered by different Health Sciences departments. SSMs cover a wide range of topics, including basic medical science, pathology, clinical science, behavioural science, epidemiology, and community health. An SSM may take the form of data interpretation, a literature review, a patient record review, a survey, a practical project (language/music/other) or a laboratory-based study. To encourage depth of learning, students work individually or in small groups, and with a designated supervisor. Where human participants are the subject of the SSM, students are required to abide by the ethical requirement obtained for the project, adopt an ethical approach and obtain informed, signed consent from research participants.

**DP requirements:** Attendance of the library training session. Attendance and completion of specified learning objectives decided upon by the student and supervisor at the start of the SSM.

**Assessment:** Assessment in SSMs is based on a referenced, written report of 2500 – 3000 words, relating to the field of work and subject to a formative process throughout the SSM. Performance is marked using a criterion-based marking schedule, which is described in the SSM information booklet. A random selection of all SSM reports (and those with borderline or very high or low marks), is double-marked by the convener and a second marker (either another member of staff in that unit, and/or the overall convener, or the external examiner). The SSM Moderating Board decides the final mark. Students who fail the SSM are required to re-submit an improved written report at the end of the year.

**PPH3000H** BECOMING A DOCTOR PART II A

*SLL2002H Becoming a Doctor IB and SLL3002H Becoming a Doctor Part IIB are integrated with the course content of PPH2000W and PPH3000H but separate course outlines are given below.*

25 NQF credits at HEQSF level 7

**Convener:** Dr N Parker and Dr R Weiss

**Course entry requirements:** All year 2 MBChB courses

**Course outline:**
This course integrates family medicine, clinical skills, and language and communication and builds on what has been learnt in BP and BHP in 1st year and BaDr Part IA in 2nd year. Students learn the skills required to work with patients, including interviewing skills, history-taking and physical examination, concepts of professionalism and human rights. They learn how to use diagnostic equipment and apply other skills essential for diagnosis. The course aims to develop reflective, empathic and knowledgeable practitioners. Students are exposed to primary, secondary and tertiary care in the public and private sectors. They learn appropriate clinical skills, on simulated models, peers and patients. By the end of the course, students are able to obtain the main points of history
from a patient in English, isiXhosa and Afrikaans. The family medicine strand aims to develop understanding of healthcare delivery and its management and organisation; aspects of health promotion and disease; to gain practical experience of the doctor-patient relationship; bio-psycho-social approach to patient care and the consultation process; and to develop skills in the basic clinical examination of patients within a community setting. Tutorials integrate the learning of clinical skills with language acquisition and understanding of cultural aspects of patient interaction. Learning takes place in community practices, clinics and other centres, where students are given opportunities to interact with patients.

**DP requirements:** Attending all clinical skills sessions, language and communication activities, tutorials, and practicals, all family medicine tutorials and off-campus visits; completing the portfolios of learning and undergoing assessment activities. Students may not miss more than two sessions in each of family medicine, languages or clinical skills during semesters 3 to 5 without official leave of absence or a medical certificate.

**Assessment:** An integrated, structured clinical examination (ISCE), covering the three course components forms the basis of assessment. The ISCE tests practical skills, the ability to conduct an appropriate consultation, to communicate with patients and peers, and to communicate (in English, Afrikaans and isiXhosa) at a level sufficient for a basic sharing of health-related information. Students also complete a portfolio of learning using a reflective model. The portfolios are assessed. The in-course assessments (assignments, written assessments and ISCEs held during and at the end of semester 5) constitute the final semester 5 mark. Each of the course components (family medicine, clinical skills and languages) must be passed independently. Where a student has failed one of the components, a maximum mark of 45% (where the fail mark is < or = 45%) or 46% to 49% (where the fail mark is >45%) is recorded. If a student passes the supplementary examination (if awarded) for the failed strand/s, the original pass mark for the strand/s will be used to calculate the final mark.

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**MDN3001H  INTRODUCTION TO CLINICAL PRACTICE**

68 NQF credits at HEQSF level 7  
**Convener:** Dr M Karjiker and M Jansen  
**Course entry requirements:** PPH2000W, HUB2017H and PTY2000S  
**Course outline:**  
This course is designed to allow students to consolidate and broaden the clinical skills, knowledge and behaviours acquired in the Becoming a Doctor courses and to apply the principles learnt in the Integrated Health Systems courses to clinical practice. Students start acquiring professional life skills and behaviours while in the wards. They rotate through five clinical attachments of three weeks each, covering the domains of adult health, women’s health, mental health, perinatal health and a clinical skills module. Students interview, examine and assess patients in hospitals and healthcare institutions. These clinical attachments are complemented by a lecture and tutorial programme introducing the principles of ethics, therapeutics and genetics.  

**DP requirements:** Attendance of clinical tutorials and activities and all clinical skills training sessions; demonstration of competence in key resuscitation skills; ability to identify, interview, examine, assess and present cases to the satisfaction of the lecturer in charge of each clinical attachment; attendance of ethics and all other tutorials; a satisfactory portfolio of clinical teaching; satisfactory completion of all set assignments, including reading, self-study, written and oral presentations.  

**Assessment:** An OSCE is done at the end of the clinical skills block. A summative assessment at the end of the course is based on an MCQ examination covering all the clinical modules and teaching done in tutorials and lectures and an oral examination which is clinically based and includes an assessment of the students’ portfolio. Students are required to pass all components i.e. the OSCE, the MCQ and the oral/portfolio examinations independently to pass the course. The supplementary examination (should you be eligible for this) will take place during the first week of December.
SLL3002H  BECOMING A DOCTOR: PART 2B
Offered to students registered for the MBChB degree only.
30 NQF credits at HEQSF level 7
Convener: Drs I van Rooyen (Afrikaans) and (Xhosa) TBA
Course entry requirements: SLL2002H
Course outline:
This course comprises “Afrikaans and Xhosa Communication Skills for Doctors” and further develops the skills learnt in the second year. Attention is given to history-taking within a clinical context and responses to individual speech acts. At the end of this course, students should be able to communicate with a speaker of Afrikaans or Xhosa about common everyday topics and elicit and understand information from a patient using case-specific terminology; and should have an awareness of some cultural issues that emanate from cross-cultural communication.
Lecture times: Arranged internally.
DP requirements: Completion of all in-course assessments. Students may not miss more than two sessions per language.
Assessment: Two oral summative assessments counting 70% and 30% respectively.

SLL3003W  CLINICAL LANGUAGE
Offered to students registered for the MBChB degree only.
1 NQF credits at HEQSF level 7
Convener: Drs I van Rooyen (Afrikaans) and (Xhosa) TBA
Course entry requirements: SLL3002H
Course outline:
The aim of this course is to develop oral proficiency in Afrikaans and isiXhosa within a clinical environment, so that students will be proficient in Afrikaans and isiXhosa relating to the history-taking pertaining to a patient’s primary presenting complaint and other relevant details. By the end of the course, students are able to obtain the main points of history from a patient in English, isiXhosa and Afrikaans.
Lecture times: Arranged internally.
DP requirements: 100% class attendance. Students who miss a session will be required to write a case report of a patient interviewed and present this to a facilitator for oral discussion in Afrikaans/Xhosa.
Assessment: One summative assessment, which includes an interview in Afrikaans as well as an interview in Xhosa. The marks contribute towards the MDN4011W end-of-block clinical exam mark.

PTY3009H  INTEGRATED HEALTH SYSTEMS PART II
59 NQF credits at HEQSF level 7
Convener: Prof G Louw
Course entry requirements: PTY2000S
Course outline:
The integrated courses HUB2017H, PTY2000S and PTY3009H extend across years 2 and 3 and provide a detailed understanding of normal structure and function of the human body and consequences of disease. Students learn core material in the basic sciences (gross anatomy, embryology, histology, cell biology, medical biochemistry, molecular biology and physiology) and infectious diseases (medical microbiology, virology and immunology); they study changes in normal structure and function due to disease (anatomical pathology, chemical pathology and haematology) and learn principles of pharmacology/therapeutics and early management. Emphasis is placed on psycho-social matters relating to each case, drawing in relevant aspects of family medicine, primary healthcare, public health, and mental well-being. Students also learn clinical skills, interpretation of data, professional values and ethics, and procedural skills related to the cases studied. They learn about the impact of illness and disease on the individual, family and society, and the role of the healthcare services in alleviating illness. Case-based, group learning is supported by lectures,
practical sessions and stand-alone modules. Students are guided to develop key life skills required for an effective healthcare professional, including a multidisciplinary team approach. Cases have relevance to healthcare issues regionally and nationally.

**DP requirements:** Attendance of all problem-based learning sessions, tutorials, stand-alone units and practical sessions; completion of all set assignments and assessment activities.

**Assessment:** Assessment tasks include written papers, computerised tests, practical examinations and a portfolio of work that comprises written assignments, computerised EMI and MCQ tests, oral assessments and practical book work. Regular self-assessment activities provide feedback to students on their progress. In year 3, all the in-course assessments comprise 45% of the total final mark. The final examination at the end of year 3 constitutes 55% of the total final mark. The weightings for the final mark are: 25% March class test, 15% neurosciences class test, 5% portfolio and 55% final examination.

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**PRY4000W  PSYCHIATRY**
30 NQF credits at HEQSF level 8

**Convener:** Dr Q Cossie

**Course entry requirements:** All third year MBChB courses

**Course outline:**
Clinical psychiatry is taught in year 4 at Valkenberg, Lentegeur, Groote Schuur and Red Cross Hospitals in a combined five-week block with medical sub-specialities, preceded by a three-week therapeutics block. At the first meeting, students are given a list of psychiatric disorders, conditions and special skills that they will be expected to know by the end of the block. They are expected to attend all seminars and case presentations. Students are in the wards from 08h30 until 12h30 and from 14h00 to 16h30. Their clinical duties under supervision include the assessment and clerking of patients; attending ward rounds where they present their findings; and the follow-up and management of these patients, where possible. They are required to keep a portfolio (extended descriptive logbook) of all patients seen and this is used in their end-of-block and end-of-year assessments. The basics of psychiatry (general psychiatry, child and adolescent psychiatry, womens health, medico-legal issues pertaining to psychiatry, addictionology and community psychiatry) are covered in a mixture of lectures, seminars, case presentations and self-directed learning exercises. This is taught in small groups of 6 to 10 students and whole-group activities during the block.

**DP requirements:** 100% attendance and completion of all requisite clinical work and other coursework activities by the due dates.

**Assessment:** The end-of-block examination includes an assessment of psychiatric skills and knowledge obtained during this block. Part of the end-of-year examination is integrated with other disciplines. The end-of-block assessment comprises a written paper (30%), a clinical oral (10%), the student’s block participation (10%) and a written case report (15%). The end-of-year examination consists of a written paper (MCQ/EMI) (20%) and a portfolio/oral assessment (15%), run in conjunction with other disciplines.

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**AAE4002W  ANAESTHESIA PART I**
20 NQF credits at HEQSF level 8

**Convener:** Dr R Haylett and Dr R Nieuwveld

**Course entry requirements:** All third year MBChB courses

**Course outline:**
Anaesthesia is formally taught in the fourth and sixth years of study with a case studies component in the fifth and sixth year Surgery rotations.

The four-week fourth year course is integrated with the Acute Care Medicine and Therapeutics courses; and is based on tutorials with clinical teaching and practical training in the operating theatres.

In the sixth year, a two-week course of practical clinical instruction is presented during the combined Forensic Medicine and Anaesthesia rotation.

In addition, in fifth and sixth year, students are required to include an anaesthesia assessment in all surgical clinical case studies done during the General Surgery rotation; concentrating on the
preoperative workup, potential anaesthesia strategies and alternatives, and the postoperative intravenous fluid and pain management.

The fourth to sixth year learning in anaesthesia are complementary.

**Core learning outcomes:** The student is expected to acquire the basic knowledge and skills required for safe clinical anaesthesia, including the ability to perform preoperative assessments and render appropriate postoperative care. There is an emphasis on safe anaesthesia practice with a focus on professional behaviour appropriate to the role of the anaesthetist as a perioperative physician.

**Core knowledge:** Basic knowledge of anaesthesia techniques and equipment. Learning in the fourth year is based on developing an understanding of the academic basis for anaesthesia and of the related physiology and pharmacology.

**DP requirements:**

a) Satisfactory attendance and completion of all requisite coursework and clinical work. 

b) A logbook of anaesthesia skills must be satisfactorily completed and submitted before the student will be permitted to sit the fourth year end-of-year examination.

**Assessment:** Summative assessment includes an end-of-block examination consisting of a written paper and/or a practical (35%) and an end-of-year examination (65%). Students who fail to achieve an aggregate of 55% may be required to attend an oral examination. Students who fail to achieve a final mark of 50% may be required to undergo further instruction in anaesthesia, as determined by the relevant Faculty Examinations Committee.

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**OBS4003W OBSTETRICS**

30 NQF credits at HEQSF level 8

**Convener:** Dr S Allie and C Zeelenberg

**Course entry requirements:** All third year MBChB courses

**Course outline:**

The block consists of an eight-week programme which is shared between obstetrics and neonatology. It builds on the introduction provided in the third year programme and forms part of a progressive spiral curriculum that runs through to the final year. During the obstetrics block students acquire the knowledge, skills and professional conduct required for obstetric practice. Teaching takes place within the Maternal and Neonatal Service: Metro West, which exposes students to primary (or community-based) and secondary (or hospital-based) levels of care. Students also attend the tertiary academic centre for two weeks in order to gain a well-rounded perspective of common, serious, obstetric conditions. Practical experience is recorded in a logbook and includes at least 15 deliveries under supervision. Students are encouraged to develop professional behaviour, as well as to develop empathic and caring attitudes through compassion tutorials and a Health and Human Rights workshop. The programme is supplemented by a series of lectures, tutorials and skills training sessions that cover topics within the discipline, as well as contributions from other disciplines, in order to provide an integrated, multidisciplinary approach to common problems.

**DP requirements:** Attendance of all bedside teaching (in wards and OPD) and 90% attendance of other teaching prior to end-of-block assessment. Failure to adhere to these criteria may result in extra time or outright failure of the block. All requisite coursework/clinical work as well as completion of a logbook (including 15 deliveries) is mandatory. Completion of the required number of practical procedures is mandatory and has to be signed off in the logbook.

**Assessment:** Students are examined at the end of the block and at the end of the year. The end-of-block assessment includes an in-course assessment (10%), case presentations (10%), an OSCE (30%), and the presentation of research projects (10%). A computer-based MCQ examination at the end of the year contributes 25%. The multidisciplinary portfolio assessment at the end of the year contributes 15% to the final mark. Students are required to pass each assessment mode with 55% or more to pass the block as a whole, failing which they are required to repeat and pass the relevant assessment with 50%. The in-course assessments include assessment of professionalism (punctuality, dress code; involvement in course activities, including clinical activities; attitude towards patients, colleagues and required activities; team-work; and conscientiousness) and clinical knowledge and skills. A student who scores less than 60% for the in-course assessment may be disqualified from writing the end-of-block exam, and/or required to do extra time. A student who
fails the end-of-year examination may be offered an oral examination, extra time or a supplementary examination.

**MDN4011W  MEDICINE**
60 NQF credits at HEQSF level 8

**Convener:** Dr N Wearne and Dr G Calligaro (internal medicine); Dr B Buchanan-Lee (ambulatory care); Dr A Kropman (acute care)

**Course entry requirements:** All third year MBChB courses

**Course outline:**
Students are taught at Groote Schuur Hospital, Khayelitsha Community Health Centre and New Somerset Hospital. During each clinical clerkship they have daily access to wards and clinics to engage in self-directed learning activities (interviewing and examining patients or clerking patients) and writing patient reports. Contact teaching mostly takes place in bedside-based small group tutorials conducted by senior clinicians. On-going seminars address topics in all the disciplines of medicine including Dermatology, Ethics and Evidence-Based Medicine. Each student develops a portfolio of learning (collation of a number of case records reflecting patient encounters during the course). Students also study health promotion; culture, psyche and illness; and the referral system, as well as multidisciplinary and inter-sectorial collaborations; community involvement; and equity in healthcare. In dermatology, students learn to describe skin lesions, recognise the morphologic reaction patterns of the skin, and recognise the relationship between the skin and other body systems.

**DP requirements:** 100% attendance of all academic activities and completion of all requisite coursework and clinical work as set out in the course manuals. This includes satisfactory completion of the logbook and full and successful completion of the course SLL3003W Clinical Languages, whose content is integrated in the teaching of MDN4011W. Students repeating MDN4011W are not exempt from attending and successfully completing SLL3003W. Any coursework (e.g. the portfolio) may be requested for review at the discretion of the course convener at any time during the block.

**Assessment:** The broad-based assessment includes an in-course assessment (5%); end-of-block clinical examination (including a languages clinical assessment and fundoscopy) (40%); OSCE of chest x-ray and ECG interpretation (5%); end-of-year portfolio interview (20%); and end-of-year written multiple choice question examination (30%). All sections of assessment need to be passed independently in order to pass Medicine.

**MDN4015W  PHARMACOLOGY AND APPLIED THERAPEUTICS**
20 NQF credits at HEQSF level 8

**Convener:** S Dames

**Course entry requirements:** All third year MBChB courses

**Course outline:**
This course is integrated within two of the rotations in fourth year: mixed rotation 1, when students learn about acute care therapeutics; and mixed rotation 2 (Foundations), when students develop a foundation in clinical pharmacology, which provides them with an understanding of basic pharmacology (pharmacokinetics and pharmacodynamics) and the principles of prescribing rationally. Students are expected to apply these skills when considering the management of each patient they see, regardless of which rotation they are in.

**DP requirements:** None

**Assessment:** The final mark is made up of in-course assessments (30%); end-of-foundations-block examination (35%); and an end-of-year multidisciplinary portfolio task examination (35%)

**PED4016W  NEONATOLOGY**
10 NQF credits at HEQSF level 8

**Convener:** Dr L L Linley

**Course entry requirements:** All third year MBChB courses
Course outline:
The neonatal component of the perinatal block of fourth year is designed to consolidate clinical skills and knowledge in neonatal medicine, which is introduced in third year. The core topics are: the small baby, respiratory distress in the newborn, neonatal jaundice, and hypoxic ischaemic encephalopathy. Feeding the newborn and routine care of the newborn are revisited. Neonatal resuscitation (theory and skills) is re-emphasised, and infections of the newborn are introduced.

**DP requirements:** 100% attendance and completion of all requisite coursework/clinical work. Submission of logbook by the due date. Students who have not performed satisfactorily in the fourth year coursework may be required to do additional clinical time at the end of the year, before proceeding to the fifth year.

**Assessment:** Formative assessments include: clinical ward assessment of clinical skills and knowledge, professional attitude and case presentations (60%), and an end-of-block MCQ assessment (40%). The pass mark for this course is 50%. The provisional neonatal mark is published at the end of the perinatal block. This consists of the ward assessment mark and the quiz mark. The case report mark is added to make up the final neonatal mark. If a student fails the perinatal block by failing the obstetric component in the fourth year, he/she has to repeat both components, viz. neonatal and obstetric, if the neonatal mark is less than 70%. If the neonatal mark is above 70%, he/she does not have to repeat neonatology with obstetrics. The student must have completed all three components (ward assessment, neonatal quiz, four neonatal case reports, one on each of the four core topics, submitted electronically) in order to pass the neonatal component (PED 4016W).

**PPH4056W HEALTH IN CONTEXT**
40 NQF credits at HEQSF level 8

- **Convener:** Dr N Beckett (Family Medicine), Dr T Oni (Overall Health in Context & Public Health), Dr M Richards (Child Health), Dr P Wicomb (Child Health), L Ganca (Palliative Care) and I Datay (Health Promotion)

- **Course entry requirements:** All third year MBChB courses

- **Objective:** The overall aim of the course is to introduce students to the practice of community-oriented primary care through theoretical and experiential learning. Specific objectives are to a) understand the impact of socio-economic and environmental factors on quality of an individual’s life and health, so that appropriate clinical and social management decisions can be made; and b) to enable students to assess, and become involved in initiatives that address socio-economic and environmental causes of ill health within communities.

- **Course outline:** This eight-week block introduces students to community-oriented primary care, where the care and determinants of health of individuals and communities are studied. Clinical experience in family medicine, child health and palliative care at a primary care level is integrated with a public health research project, followed by a health promotion intervention. In public health, students study epidemiology, biostatistics, research methods, human rights, research ethics, demography, occupational and environmental health, communicable disease control, health economics, and health needs of vulnerable groups. In health promotion, during projects at community sites and during home visits, students learn skills such as networking, advocacy, communication, organising, facilitation, planning and negotiation, reflection, team-work, community participation and empowerment. Family medicine and palliative medicine include clinical attachments in primary care settings and an intermediate healthcare facility, during which students conduct and review video-taped patient consultations and home visits. In child health, students study the WHO Integrated Management of Childhood Illness (IMCI) and learn to use IMCI. Ambulatory tutorials and case presentations focus on general paediatric examinations, anthropometry and nutritional and developmental assessments within the context of population-based child health.

- **DP requirements:** Confirmed attendance at all clinical activities and completion of Health in Context portfolio cases and logbooks; formative assessments (palliative care and peer presentation of Epidemiology projects) participation in and equal contribution to group-work, failing which students will be subject to individual assessment which may involve an additional assignment to be completed during vacation time.
**Assessment:** The examination contributes 50% and comprises an integrated end of block written examination (30%) and an integrated end of year portfolio examination (20%). Coursework contributes 50% and comprises an epidemiology project report (group mark): 15%; a health promotion project report (group mark): 15%; a combined epidemiology and health promotion oral presentation (group mark): 5%; a motivational interview report: 5%; and a reflective assignment on the integration of learning: 10%. Students must obtain an overall aggregate of 50% as well as 50% for each of the assessments in order to pass the block. Students may be permitted an opportunity during the block to re-submit assignments they have failed, provided they achieve a minimum of 40% for the first submission of the assignment. Accordingly, the criteria for failure are: a) Failure to achieve an overall mark of 50%; b) Failure to achieve 50% for every component of the course assessment as above. Note that: Students obtaining a final mark between 45-50% will be invited to a pass/fail oral examination. Students who fail this pass/fail oral examination will write a supplementary exam. Students obtaining a final mark below 45% will fail the block without the possibility of a supplementary exam.

PED5001W  CARING FOR CHILDREN
*This name replaces "Paediatrics and Child Health"
40 NQF credits at HEQSF level 8; N/A.
Convener: Dr H Buys, Dr S Cox and Dr A Spitaels
Course entry requirements: All fourth year MBChB courses
Co-requisites: SLL5007W
Objective: Build knowledge, skills and attributes needed for the holistic medical care of children and teenagers.
Course outline:
The course comprises an eight-week block divided into two four-week rotations. One rotation is integrated with paediatric surgery and focuses on ambulatory paediatrics; the other focuses on inpatient care and includes clinical languages teaching. Four weeks of the block are spent at the Red Cross Children’s Hospital, alternating with four weeks at New Somerset, Groote Schuur or Red Cross Children’s Hospital. Whole group seminars in aspects of the care of children run weekly.
MDN5003H Pharmacology and Applied Therapeutics runs separately on a weekly basis.
Students who pass this course will have knowledge of common core paediatric medical and surgical diseases and conditions; skill at taking a paediatric history, examining neonates, children and adolescents; the ability to define an appropriate problem list and formulate an appropriate management plan; awareness of basic procedures; professional behaviour and attitudes appropriate to handling children and their caregivers; and awareness of the rights of children and the doctor’s role as an advocate for child health. The curriculum is composed of core presentations, which students address in terms of history-taking, examination, assessment and management plans, as well as during bedside tutorials, and in assembling their portfolio, and core topics – divided into “must know” and “must recognise” categories.
Lecture times: Monday lecture/seminar program, with other seminars according to rotation.
DP requirements: Minimum of 80% attendance (absence allowed only with permission) and completion of all requisite coursework/clinical work, including a written portfolio of 12 cases with associated tasks and five clinical methods templates; completion of online lessons and quizzes for paediatric surgery; and a signed logbook. If a student is absent with permission, the time missed will need to be made up or the student may be required to repeat the block.
Assessment: Summative assessment comprises an end-of-block clinical and portfolio assessment: 50%; end-of-block online MCQ assessment and Extended Matching Items: 50%. Coursework from PPH4056W Health in Context in year 4 is also assessed. Students are required to achieve 50% or more in: (1) the clinical examination assessment, (2) portfolio assessment, (3) paediatric surgery component of the online assessment, and (4) the general care of children component of the online assessment, in order to pass the course. Any student not meeting the sub-minima in paediatric surgery is required to undergo a repeat online assessment and pass/fail oral examination (based on the portfolio) and may have to spend additional time in paediatric surgery followed by another assessment. Any student not meeting the sub-minima in general care of children is required to
undergo a pass/fail oral examination (based on the portfolio) and/or a repeat clinical examination and may have to spend additional time in paediatrics followed by another assessment. Repeat assessments will be held in the mid-year vacation for Blocks 1-3, and at the end of the academic year for Blocks 4-5.

CHM5003W  SURGERY
40 NQF credits at HEQSF level 8
Convener: Assoc Prof D Hudson (Plastic Surgery) and Dr S Burmeister
Course entry requirements: All fourth year MBChB courses
Course outline:
The general surgery programme is taught over eight weeks at Groote Schuur Hospital within the hepatobiliary, vascular, colorectal, breast and endocrine units. Daily seminars present common important clinical presentations and their initial management. Students attend regular, interactive, patient-based tutorials where they develop and enhance clinical proficiency and diagnostic skills. They are encouraged to acquire empathy and communication competence. They produce a portfolio of at least six cases with a researched and referenced discussion of 1500 – 2000 words. Core curriculum topics are divided into “must know” (detailed knowledge of the topics); and “must recognise” (awareness of the topic and its inclusion in a differential diagnosis). Core learning outcomes include recognition of urgent and life-threatening clinical scenarios; ability to recognise common surgical diseases and less common but dangerous problems; ability to initiate primary or emergency care as appropriate, to initiate appropriate investigation(s) and to identify conditions requiring specialised services. In plastic surgery, core learning outcomes comprise knowledge of the important conditions requiring treatment by a plastic surgeon, e.g. skin cover, grafts and flaps, trauma, cosmetic surgery, burns; and skills of examination, initiating treatment and in selecting patients for referral to a specialist centre.

DP requirements: Students are expected to attend a minimum of 30 out of the 36 seminars. Tutorials are compulsory. Both tutorials and witnessed procedures are signed off in a logbook, which is reviewed during the end-of-block assessment. Completion of the portfolio of cases by the due date is compulsory. Late hand-in of the portfolio is penalised by 5% per day after the deadline for submission.

Assessment: Students are provided with continuous feedback from their tutors informally during their block. This is not recorded, and does not form part in the final promotion mark. The final mark is made up of an end-of-block written paper (20%), end-of-block clinically-based MCQ (30%), end-of-block oral assessment (10%), portfolio assessment (10%) and end-of-year MCQ (including trauma and plastic surgery 30%). The general surgery component of the course must be passed with 50%. Plastic surgery assessment is contained in the end-of-year MCQ examination in general surgery.

MDN5003H  PHARMACOLOGY & APPLIED THERAPEUTICS
7 NQF credits at HEQSF level 8
Convener: Dr K Cohen and Dr P Sinxadi
Course entry requirements: All fourth year MBChB courses
Course outline:
This course is integrated through rotations in paediatrics and medical specialities. The course focuses on applying understanding of pharmacodynamics and pharmacokinetics to the management of common conditions, using essential medicines in the primary healthcare context. It aims to equip students with the skills for critically appraising evidence and judging the risk-benefit profiles of available treatment options to ensure optimal patient care.

DP requirements: 100% attendance of clinical case presentations.

Assessment: The final mark is made up of clinical case presentations (10%); written assignment/s (10%); end-of-paediatrics-block examination (40%); and an end-of-medical specialties-block examination (40%).
CHM5004H  TRAUMA
10 NQF credits at HEQSF level 8
Convener: Prof P Navsaria, Assoc Prof A Nicol and Dr S Edu
Course entry requirements: All fourth year MBChB courses
Objective: Demonstrate concepts and principles of primary and secondary patient assessment. Establish management priorities in a trauma situation. Initiate primary and secondary management necessary within the "golden hour" for the emergency care of acute life-threatening emergencies. Demonstrate skills used in the initial assessment and management of patients with multiple injuries.
Course outline:
The four-week block comprises a series of lectures incorporating the “Advanced Trauma Life Support” (ATLS) format. Two surgical skills courses are included to provide instruction with wound-suturing, pleural drain insertion, intravenous access and airway management. Students are rostered for duties in the Trauma Centre at Groote Schuur Hospital in order to gain first-hand experience in managing trauma patients under the supervision of the on-call surgical registrars and consultants. Core learning outcomes include the initial assessment and management of the trauma patient; an approach to specific injuries; skills in resuscitation and basic life-saving techniques; application of splints and plaster; and debridement and suturing of wounds. A core curriculum has been divided into; “must know”, “must recognise”, “may hear or see” and “must be aware of”.
DP requirements: 100% attendance and completion of all requisite coursework/clinical work by the due dates.
Assessment: Formative assessment occurs during the block. The final mark is made up of an end-of-course examination (OSCE and written MCQ examination- 55%); and an end-of-year written examination (45%).

OBS5005W  GYNAECOLOGY
This course is also taken by South African students studying towards a Cuban medical degree. Students join the same course as UCT students.
20 NQF credits at HEQSF level 8
Convener: Dr C Gordon and Dr L Walmsley
Course entry requirements: All fourth year MBChB courses
Course outline:
The block consists of four weeks of gynaecology. The gynaecology course builds on the prior three weeks of learning in women’s health during Semester Six. Students have already learnt to take histories from patients and to examine women using models, and have been exposed to the broader issues about women’s health; and have been introduced to the role of gender in health promotion. In this course they learn about common gynaecological problems, issues of sexuality, abuse of women and contraception, at the same time gaining clinical experience in gynaecology and women’s health. Teaching takes place in a variety of clinical venues where students learn how to perform a gynaecological examination on patients, mostly in an outpatient setting, which is most appropriate for their future practice. The gynaecology clinical teaching is complemented by tutorials and clinical skills sessions, as well as further teaching in the relevant basic sciences.
Core learning outcomes: Students are required to build on their basic knowledge of gynaecology practice; to formulate professional attitudes and behaviours by being involved in primary and tertiary gynaecologic care; to develop empathetic attitudes towards patients; to become reflective health care practitioners; to explore their attitudes and beliefs about controversial issues such as sexuality and gender in a workshop focussing on Lesbian, Gay, Bisexual and Transgender health issues; and to continue along the road of self-directed learning.
DP requirements: ALL bedside teaching must be attended (in wards and OPD) and 90% of other teaching must be attended in order to be allowed to pass the block. Large group seminar registers must be signed. Failure to adhere to these criteria may result in extra time or outright failure of the block, at the discretion of the course convenors and Head of department. All requisite
coursework/clinical work as well as completion of a logbook is mandatory. Should students not fulfill DP requirements they could be excluded from the end-of-block exam. **Assessment:** Students undergo formative and summative assessments during and at the end of block and end of year. Case reports in gynaecology are added to the portfolio. The final mark is made up of an end-of-year multiple choice paper (40%); an end-of-block assessment based on the portfolio (30%) and an end-of-block clinical examination (30%). Students are required to attain 55% or more for each assessment mode before qualifying to pass the block as a whole, failing which they repeat the relevant assessments, the pass marks for which are 50%. Students who fail to hand in portfolio cases at the required time will have 5% per day over time deducted from their final portfolio mark, and may then have to repeat portfolio cases. Students who fail the end-of-year examinations may be offered oral examinations, extra time or supplementary examinations, at the discretion of the departmental exam board and HOD.

**CHM5005H  ORTHOPAEDIC SURGERY**
10 NQF credits at HEQSF level 8
**Convener:** Dr N Kruger

**Course entry requirements:** All fourth year courses

**Course outline:**
This course aims to cover the common entities in adult and paediatric orthopaedic surgery. Core learning outcomes include knowledge of common musculoskeletal trauma and pathological conditions; skills in examination of the musculoskeletal trauma and pathological conditions, application of treatments and carrying out procedures specific to the specialty; x-ray assessment; and professional behaviour appropriate to clinical practice. The curriculum has been organised into core clinical problems students are expected to be able to evaluate clinically and core clinical topics students are expected to be knowledgeable about. The topics have been further stratified into “must know” (have a detailed knowledge of the clinical presentation, laboratory investigation and management of these important, common conditions); “must recognise” (have a basic understanding of the clinical features suggestive of this diagnosis, appropriate investigations that would assist in making the diagnosis and a limited understanding of the principles of treatment of these important conditions, all of which have serious implications if missed); “must be aware of” (the student should be aware of the condition but is not expected to accurately diagnose or manage the condition) and “may hear of or see” (rare conditions that the student should refer for specialist opinion and management).

**DP requirements:** 100% attendance and completion of all requisite coursework/clinical work by the due dates.

**Assessment:** Students undergo formative and summative assessments using various methods, both during the course as well as at the end of the block. The final mark is made up of an OSCE (40%), single-best-answer examination (40%) and case report (20%). Students who do not obtain 50% will undergo an additional assessment before the final mark is submitted. An additional clinical and oral examination at the end of the year will also be held for borderline students who have not achieved the required standard. For the top students, in the event that a clear distinction between the top performers cannot be drawn, an additional examination will be arranged. A recommendation will be made to the Faculty Examinations Committee that students who fail an examination spend an additional period of training at the end of the year (prior to commencing the sixth year), as a ‘clinical attachment’ to a registrar, after which they will be re-examined.

**MDN5005W  DERMATOLOGY**
10 NQF credits at HEQSF level 8
**Convener:** Dr R M Ngwanya

**Course entry requirements:** All fourth year MBChB courses.

**Course outline:**
A list of core clinical problems students are expected to be able to evaluate clinically for example, a patient presenting with itchy skin. Lists of core clinical topics about which the students are expected to be knowledgeable for example, eczema. A list of core procedures in which students are expected
to be competent. In order to facilitate student learning, the clinical topics have been further stratified as follows: Must know: the student is expected to have a detailed knowledge of the clinical presentation, laboratory investigation and management including procedural hands on skills, of these important, common conditions. Must recognise: The student is expected to have as basic understanding of the clinical features suggestive of this diagnosis, a few basic appropriate investigations that would assist in making the diagnosis and a limited understanding of the management and treatment of these important conditions. Nice to know: additional topics/procedures, which will broaden your dermatology base and competency, but do not form part of the assessment. Learning Outcomes: The course is based on a list of core learning outcomes. They are categorised into the widely used framework of knowledge; Skills including clinical, clinical reasoning and procedural; professional behaviour and personal attributes. Clinical tasks of students during the Dermatology attachment will be outlined at orientation. Learning, Teaching and General Clinical Training: The blended course makes use of a variety of face to face and bedside learning methods, combined with a web-based component. Briefly, the learning methods used, include: Small-group tutorials: Students, in groups of 10-20, attend a series of classroom-based tutorials during the attachment. These sessions focus a discussion on selected topics related to common and important skin conditions seen in primary care. The material to be covered is introduced on Vula. Students are expected to work through this material before each Monday afternoon tutorial and before the Thursday morning tumour tutorials. Bedside teaching: Students, in groups of 7-10, engage in outpatient ambulant patient based teaching sessions with dermatology staff. The purpose of these sessions is to facilitate the learning of clinical skills and clinical reasoning. Dermatologists will provide limited case-based teaching, particularly relevant to the cases students present, incorporating aspects of diagnosis and management, and the integration of clinical dermatology with basic science and general medicine platforms. The latter will be addressed specifically during a Friday morning tutorial in which students will present ward patients, selected to highlight the significance of skin conditions in general medicine. Tutors are encouraged to observe students engaged in clinical examination activities providing feedback on examination technique and the interpretation of clinical findings. These cases should be used for the student’s Portfolio of Learning and Assessment in dermatology. Structured self-directed learning: (i)Patient-based tasks: During the course, students are expected to select certain of the patient encounters, for detailed analysis in terms of one or more of the Principles of Primary Health Care with special relevance to skin diseases, their management and psychosocial impact. These tasks form part of the student’s Portfolio of Learning and Assessment in dermatology. (ii)Therapeutic Treatment Plans: During the course, students should compile a series of generic treatment plans for commonly encountered dermatological conditions in South Africa e.g. eczema, scabies, ulcers (Appendix I). Students should select patient encounters and apply these generic treatment plans to suit the patient’s individual needs. These also form part of the student’s Portfolio of Learning and Assessment in dermatology. Interactive electronic learning tasks: These tasks are designed to expand on the cases that have been covered during the course of bedside or outpatient teaching sessions. Students are encouraged to share their learning. **DP requirements:** Attendance of more than 75% of tutorials **Assessment:** The final mark is made up of an in-course assessment (information pamphlet for patient) to be presented to the group who will mark the assignment (15%); an end-of-block OSCE (includes clinical cases, paper cases, pictures, ulcers, therapeutics), contributing 45%; and an end-of-year, short-answer, written examination based on computer images, contributing 40%. Students must achieve a final mark of 50% or more to pass this component of the course.

**MDN5006W** RHEUMATOLOGY
10 NQF credits at HEQSF level 8
**Convener:** Prof A Kalla and Dr A Gcelu
**Course entry requirements:** All fourth year MBChB courses
**Course outline:**
This course covers the common entities in adult and paediatric rheumatology. Core learning outcomes comprise knowledge of common musculoskeletal diseases and conditions; skills in
examination of the musculoskeletal system; application of treatments specific to the speciality; carrying out procedures specific to the speciality; and radiological assessment; as well as professional behaviour appropriate to clinical practice. The core curriculum compares a list of core clinical problems students are expected to be able to evaluate clinically and a list of core clinical topics students are expected to be knowledgeable about. Clinical topics have been further stratified into “must know” (have a detailed knowledge of the clinical presentation, laboratory investigation and management of these important, common conditions); “must recognise” (have a basic understanding of the clinical features suggestive of this diagnosis, appropriate investigations that would assist in making the diagnosis and a limited understanding of the principles of treatment of these important conditions); “must be aware of” (the student should be aware of the condition but is not expected to accurately diagnose or manage the condition); and “may hear of or see” (rare conditions that the student should refer for specialist opinion and management).

**DP requirements:** 100% attendance and completion of all requisite coursework/clinical work by the due dates.

**Assessment:** Formative assessment occurs in each block. Summative assessment comprises an end-of-block clinical examination (50%) and an end-of-year written paper (50%). A student failing this course must spend at least one week in rheumatology at the end of the year and undergo a repeat assessment.

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**CHM5007W NEUROLOGY AND NEUROSURGERY**
20 NQF credits at HEQSF level 8  
**Convener:** Dr L M Tucker (Neurology) and Dr D E J le Feuvre (Neurosurgery)  
**Course entry requirements:** All fourth-year MBChB courses  
**Course outline:** This course aims to cover the common entities in adult neurology and paediatric and adult neurosurgery. Core learning outcomes include knowledge of common neurological diseases and conditions, skill in examining the nervous system, in applying treatments and carrying out procedures specific to the speciality and in radiologic assessment, as well as professional behaviour appropriate to clinical practice. The core curriculum comprises core clinical problems that students are able to evaluate clinically, and core clinical topics they are expected to be knowledgeable about. The latter includes content the student “must know” (the student is expected to have detailed knowledge of the clinical presentation, laboratory investigation and management of these important, common conditions); “must recognise” (the student is expected to have a basic understanding of the clinical features suggestive of this diagnosis, appropriate investigations that would assist in making the diagnosis and an understanding of the principles of treatment of these important conditions, all of which have serious implications if missed) and “must be aware of” (the student should be aware of the condition but is not expected to accurately diagnose or manage the condition). Students become familiar with rare conditions that they should refer for specialist opinion and management.  
**DP requirements:** 100% attendance and completion of all requisite coursework/clinical work.  
**Assessment:** Formative assessment occurs in each block. The final marks are made up of an end-of-block clinical examination (50%) and an end-of-year written paper (50%).

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**CHM5008W OPHTHALMOLOGY**
10 NQF credits at HEQSF level 8  
**Convener:** Dr N du Toit  
**Course entry requirements:** All fourth year MBChB courses  
**Course outline:** This course covers common entities in adult and paediatric ophthalmology. Students undergo experiential learning in the outpatient clinics at Groote Schuur Hospital over a 10-day period. Core learning outcomes are categorised into core knowledge; skills, including clinical, clinical reasoning and procedural skills; and professional behaviour and personal attributes. The core curriculum comprises core clinical problems which students are expected to be able to evaluate clinically and core clinical topics students are expected to be knowledgeable about. Clinical topics are stratified into “must know” (have a detailed knowledge of the clinical presentation, limited management and
appropriate referral); and “must recognise” (have a basic understanding of the clinical features suggestive of this diagnosis, take appropriate steps in the treatment of the condition and an understanding which needs to be referred to an ophthalmologist). As key outcomes, students should be able to diagnose and manage common, primary care eye problems, recognise and initiate the treatment of emergencies and know when to refer. Students’ mastering of a problem-orientated approach and their plan of management for every patient manifest in the necessary 30 cases that form part of each student’s portfolio.

**DP requirements:** Full attendance of all course requirements including seminars, clinical/tutorial sessions, completed portfolio cases, and satisfactory completion of practice examination skills. If two or more clinical or tutorial sessions are missed, the student will be deemed not to have satisfactorily completed the clinical component of the block and will therefore not be able to do the end-of-block clinical and portfolio exams. Any students not having the required number of cases present at the portfolio exam will fail the end-of-block assessment and will not be allowed to do the clinical exam. Any students failing the clinical exam (less than 50%) will fail the block. These students will be required to attend a supplementary one-week clinical attachment before the clinical and portfolio exam can be completed.

**Assessment:** The final mark is made up of an in-course assessment (clinical and portfolio exams) (20%); an end-of-block slide show/MCQ computer-based exam (50%); and an end-of-year written MCQ exam (30%).

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**CHM5009W OTORHINOLARYNGOLOGY**
10 NQF credits at HEQSF level 8
**Convener:** Dr G Copley and Dr T Harris
**Course entry requirements:** All fourth year MBChB courses
**Course outline:** This course aims to cover the common entities in adult and paediatric ear, nose and throat (ENT) diseases. Students undergo experiential learning in ENT wards, theatres and outpatient clinics and spend two days on a field trip to rural primary care clinics where, under supervision, they run "ear clinics" for the local population. The core curriculum comprises content categorised as “must know” (have a detailed knowledge of the clinical presentation, assessment and management of these important, common conditions); and “must recognise” (recognise features suggestive of these conditions, have knowledge of appropriate examination and investigation to assist in confirming/excluding the conditions and have an understanding of the principles of treatment of the conditions which may have serious implications if missed). Core learning outcomes include competence in the examination of the ear, nose, throat and neck and the ability to undertake a simple hearing assessment. The student must demonstrate rational reasoning as defined by the ability to make a differential diagnosis and ultimately arrive at a specific diagnosis. Students will become familiar with the spectrum of diseases/disorders managed by an ENT division, the examination techniques, investigations and management methods employed to refer and counsel patients appropriately.

**DP requirements:** 100% attendance and completion of all requisite coursework/clinical work, including a logbook of procedural skills.
**Assessment:** Assessment comprises (a) an end-of-year multiple-choice examination contributing 50% towards the final mark; and (b) a course OSCE mark + (presentation mark divided by 2) + (skills mark multiplied by 2), all divided by 170, contributing 50%.

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**CHM5010W UROLOGY**
10 NQF credits at HEQSF level 8
**Convener:** Prof J Lazarus
**Course entry requirements:** All fourth year MBChB courses
**Course outline:** This course includes daily tutorials and attendance at urology clinics and theatre slates. The curriculum has been organised into core clinical problems students are expected to be able to evaluate clinically and core clinical topics students are expected to be knowledgeable about. The
topics have been further stratified into “must know” (have a detailed knowledge of the clinical presentation, laboratory investigation and management of these important, common conditions); “must recognise” (have a basic understanding of the clinical features suggestive of this diagnosis, appropriate investigations that would assist in making the diagnosis and a limited understanding of the principles of treatment of these important conditions, all of which have serious implications if missed); “must be aware of” (the student should be aware of the condition but is not expected to accurately diagnose or manage the condition) and “may hear of or see” (rare conditions that the student should refer for specialist opinion and management).

**DP requirements:** 100% attendance and completion of all requisite coursework/clinical work.

**Assessment:** This comprises a single case report by each student (marked by a consultant) and an end-of-block viva.

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**CHM6000W  SURGERY (INCLUDING ALLIED DISCIPLINES)**

41 NQF credits at HEQSF level 8

Convener: Dr S Burmeister

**Course entry requirements:** All fifth year MBChB courses

**Course outline:**

Final year Surgery incorporates a hands-on, practical, six-week rotation during which student interns implement the clinical and management components of their previous training. The course consolidates and refines clinical examination, diagnosis and management of the major symptom complexes in surgery. Student interns spend two weeks in one of the four surgical firms at Groote Schuur Hospital, and a further four weeks in units at the secondary level of care (including those at Victoria, Somerset and Groote Schuur Hospitals). They are involved in all aspects of their units’ activities, including ward rounds, patient management and academic activities. The differential diagnosis and basic and specialised investigations are emphasised in each clinical situation. Students present their patients on the ward rounds, at firm meetings and the combined x-ray conferences. They accompany their patients to interventional procedures and present at least two cases per week to attending consultants. Altogether they complete a portfolio of six cases, together with a researched and referenced discussion of their own of 1500 – 2000 words. Additional weekly interactive tutorials and seminars by consultant staff review core theoretical knowledge. Students keep a logbook documenting their presentation of cases to consultants, and this is reviewed during at the end-of-block assessment.

**DP requirements:** Full attendance and participation in unit activities and completion of all requisite coursework/clinical work, including a portfolio of cases completed by the due date. Late submission is penalised by 5% per day post the deadline for submission.

**Assessment:** The end-of-block assessment comprises a clinical, scenario-based oral examination (25%); a patient-based oral examination (35%); a computerised, clinically-based MCQ (25%); and assessment of the case portfolio (15%). This constitutes the student’s mark for general surgery. Students who obtain an average mark less than 55% for their end-of-block assessment are examined in the November final examination. Should the student pass the November examination their original mark will stand, unless it was originally below 50%; then, a final mark of 50% will be given. 50% is considered the pass mark for the course. Failure to pass the November examination will result in failure of the year. The final surgery mark incorporates a 20% contribution from Urology.

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**MDN6000W  MEDICINE (INCLUDING ALLIED DISCIPLINES)**

41 NQF credits at HEQSF level 8

Convener: Dr A Gcelu

**Course entry requirements:** All fifth year MBChB courses

**Course outline:**

The Department of Medicine offers a 4-week rotation in General Medicine and a 4-week rotation in Service learning which focuses on Ambulatory Care (2-week rotation) and Acute Care (2-week rotation). **Medicine:** The 4 four-week general Medicine student internship builds on previous training and prepares students for practice as interns. For four weeks they are deployed to Victoria,
Somerset, Mitchell’s Plain District and/or George Hospital. They operate as part of the specialist physician-led clinical team over 24 hours of all intake days and are responsible, under supervision, for a cohort of patients admitted to the care of their clinical team. Clinical duties include attendance and presentation of cases at ward rounds. They participate in academic meetings and develop a portfolio of learning, recording patient case records. Teaching revisits core elements of the primary healthcare approach as well as promotive, preventive, curative, rehabilitative, and palliative care at all levels of care. A series of interactive case presentations (ICPs) addresses topics in all the medical disciplines. **Service Learning Block: Ambulatory Care:** Students spend an average of two weeks in an outpatient department at Victoria, Somerset, Mitchell’s Plain District, 2 Military and/or George Hospitals. They operate as part of the specialist physician-led clinical team and are primarily responsible, under supervision, for medical care of at least two patients per clinic. Medical care includes diagnosis, observation, consultation, treatment, intervention and rehabilitation services. Students must compile a portfolio of all patients consulted, and must present each patient to a supervisor. Each case presentation will be discussed and direction provided as necessary. A mark will be allocated for each case, the sum of which will comprise the end of block mark. **Acute Care:** Students spend an average of two weeks in an emergency unit at Victoria, Somerset, Mitchell’s Plain District and/or George Hospital where they will be exposed to a variety of medical emergencies. This will equip them with the necessary skills including assessment, stabilisation, diagnosis and disposition of undifferentiated, unscheduled patients with acute illnesses. Students must compile a portfolio of all patients consulted, with a minimum of two patients per shift and must present each patient to a supervisor. Each case presentation will be discussed and direction provided as necessary. A mark will be allocated for each case, the sum of which will comprise the end of block mark. A 2-day Advanced Life Support (ALS) course forms part of the learning requirements of this 2-week rotation. **DP requirements: Medicine:** Full attendance, (as documented in the department of Medicine DP booklet), of interactive case presentations, intakes, post-intake ward rounds, bedside tutorials, X-rays and academic meetings. Satisfactory completion of all log book procedures is also required. Students who are absent for whatever reason from their hospital duties for three days or more without permission may be required to repeat the block. **Ambulatory Care:** Students must have 100% attendance record, must participate in all duties and provide the required number of portfolio cases. **Acute Care:** Students must have 100% attendance record, must participate in all duties, including the ALS course, and provide the required number of portfolio cases. **Assessment: Medicine:** The Medicine( MDN6000W) final mark comprise of the following components: 1) In-course assessment during the medicine block (10%); 2) Patient based Clinical examination (30%); 3) Portfolio entries of both Acute and Ambulatory care(20%); 4) Portfolio entries of Medicine (15%); 5) Multiple-Choice Question examination and electronic Objective test (25%). Dermatology, Rheumatology and Neurology are examined as part of the general medical clinical and portfolio examinations. A minimum of two cases each for dermatology, neurology and rheumatology are included in the portfolio for sixth year. Failure of any component of the course will require spending a further two weeks in Medicine and being reassessed as stipulated in the course manual. **Ambulatory Care:** Course mark contributes 100% of block mark which forms part of the Medicine course code (MDN6000W). Failure of the block will require spending a further one week in Medicine and being reassessed. **Acute Care:** Course mark contributes 100% of block mark which forms part of the Medicine course code (MDN6000W). Failure of the block will require spending a further one week in Medicine and being reassessed.

**OBS6000W OBSTETRICS**

41 NQF credits at HEQSF level 8

**Convener:** Dr K Brouard and Dr C J M Stewart

**Course entry requirements:** Fifth year MBChB courses

**Course outline:**

This is a 4 week Obstetrics block. Teaching is practical and involves patient assessment and management under supervision in clinics, antenatal and postnatal wards, labour wards, and theatre. There are two whole interactive group seminars per week. At the end of the block, students will be
expected to be competent in obstetric and gynaecological history-taking and examination; including speculum examination, vaginal examinations in labour, labour monitoring and delivery and assisting at common operations. Students are required to write up 4 portfolio cases during their block. These are examinable at the end of the block.

**DP requirements:** Students are expected to attend and participate in ward, clinic and labour ward duties, as per the programmes of the individual firms. At least two bedside case presentations on ward rounds must be signed off during the block. Professionalism will be assessed, which includes punctuality, attendance, appropriate dress code and behaviour. These are monitored by the consultants, midwives and registrars in these firms, and form part of the in-course assessment. Failure to meet these criteria could result in outright failure of the block, at the discretion of the course convenors and Head of Department. In addition, the two weekly seminars are compulsory. Should students not fulfil DP requirements they could be excluded from the end-of-block and/or end-of-semester exam.

**Assessment:** Pass marks for all examination modalities (except skills) is 50%. Should the overall mark not be more than 50%, the student will be required to repeat the course. End of block exam: This consists of a formal case presentation (10%) and a portfolio oral exam (20%). End of semester exam: This includes an OSCE/OSPE examination (60%); and a skills station (part of the Multi-Disciplinary Exit OSCE) (10%). In order to pass the skills station, students must attain at least 70% for that skill demonstration. Students who fail the end-of-semester examinations or do not attain more than 50% overall may fail outright or be offered oral examinations, extra time or supplementary examinations, at the discretion of the departmental exam board and HOD.

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**PED6000W  PAEDIATRICS AND CHILD HEALTH**

41 NQF credits at HEQSF level 8; 10.

**Convener:** Dr K Donald, Dr P Gajjar and Dr S Salie

**Course entry requirements:** All fifth year MBChB courses

**Course outline:**
During final year paediatrics, students are integral members of the paediatric team caring for children. Students spend four weeks in a general paediatric ward (at Red Cross Children’s, Victoria, Groote Schuur, New Somerset or George Hospitals) and two weeks in neonatology (at Groote Schuur, New Somerset, Mowbray Maternity or George Hospitals). They participate fully in the academic and clinical activities of the firm including after-hours cover. Core learning outcomes include demonstration of common core paediatric and neonatal diseases and conditions; history-taking skills; emergency management and resuscitation; defining problem lists; formulating appropriate management plans; performing basic procedures; professional behaviour and attitude; and advocacy of the rights of children. The core curriculum focuses on common paediatric and neonatal conditions. During the rotation students attend a mandatory 1-day resuscitation training course and are exposed to opportunities to acquire a prescribed list of necessary procedural skills.

**DP requirements:** Students have to attend all academic/clinical activities. To qualify for the end-of-semester examination, students must attend the resuscitation training; have a signed skills logbook of G1 procedures; complete a portfolio of eight paediatric cases and one neonatal case and obtain more than 50% in their in-course assessment. If a student is absent with permission for more than five working days for whatever reason, the time will need to be made up and if absent for more than two weeks, the block has to be repeated. Failing to meet the DP requirements, students may, at the discretion of the conveners, be required to repeat the block.

**Assessment:** Formative assessment covering all aspects of the student’s performance is given during the block. The final mark is made up of an in-course assessment in paediatrics (20%), a neonatal in-course assessment and end-of-block clinical examination (20%), and at the end of semester, a computer-based MCQ (25%), and a short-case clinical examination and oral based on the portfolio (35%). The overall course pass mark is 50%. However, students must attain a mark of more than 50% in their in-course assessment and the end-of-semester clinical and oral portfolio examination to pass the course. In addition students must obtain an exempt pass in the exit examination on procedural competence. Students who do not meet these requirements will be required to undergo a pass/fail clinical and oral portfolio re-examination.
PPH6000W  FAMILY MEDICINE AND PALLIATIVE MEDICINE
21 NQF credits at HEQSF level 8
Convener: Dr N Beckett (Family Medicine) and L Ganca (Palliative Medicine)
Course entry requirements: All fifth year courses
Course outline:
The four-week Family Medicine clerkship emphasises the theoretical and clinical integration of
clinical, public health and behavioural science knowledge, and skills required for family and
community-orientated primary care. Students consolidate prior learning by applying the knowledge,
skills and professional values gained in all clinical disciplines (particularly family medicine,
palliative care and public health) to the diagnosis, management and continuing care of patients
presenting to primary care services. Learning materials used in prior learning provide the theoretical
basis for practice, research and continuing professional development. Students are expected to
review these before entering the clerkship. The clerkship aims to provide students with a basis for
postgraduate training in the practice of family medicine and palliative care and to enter the four-
month family medicine internship with the necessary confidence and competence. During the block,
all students are based at community health centres (CHCs) within the district health system in the
Cape Town metropolitan area for three weeks, and spend one week in Vredenburg, within the rural
district health services in the Western Province. Palliative care learning activities include a hospice
visit, home visit, intermediary care facility, and CHC and district hospital exposure.
DP requirements: Completion of all required coursework and attendance of all academic and
clinical activities. This includes tutorials/seminars. Any student who does not submit a patient study
and a signed logbook with completed activities at the end of the block will be denied entry to the
end of semester examination/OSCE.
Assessment: The final mark is made up of (1) in-course mark which consists of: patient study
(20%); facility clinical mark (CHC & Vredenburg) (15 %); logbook (10%). (The facility mark is
weighted according to the time spent at Vredenburg and the CHC.) (2) OSCE (end of semester
assessment) (55%). A penalty of 5% per working day will be deducted for late submissions of
patient studies. A student who achieves less than 50% for the overall mark, will have failed Family
Medicine and Palliative Medicine, and will be required to do a supplementary examination (OSCE).

PRY6000W  PSYCHIATRY AND MENTAL HEALTH
21 NQF credits at HEQSF level 8
Convener: Dr M Karjiker
Course entry requirements: All fifth year courses
Course outline:
This is a full-time clinical block of four weeks during which the student intern participates as a full
member of the psychiatry team. This includes responsibility for managing patients, which entails
clerking, investigating and presenting of completed data under supervision of a registrar or
consultant. The student interns are expected to attend all ward meetings, departmental academic
meetings and journal clubs. Every Friday, they present cases and discuss clinical material with the
course convener/senior supervisor. The students are attached to units at Valkenberg Hospital,
Lentegeur Hospital or Groote Schuur Hospital. A core component of the clerkship is the continued
development of a portfolio of learning, in which the student intern is expected to collate at least four
patients’ case records, reflecting his/her involvement inpatient management. The portfolio of
learning forms part of the assessment process.
DP requirements: 100% attendance and completion of all requisite coursework/clinical work,
including the portfolio of learning, by the due date.
Assessment: During the block, 30% is allocated for ward involvement and case presentation or
discussion, as well as knowledge and participation in the seminars, and for portfolio submission and
assessment. At the end of the block, 20% is allocated for an oral examination and 20% for a written
examination. At the end of the year there is an EMI/MCQ (10%) and an end-of-year
multidisciplinary examination (20%).
AAE6000W  ANAESTHESIA PART II  
10 NQF credits at HEQSF level 8  
Convener: Dr R Nieuwveld and Dr E Cloete  
Course entry requirements: AAE4002W and all fifth year MBChB courses  
Course outline:  
The student will demonstrate knowledge of clinical anaesthesia; skills in the preoperative, 
intraoperative and postoperative care of patients necessary for safe anaesthetic practice; and 
professional behaviour appropriate to the pivotal role of the anaesthetist as a perioperative physician. 
Learning in the sixth year is based on a series of anaesthetics which the student administers under 
supervision, including the pre-operative assessment of the patient and their postoperative 
management.  
Assessment: Coursework: 45%. Exam: 55%.  

MDN6004W  EXIT EXAMINATION ON PROCEDURAL COMPETENCE  
0 NQF credits at HEQSF level 8  
Convener: Dr R Weiss  
Course entry requirements: Successful completion of all fifth and final year courses  
Course outline:  
This is an integrated, exit-level examination for MBChB students on procedural competence. The 
examination takes place in the form of two OSCE-style examinations conducted in the Clinical 
Skills Centre, consisting of eight to ten stations, of a maximum of ten minutes each. The range of 
OSCE stations requires students, amongst others, to show competence in areas which include but are 
not limited to performance of venepuncture, IV cannulation or blood culture; insertion of a 
nasogastric tube; performance of bladder catheterization; endotracheal intubation of an adult or 
infant; CPR of an adult or infant; IM or IC or SC injection with dose calculation; completion of a 
death certificate or discharge letter; suturing a wound; writing a prescription; performance of a 
complicated delivery or another obstetric emergency; setting up an intraosseous infusion; and 
umbilical vein catheterisation.  
DP requirements: None  
Assessment: This comprises an integrated OSCE examination. Each student is required to 
demonstrate satisfactory performance in each of the stations in the OSCE. No mark is given for the 
examination but student performance is rated as “satisfactory” or “not satisfactory” at each OSCE 
station. Competence is based on the following criteria: (1) the overall ability to correctly handle the 
required equipment; (2) perform the procedure safely (limited to two attempts) and without potential 
harm or injury to the patient; (3) adherence to aseptic technique; and (4) safe handling and disposal 
of sharp equipment, where relevant. Students who are rated as “not satisfactory” at any of the 
stations will be re-examined on the specific station(s) after appropriate training and will be required 
to demonstrate satisfactory performance prior to being considered eligible to graduate.  

PPH6001W  PRIMARY HEALTH CARE ELECTIVE  
20 NQF credits at HEQSF level 8  
Convener: J Irlam  
Course entry requirements: PPH4043W and PPH4013W  
Course outline:  
The purpose of the course is to provide students with a four-week learning experience that will 
enhance their clinical competency, their research skills, and their understanding of the social context 
of disease and health. Students are required to undertake one of two of the following elective 
categories: Category 1: Free Choice Electives Students who have performed satisfactorily 
throughout their fourth year of study are required to undertake the elective at a placement of their 
choice. This may be: (a) A clinical placement at a site of the student’s choice within Africa (SADC 
region), or (b) A research placement at an approved site of the student’s choice. The research topic is 
chosen by the student subject to approval by the convener. Placements are self-funded by students.
Supervision is undertaken by an external supervisor of the student’s choice at the placement site. DP requirements: None. Assessment: Is based on a written elective report by the student and a standardised evaluation by the external supervisor. OR Category 2: Guided Electives Students who have achieved less than 55% in their fourth year Medicine or Obstetrics & Gynaecology courses are placed at a local secondary teaching hospital to enhance their skills in that discipline. Supervision is by a Faculty staff member appointed by the department in which the student undertakes his/her clinical skills enhancement.

**DP requirement:** None

**Assessment:** A written elective report by the student that includes a portfolio of patients seen by the student.

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**PPH6005W**  SHORT ELECTIVE

10 NQF credits at HEQSF level 8

**Convener:** J Irlam

**Course entry requirements:** All fifth year MBChB courses

**Course outline:**
The aim of the elective is to provide students with the opportunity to gain clinical experience in a variety of health care settings in a two-week period under the supervision of an on-site supervisor identified by the student.

**DP requirements:** A DP is awarded based on a completed Student Evaluation Form, a Daily Clinical Activity Record and a brief Supervisor Evaluation.

**Assessment:** Coursework: 100%.

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**PTY6012W**  FORENSIC MEDICINE

10 NQF credits at HEQSF level 8

**Convener:** Prof L Martin

**Course entry requirements:** All fifth year MBChB courses

**Course outline:**
This course comprises large group seminars and practical tutorials at the Salt River Forensic Pathology Laboratory of at least two hours’ duration each. Students are expected to complete four tasks during the attachment, attend tutorial sessions and deliver a presentation. There are four task feedback tutorials; the rest of the time is spent in self-directed learning. Core learning outcomes are based on the core knowledge and topics presented in the large group seminars, small group sessions and tutorials, as well as the four topics covered in the four tasks presented during the two-week block. The learning outcomes are categorised broadly into core knowledge, core skills and professional behaviour. The core curriculum has been designed to highlight the forensic pathology and clinical forensic medicine problems and topics that the practitioner will encounter as a generalist. Students are expected to be able to recognise, evaluate, appropriately assess and offer expert opinions on core subjects, in preparation for potential expert testimony in criminal court cases and inquest hearings for the Department of Justice. Students must be able to recognise medico-legal cases (clinical and pathological) that need referral to centres of expertise; to recognise what immediate steps should be taken to prevent loss of evidence before referral; and to ensure preservation of any pathology and evidence before referral.

**DP requirements:** Satisfactory attendance and completion of all requisite coursework/clinical work. 80% of plenary sessions must be attended. Students must achieve a subminimum of 50% in their examination and in their coursework. All practical sessions must be attended.

**Assessment:** Tutors provide students with feedback on their performance whenever an interaction occurs during the large group sessions or small group tutorials. The final mark is made up of in-course assessments (40%) and an end-of-year written paper.

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**HSE1001S**  FUNDAMENTALS OF INTEGRATED HEALTH SCIENCES PART I

0 NQF credits at HEQSF level 5

**Convener:** E Badenhorst
**Course entry requirements:** None

**Course outline:**
This course revisits the content of HUB1006F. As in HUB1006F, students study the health and well-being of the whole person (bio-psycho-social model) through each of the phases of the life cycle. Learning activities are structured such that students acquire a basic understanding of the key physical, psychological, socio-cultural and developmental factors and issues that shape the life cycle. The course aims to develop skills, knowledge and attitudes that will enable students to overcome learning obstacles encountered in HUB1006F. On-going analysis of student performance identifies the skills that require targeted attention. Students receive guidance in developing the relevant language and cognitive skills essential for an integrated study of the health sciences. Their computer and information literacy skills are strengthened, and they explore and apply appropriate orientations to learning. The basis for scientific understanding is taught by integration through clinical reasoning sessions, lectures, tutorials and practicals to give students the opportunity to refine key life skills (e.g. an ability to work effectively in a team, problem-solve, and think critically) that are the central requirements for being an effective healthcare professional.

**DP requirements:** Attendance of and participation in all activities: PBL, lectures, tutorials, practicals; completion of all set assignments by the due dates and completion of all assessment activities. Absence on the ground of illness requires a medical certificate. Validity of absence on other grounds will be considered on an individual basis.

**Assessment:** This comprises two written in-course assessments and a portfolio of semester work assessing academic literacy skills. There is no final examination for this course. Overall marks for the course comprise 45% for basic sciences; 40% for psycho-social/public health; and 15% for the portfolio. The psycho-social/public health mark is made up of 30% discipline-specific material and 10% quantitative literacy skills. Students are required to obtain an overall pass mark of at least 50% and (unless otherwise specified) to pass each of the subcomponents of the course with at least 50%. The overall mark for HUB1010S contributes 40% towards the year mark for HUB1011F.

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**CEM1111S**  CHEMISTRY FOR MEDICAL STUDENTS  
(Faculty of Science)  
0 NQF credits at HEQSF level 50  
**Convener:** Dr S Wilson  

**Course entry requirements:** CEM1011F

**Course outline:**
CEM1111S is a foundational (Intervention Programme) chemistry course and, together with CEM1011X, covers the same material as that in the CEM1011F syllabus. Although CEM1111S and CEM1011X together are equivalent to CEM1011F, the lecture material is not simply repeated. Instead, foundations and concepts pertaining to the core material in the CEM1011F syllabus are discussed in depth. Additional and alternative approaches are used to help students understand this core material. The CEM1111S course comprises three lectures, two tutorials and one practical session per week in the second semester. The lectures and tutorials are one hour each and the practical is three hours. Students have daily contact with the chemistry lecturer and/or tutor.

**DP requirements:** Although there is no summative assessment in CEM1111S, to qualify for the CEM1011X summative assessment (final examination) in June the following year, students have to meet the DP requirements for both CEM1111S and CEM1011X, which together entail: attending and completing all practical sessions, attending all tutorial sessions, completing all worksheets, writing all class tests and taking the practical examination.

**Assessment:** The class record contributes 31% and comprises a practical record (5%); practical examination (7%); tutorials (4%); class tests 1 and 2 (4% each) and class test 3 (7%). The CEM1111S class record together with the CEM1011X class record contributes 45%. The CEM1011X examination contributes 55% and consists of a 3-hour written theory examination.

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**CEM1011X**  CHEMISTRY FOR MEDICAL STUDENTS  
(Faculty of Science)  
18 NQF credits at HEQSF level 5
Convener: Dr S Wilson

Course entry requirements: CEM1111S

Course outline:
CEM1011X is a foundational chemistry course and, together with CEM1111S, covers the same material as that in the CEM1011F syllabus. Students in the Intervention Programme Part 2 are required to take this course. Although CEM1111S and CEM1011X together are equivalent to CEM1011F, the lecture material is not simply repeated. Instead, foundations and concepts pertaining to the core material in CEM1011F are discussed in depth. Additional and alternative approaches are used to help students understand the core material. The course comprises three lectures and one two-hour tutorial session per week in the first quarter and one two-hour tutorial session in the second quarter of the first semester.

Lecture times: Monday, 7th period; Tuesday - Thursday, 1st period

DP requirements: Attendance of all tutorial sessions, writing all tutorial tests and both class tests, and completing all worksheets.

Assessment: The class record contributes 14% and comprises tutorial tests (4% and two class tests: 5% each). The CEM1011X class record together with the CEM1111S class record contributes 45%. The CEM1011X examination contributes 55% and consists of a 3-hour written theory examination.

HSE1002F  FUNDAMENTALS OF INTEGRATED HEALTH SCIENCES PART II
105 NQF credits at HEQSF level 5

Convener: E Badenhorst

Course entry requirements: HUB1010S

Course outline:
This course builds on the knowledge, skills and attitudes acquired in HUB1010S, and prepares students for HUB1007S Introduction to Integrated Health Sciences Part II. In HUB1011F, attention is focused on the core principles and concepts of the basic health sciences (anatomy, physiology and biochemistry), physics, primary healthcare, and public health.

DP requirements: Attendance of and participation in all academic activities (PBL, lectures, tutorials, practicals); completion of all set assignments; and sitting all assessment activities.

Assessment: This comprises three written assessments that examine the range of knowledge, skills and attitudes developed during this course. These assessments contribute 60% of the total mark, and a final end-of-course examination contributes 40% of the mark. The overall mark for the course comprises 60% of marks acquired in HUB1011F and 40% of the total HUB1010S mark. Students are required to pass each of the subcomponents of the course with at least 50%.
BACHELOR OF SCIENCE IN MEDICINE (BSC (MEDICINE))  
[MB001]

Convener:  
Prof A A Katz

Plan codes:  
HUB27 General and Applied Physiology  
HUB28 Biophysics and Neurophysiology  
LAB30 Molecular Biology

Eligibility
FBB1 This programme is available only to MBChB students registered at the University of Cape Town. A candidate who has successfully completed at least the second year of the MBChB curriculum (MB014 or MB020) at this University may, upon application, be allowed to register for this programme.

Duration of the degree programme
FBB2 The curriculum for the degree programme extends over one academic year of full-time study.

Curriculum
[Note: See definition of terms under the General Information section of this handbook for explanatory notes about HEQSF levels and NQF credits.]

FBB3.1 The BSc (Medicine) shall have at least 360 credits, of which a minimum of 120 credits shall be at HEQSF level 7 (third year level) and a maximum of 96 credits at HEQSF level 5 (first year level). Credit may be given towards the BSc (Medicine) for specific MBChB courses passed (see FBB3.2) and for specific additional courses taken (see FBB3.3).

FBB3.2 MBChB courses for which credit may be given towards BSc (Medicine):

<table>
<thead>
<tr>
<th>Number</th>
<th>Course</th>
<th>NQF Credits</th>
<th>HEQSF Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>HUB1006F</td>
<td>Introduction to Integrated Health Sciences Part I</td>
<td>30</td>
<td>5</td>
</tr>
<tr>
<td>HUB1007S</td>
<td>Introduction to Integrated Health Sciences Part II</td>
<td>35</td>
<td>5</td>
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<tr>
<td>CEM1011F</td>
<td>Chemistry for Medical Students</td>
<td>18</td>
<td>5</td>
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<tr>
<td>PHY1025F</td>
<td>Physics</td>
<td>18</td>
<td>5</td>
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<tr>
<td>PTY2000S</td>
<td>Integrated Health Systems Part IB</td>
<td>35</td>
<td>6</td>
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<td>HUB2017H</td>
<td>Integrated Health Systems Part IA</td>
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<tr>
<td>HUB2020S</td>
<td>Special Study Module</td>
<td>16</td>
<td>6</td>
</tr>
<tr>
<td>PTY3009H</td>
<td>Integrated Health Systems Part II</td>
<td>59</td>
<td>7</td>
</tr>
</tbody>
</table>

FBB 3.3 In addition, the student shall enrol for some of the following courses, with the proviso that the total number of credits (MBChB and other) meets the criterion given in FBB3.1 and provided the entry criteria for the courses below are met.

[Note: There is a limit on the number of students that may enter some of the courses below and admission is competitive.]

Second Year Courses offered by Departments in the Faculty of Science:

<table>
<thead>
<tr>
<th>Number</th>
<th>Course</th>
<th>NQF Credits</th>
<th>HEQSF Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>MCB2020F</td>
<td>Biological Information Transfer</td>
<td>24</td>
<td>6</td>
</tr>
<tr>
<td>MCB2021F</td>
<td>Molecular Bioscience</td>
<td>24</td>
<td>6</td>
</tr>
<tr>
<td>MCB2022S</td>
<td>Metabolism and Bioengineering</td>
<td>24</td>
<td>6</td>
</tr>
</tbody>
</table>
Third Year Courses offered by Departments in the Faculty of Health Sciences:

<table>
<thead>
<tr>
<th>Number</th>
<th>Course</th>
<th>NQF Credits</th>
<th>HEQSF Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>HUB3006F</td>
<td>General and Applied Physiology</td>
<td>36</td>
<td>7</td>
</tr>
<tr>
<td>HUB3007S</td>
<td>Human Neurosciences</td>
<td>36</td>
<td>7</td>
</tr>
<tr>
<td>IBS3020W</td>
<td>Molecular Medicine</td>
<td>72</td>
<td>7</td>
</tr>
</tbody>
</table>

Progression and minimum requirement for re-registration
FBB4 Except by permission of the Senate, a candidate who has not satisfactorily completed all of the courses prescribed for the degree within one year of full-time study shall not be permitted to renew his/her registration for the degree.

Distinction
FBB5 The degree may be awarded with distinction (75% to 100%).

Course outlines for BSc (Medicine)
[Note: For MBChB courses see MBChB programme and courses in the previous section.]

**HUB1006F** INTRODUCTION TO INTEGRATED HEALTH SCIENCES PART 1
30 NQF credits at HEQSF level 5
Convener: Dr K Bugarith, Dr G Gunston and Dr F Amien

Course entry requirements: Attendance of and participation in all HUB1006F-related activities in the orientation programme such as “Introduction to Life Cycle”, “Introduction to PBL” and the “Health and Safety” seminar.

Course outline:
The theme of the course is the human life cycle. Students are introduced to the key physical, psychological, social and developmental factors and issues that shape the human life cycle from conception to death. Problem-based learning (PBL) is the central learning activity of the course. Each student is allocated to a PBL group that meets regularly to discuss and analyse a number of carefully designed cases illustrating the key objectives of the course. In addition, students are provided with a range of activities (including lectures and practical sessions) to support their learning. At the conclusion of this course, students will have gained an introductory overview of the human life-span as well as the necessary core knowledge and skills from a range of disciplinary domains (e.g. anatomy, physiology, psychology and sociology).

DP requirements: Attendance of all academic activities, including lectures, problem-based learning sessions, tutorials, workshops, and BHS practical sessions. Submission of all written assignments on time and completion of all in-course assessment activities. Students may not miss any PBL sessions, tutorials, workshops or BHS practical sessions without the written permission of the academic staff responsible for these activities.

Assessment: Both in-course and end-of-course assessments include written and practical components. The written components use a case-based format. In cases where students are unable to write an in-course assessment, for what is deemed a legitimate reason, a deferred assessment may be given. A medical certificate on ground of illness, or appropriate supporting documentation for all approved non-medical reasons, must be submitted when applying for a deferred assessment. In instances where students fail to provide legitimate reasons, with supporting documentation, for being unable to complete an assessment activity, or fail to take a scheduled deferred assessment, a mark of zero will be given for that assessment. A student will not be allowed to miss more than one assessment or have more than one opportunity to take a deferred assessment. In-course assessments are weighted 40% (practical tasks and test: 10%; written class tests: 30%) and of end-of-course assessments are weighted 60% (written theory examination: 50% and structured practical examination: 10%). Sub-minima may be applicable.
HUB1007S  INTRODUCTION TO INTEGRATED HEALTH SCIENCES PART II
35 NQF credits at HEQSF level 5
Convener: Dr G Gunston, Dr K Bugarith and Dr F Amien
Course entry requirements: PPH1001F, HUB1006F, CEM1011F and PHY1025F
Course outline:
The course introduces students to key principles and concepts of the basic sciences of anatomy, biochemistry and physiology, and of public health and family medicine. Problem-based learning (PBL) is the central learning activity of the course. Each student is allocated to a new PBL group that meets regularly to discuss and analyse a number of carefully designed cases illustrating the key objectives of the course. In addition, students are provided with a range of activities to support their learning (including lectures, practical sessions, tutorials and workshops). At the conclusion of this course, students will have acquired an integrated understanding of key South African health challenges within a broader social and environmental context; the epidemiology of the major causes of disease in South Africa; the basic structure and function of all organ systems of the human body; and the basic structure and function of the biochemical components of the human body.
DP requirements: Attendance of all academic activities, including lectures, problem-based learning sessions, tutorials, workshops, and BHS practical sessions; submission of all written assignments on time and completion of all in-course assessment activities. Students may not miss any scheduled activities without the written permission of the academic staff responsible for these activities. Students are required to apply for short leave of absence and submit appropriate supporting documentation should they miss a scheduled activity due to illness or approved non-medical reasons.
Assessment: Assessment includes in-course and end-of-course assessments. Regular self-assessment activities also provide feedback to students on their progress. Assessments include written, computer-based and practical components. Written components use a case-based format. When students are unable to write an assessment for what is deemed a legitimate reason, a deferred assessment may be given. A medical certificate on ground of illness, or appropriate supporting documentation for all approved non-medical reasons, must be submitted when applying for a deferred assessment. Should a student fail to provide legitimate reasons, with supporting documentation, for being unable to complete an assessment activity, or fail to take a scheduled deferred assessment; a mark of zero will be given for that assessment. A student will not be allowed to miss more than one assessment or have more than one opportunity to take a deferred assessment. In-course assessments are weighted 40% and end-of-course assessments are weighted 60% of the final course mark. Sub-minima may apply. If a supplementary examination is awarded, the year mark is included in the final mark.

CEM1011F  CHEMISTRY FOR MEDICAL STUDENTS
(Faculty of Science)
18 NQF credits at HEQSF level 5
Convener: Dr S Wilson
Course entry requirements: None
Course outline:
This introductory course is designed to provide first year medical students with knowledge of the fundamental aspects of chemical theory. The course also serves as a diagnostic tool to explore students' scientific knowledge and the possible need for intervention. It comprises 60 formal contact hours during which selected topics in physical and organic chemistry relevant to biochemistry, physiology, pharmacology, chemical pathology and medical microbiology are covered. Topics have been selected to equip students with the basic understanding of those key chemical principles they require for the medical programme. Formal contact sessions are augmented by a practical course and weekly tutorials. Specific support activities are provided to students who show difficulty in understanding the scientific domain. During the practical component, students are required to demonstrate that they are able to use a variety of laboratory techniques with precision and accuracy.
The practical course also seeks to expose students to the methods used in the acquisition, recording and manipulation of scientific data and expects students to derive inferences from such data.

**Lecture times:** Monday - Thursday, 1st period; Friday, 1st & 5th period

**DP requirements:** Attendance and completion of practical sessions; attendance of tutorial sessions and writing weekly tutorial tests; completion of worksheets; writing class tests and taking the practical examination.

**Assessment:** The class record contributes 45% and comprises a practical record (10%); tutorial tests (5%); two class tests (20%); and a practical examination (10%). The summative examination contributes 55% and consists of a three-hour written theory examination.

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**PHY1025F PHYSICS 1025**

18 NQF credits at HEQSF level 5

**Convener:** Dr S W Peterson

**Course entry requirements:** None

**Course outline:**

The course aims to provide a foundation in physics for later courses in the biological and physical sciences in the medical curriculum. Topics covered include mathematical skills for physics; Newton's laws of translational motion, force, friction, work and energy; bodies in static equilibrium; density and pressure in fluids; fluid flow, viscosity, temperature, gas laws, heat and heat transfer; first law of thermodynamics, human metabolism and first law; wave motion, transverse and longitudinal waves, interference of waves; sound, ear's response to sound, Doppler effect, ultrasound and medical imaging; electric charge and field, electric potential and potential difference, electric current, resistivity and simple circuits; light, reflection and refraction, thin lenses, the human eye.

**DP requirements:** Attendance of all scheduled tutorials and practical sessions; completion of all set written course activities (i.e. tutorial assignments, practical reports and course tests); and a minimum class record of 35%.

**Assessment:** Coursework counts 40% and comprises of two class tests (15% each) and a laboratory record (10%); and the final examination counts 60%.

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**PTY2000S INTEGRATED HEALTH SYSTEMS PART IB**

35 NQF credits at HEQSF level 6

**Convener:** Dr J Ramesar

**Course entry requirements:** HUB2017H

**Course outline:**

The integrated courses HUB2017H, PTY2000S and PTY3009H extend across years 2 and 3 and provide a detailed understanding of normal structure and function of the human body and consequences of disease. Students learn core material in the basic health sciences (gross anatomy, embryology, histology, cell biology, medical biochemistry, molecular biology and physiology) and infectious diseases (medical microbiology, virology and immunology); they study changes in normal structure and function due to disease (anatomical pathology, chemical pathology and haematology) and learn principles of pharmacology/therapeutics and early management. Emphasis is placed on psycho-social matters relating to each case, drawing in relevant aspects of family medicine, primary healthcare, public health, and mental well-being. Students also learn clinical skills, interpretation of data, professional values and ethics, and procedural skills related to the cases studied. They learn about the impact of illness and disease on the individual, family and society, and the role of the healthcare services in alleviating illness. Case-based, group learning is supported by lectures, practical sessions and stand-alone modules. Students are guided to develop key life skills required for an effective healthcare professional, including a multidisciplinary team approach. Cases have relevance to healthcare issues regionally and nationally.

**DP requirements:** Attendance of all problem-based learning sessions, tutorials, stand-alone units and practical sessions; completion of all set assignments and all assessment activities.

**Assessment:** HUB2017H and PTY2000S are assessed together in a final examination at the end of second year. Students must achieve an overall pass in semesters 3 and 4 (year 2) in order to progress to year 3. Students are required to complete a series of in-course assessments during semesters 3 and
4 that contribute 60% of the total mark by the end of semester 4. A summative assessment is held at the end of the year that contributes 40% of the total mark for year 2. March class test: 10%; June class test: 25%; September class test: 15%; November examination: 40%; Language of Medicine assessment: 5%; and portfolio: 5%. A student who fails all class tests in the year and who achieves a failing year mark will not be considered eligible for a supplementary examination, irrespective of the mark achieved. Students who fail the year and are granted a supplementary examination will have their supplementary results calculated in exactly the same way as their original course mark. The only difference is that the marks from the supplementary exam will substitute for the original November examination mark. The original March, June and September class test marks and portfolio of work mark will be retained in calculating the final supplementary results.

**HUB2017H INTEGRATED HEALTH SYSTEMS PART IA**
57 NQF credits at HEQSF level 6
Convener: Dr C Slater

Course entry requirements: HUB1007S. Attendance of all academic activities during Orientation Week.

Course outline:
The integrated courses HUB2017H, LAB2000S and LAB3009H extend across years 2 and 3 and provide the student with a detailed understanding of the normal structure and function of the human body and how these are affected when the body suffers from disease. Students learn core material in the basic sciences (gross anatomy, embryology, histology, cell biology, medical biochemistry, molecular biology and physiology) and infectious diseases (medical microbiology, virology and immunology); changes in normal structure and function caused by disease (anatomical pathology, chemical pathology and haematology); and the principles of pharmacology/therapeutics and early management. Emphasis is placed on psychosocial matters relating to each case, drawing in relevant aspects of family medicine, primary healthcare, public health, and mental well-being. Students also learn clinical skills, interpretation of data, professional values and ethics, and certain procedural skills directly related to the cases studied. They study the impact of disease on the individual, family and society, and the role of the healthcare services in alleviating illness. Case-based group learning is supported by lectures, practical sessions and stand-alone modules. Students learn key life skills required of an effective healthcare professional, including a multidisciplinary team approach. The cases all have relevance to healthcare issues regionally and nationally.

DP requirements: Attendance of all problem-based learning sessions, tutorials, stand-alone units and practical sessions; completion of all set assignments and assessment activities.

Assessment: HUB2017H and LAB2000S are assessed together in a final examination at the end of second year. Students must achieve an overall pass in semesters 3 and 4 (year 2) in order to progress to year 3. Students are required to complete a series of in-course assessments during semesters 3 and 4 that contribute 60% of the total mark by the end of semester 4. A summative assessment is held at the end of the year that contributes 40% of the total mark for year 2. March class test: 10%; June class test: 25%; September class test: 15%; November examination: 40%; Language of Medicine assessment: 5%; and portfolio: 5%. A student who fails all class tests in the year and who achieves a failing year mark will not be considered eligible for a supplementary examination, irrespective of the mark achieved. Students who fail the year and are granted a supplementary examination will have their supplementary results calculated in exactly the same way as their original course mark. The only difference is that the marks from the supplementary exam will substitute for the original November examination mark. The original March, June and September class test marks and portfolio of work mark will be retained in calculating the final supplementary results.

**HUB2020S SPECIAL STUDY MODULE**
16 NQF credits at HEQSF level 6
Convener: Dr V Zweigenthal

Course entry requirements: All first year MBChB courses
Objective: The Special Study Module (SSM) is designed to give students an opportunity for independent supervised work in an area of interest and develop skills for rigorous scientific medical practice.

Course outline:
The Special Study Module (SSM) comprises a compulsory four-week period of supervised study, designed to complement the core curriculum and to broaden the learning experience. During this experience, each student undertakes a project designed to give opportunities to explore particular interests and develop intellectual and practical skills in a selected subject area. Each student selects one module from a list of modules offered by different Health Sciences departments. SSMs cover a wide range of topics, including basic medical science, pathology, clinical science, behavioural science, epidemiology, and community health. An SSM may take the form of data interpretation, a literature review, a patient record review, a survey, a practical project (language/music/other) or a laboratory-based study. To encourage depth of learning, students work individually or in small groups, and with a designated supervisor. Where human participants are the subject of the SSM, students are required to abide by the ethical requirement obtained for the project, adopt an ethical approach and obtain informed, signed consent from research participants.

DP requirements: Attendance of the library training session. Attendance and completion of specified learning objectives decided upon by the student and supervisor at the start of the SSM.

Assessment: Assessment in SSMs is based on a referenced, written report of 2500 – 3000 words, relating to the field of work and subject to a formative process throughout the SSM. Performance is marked using a criterion-based marking schedule, which is described in the SSM information booklet. A random selection of all SSM reports (and those with borderline or very high or low marks), is double-marked by the convener and a second marker (either another member of staff in that unit, and/or the overall convener, or the external examiner). The SSM Moderating Board decides the final mark. Students who fail the SSM are required to re-submit an improved written report at the end of the year.

PTY3009H INTEGRATED HEALTH SYSTEMS PART II
59 NQF credits at HEQSF level 7
Convener: Prof G Louw

Course entry requirements: PTY2000S.

Course outline:
The integrated courses HUB2017H, PTY2000S and PTY3009H extend across years 2 and 3 and provide a detailed understanding of normal structure and function of the human body and consequences of disease. Students learn core material in the basic sciences (gross anatomy, embryology, histology, cell biology, medical biochemistry, molecular biology and physiology) and infectious diseases (medical microbiology, virology and immunology); they study changes in normal structure and function due to disease (anatomical pathology, chemical pathology and haematology) and learn principles of pharmacology/therapeutics and early management. Emphasis is placed on psycho-social matters relating to each case, drawing in relevant aspects of family medicine, primary healthcare, public health, and mental well-being. Students also learn clinical skills, interpretation of data, professional values and ethics, and procedural skills related to the cases studied. They learn about the impact of illness and disease on the individual, family and society, and the role of the healthcare services in alleviating illness. Case-based, group learning is supported by lectures, practical sessions and stand-alone modules. Students are guided to develop key life skills required for an effective healthcare professional, including a multidisciplinary team approach. Cases have relevance to healthcare issues regionally and nationally.

DP requirements: Attendance of all problem-based learning sessions, tutorials, stand-alone units and practical sessions; completion of all set assignments and assessment activities.

Assessment: Assessment tasks include written papers, computerised tests, practical examinations and a portfolio of work that comprises written assignments, computerised EMI and MCQ tests, oral assessments and practical book work. Regular self-assessment activities provide feedback to students on their progress. In year 3, all the in-course assessments comprise 45% of the total final mark. The final examination at the end of year 3 constitutes 55% of the total final mark. The
weightings for the final mark are: 25% March class test, 15% neurosciences class test, 5% portfolio and 55% final examination.

**MCB2020F  BIOLOGICAL INFORMATION TRANSFER**  
*Entrance is limited to 140 students.*  
24 NQF credits at HEQSF level 6  
**Convener:** Dr R Ingle  
**Course entry requirements:** CEM1000W or equivalent, BIO1000F and BIO1004S (or equivalent).  
**Course outline:**  
This course introduces students to concepts of molecular genetics that are fundamental to molecular and cell biology. Topics covered include genome organisation and gene structure of viruses, plasmids, bacteria (including plasmids), transposons, plants and animals; horizontal gene transfer; mechanisms of heredity; prokaryotic and eukaryotic gene structure and information transfer as applied to viruses, plasmids, bacteria, plants and animals; basic cell signalling in bacteria, plants and animals; and principles of evolutionary genetics.  
**Lecture times:** Monday - Friday, 4th period  
**DP requirements:** 40% test average; 50% average for assignments; attendance at practicals.  
**Assessment:** Tests and assignments count 40%; practicals count 10%; one three-hour paper written in June counts 50%. A subminimum of 40% in the examination is required.

**MCB2021F  MOLECULAR BIOSCIENCE**  
*Entrance is limited to 140 students.*  
24 NQF credits at HEQSF level 6  
**Convener:** Dr T Oelgeschläger  
**Course entry requirements:** CEM1000W (or equivalent), BIO1000F and BIO1004S (or equivalents)  
**Course outline:**  
This course will introduce students to the concepts of biological chemistry fundamental to molecular biology as a basis to understanding the distinctive properties of microbial and eukaryotic living systems. Properties of biological molecules and macromolecules will be discussed, as well as recombinant DNA technology and energy production in cells. Students will also learn basic molecular techniques and experimental design.  
**Lecture times:** Monday - Friday, 5th period  
**DP requirements:** 40% test average; 50% average for assignments; attendance at practicals.  
**Assessment:** Tests and assignments count 40%; practicals count 10%; one three-hour paper written in June counts 50%. A subminimum of 40% in the examination is required.

**MCB2022S  METABOLISM & BIOENGINEERING**  
*Entrance is limited to 140 students.*  
24 NQF credits at HEQSF level 6  
**Convener:** Associate Professor L Roden  
**Course entry requirements:** MCB2020F and MCB2021F (or at least 40% subminimum for the examinations and a final mark of 45% (supplementary) for these courses)  
**Course outline:**  
This course will introduce students to some key aspects of metabolic energy production and how this can be exploited in developing renewable energy production. It aims to raise awareness of issues at the forefront of the discipline and give students the ability to dissect problems in order to identify solutions. Specific topics covered will include the metabolic diversity in Bacteria and Archaea e.g. nitrogen fixation, methane production; anoxygenic photosynthesis will be considered and well as how the growth of microorganisms can be controlled by physical, chemical, mechanical, or biological means. The harnessing of photosynthesis in plants and algae for renewable energy production, as well as the conversion of biomass to other fuels, will also be discussed.  
**Lecture times:** Monday - Friday, 5th period
DP requirements: 40% test average; 50% average for assignments; attendance at practicals.
Assessment: Tests and assignments count 40%; practicals count 10%; one three-hour paper written in November counts 50%. A subminimum of 40% in the examination is required.

**MCB2023S FUNCTIONAL GENETICS**

*Entrance is limited to 140 students*

24 NQF credits at HEQSF level 6

**Convener:** Professor N Illing

**Course entry requirements:** MCB2020F and MCB2021F (or at least a 40% subminimum for the examinations and a final mark of 45% (supplementary) for these courses

**Course outline:**
The course lays the foundation for the major in genetics, and shows how the tools of classical and molecular genetics can be applied to understanding the regulation of gene expression, cell differentiation and patterning in bacteria and eukaryotes. Concepts covered include forward and reverse genetics; the genetics of mitochondria and chloroplasts; human genetics; the genetic analysis of cell cycle regulation and axis determination in Drosophila; microbial genetics, including regulation of the lac operon; and lysogeny and lysis of bacteriophage lambda.

**Lecture times:** Monday - Friday, 4th period

**DP requirements:** 40% test average; 50% average for assignments; attendance at practicals.

**Assessment:** Tests and assignments count 40%; practicals count 10%; one three-hour paper written in November counts 50%. A subminimum of 40% in the examination is required.

**HUB3006F GENERAL AND APPLIED PHYSIOLOGY**

36 NQF credits at HEQSF level 7

**Convener:** Assoc Prof A Bosch

**Course entry requirements:** HUB2019F, HUB2021S

**Objective:** Understanding the physiology with a view to furthering study at the Honours level

**Course outline:**
The semester theme is “Living, working and playing”. Topics dealt with include metabolism and homeostasis, sports nutrition and metabolism, obesity and diabetes, muscle physiology, cardio-respiratory physiology, sporting performance, exercise physiology, thermoregulation, and physiology in extreme environments. At the end of the course students should have a good understanding of the physiology related to movement, sport and exercise. They should understand physiological control, the basics of the physiological components underlying athletic performance, and energy balance and key components of sports nutrition. In addition, they should have a good understanding of the cardiovascular system, muscle function, and the effect of exercise on health, particularly diabetes and obesity. Students will prepare a seminar topic which will be presented as a PowerPoint presentation towards the end of the semester, during the “practical” time slot.

**DP requirements:** Attendance at all practicals, (including tutorials and seminar presentations held during the “practical” time slot), 40% average in class tests and an average of 50% for all assignments.

**Assessment:** Class test (30%); assignments/seminar presentation (5%); practicals (15%); and examinations (written theory and practical theory) (50%). An oral examination may be required in the case of selected students.

**HUB3007S HUMAN NEUROSCIENCES**

36 NQF credits at HEQSF level 7

**Convener:** Dr A Gwanyanya

**Course entry requirements:** HUB3006F (or equivalent) e.g. a result of at least 60% in HUB2017H. Exceptions are at the discretion of the convener

**Objective:** To obtain a good grasp of core theoretical and practical concepts of human neurophysiological function.

**Course outline:**
This course offers theoretical and practical instructions on advanced concepts in neuroscience, such as embryological development and repair of the nervous system, histological and gross anatomical appearances of the brain, electrophysiology, principles of electrical and morphological brain imaging, neuronal signalling, signal transduction in sensory, motor and autonomic nervous systems, vision and pain perception, eating disorders, mechanisms of learning and the development of memory. At the end of the course students should be able to apply knowledge gained and practical skills acquired to solve problems in neurophysiology; read and critically evaluate neuroscience literature; apply knowledge of human physiology in medical fields in the general market place; use acquired skills in assisting with undergraduate practical demonstrations; and teach basics of human physiology.

**DP requirements:** Attendance at all practicals, 40% average mark for class tests and an average of 50% for all assignments.

**Assessment:** Class tests (30%); tutorial project assignments (5%); practical experiments (15%); and examinations (theory and practical) (50%). An oral examination may be offered in case of selected students.

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**IBS3020W  MOLECULAR MEDICINE**

72 NQF credits at HEQSF level 7

**Convener:** Prof A A Katz

**Course entry requirements:** For students admitted to the intercalated BMedsHons-MBChB track: Students wishing to do the intercalated BMedsHons must have passed second year MBChB, must generally have obtained an average of at least 70% in the courses listed below, with no less than 60% for any single course (exceptions to be considered on merit by the course admission committee): CEM1011F or (for Intervention Programme Students) CEM1111S and CEM1011X, Chemistry; PHY1025F; HUB1006F and HUB1007S; or (for Intervention Programme Students) HUB1010S and HUB1011F; HUB2017H; LAB2000S; and MDN2001S. For students wishing to exit with a BMedsHons: Students must have passed second year MBChB with an average of at least 60% and with no less than 55% for any of the courses mentioned above (exceptions to be considered on merit by the course selection committee).

**Course outline:** The course includes lectures, tutorials and practical work that cover core and advanced topics on the molecular basis of disease. Core topics include DNA, RNA and protein structure, function, and how these are integrated to control normal cellular process such as signalling, proliferation, apoptosis, development and differentiation. Fundamentals of molecular and cellular immunology; molecular genetics are introduced. Advanced topics include stem cells, their biology and application; cancer biology; and infectious agents, infectious diseases and inherited diseases. These topics are presented in a multidisciplinary fashion, integrating principles of genetics and genomics, eukaryotic gene regulation, and cell signalling. Basic bioinformatics of DNA and proteins are introduced. Practical laboratory work covers theoretical and practical aspects of molecular, cellular and biochemical laboratory techniques, with emphasis on recombinant DNA techniques. There is also an introduction to genomic, proteomic and computational approaches to study molecular systems.

**DP requirements:** Attendance of all practicals and an average mark of 50% in tests and assignments/laboratory reports combined.

**Assessment:** Two tests and assignments/laboratory reports that are written during the course and one examination at the end of the course. Tests contribute 45%, assignments/laboratory reports contribute 10% and the end-of-year examination contributes 45% to the course final mark.
Conveners:
V Norman (Audiology) and Dr M Pascoe (Speech-Language Pathology)

[BSc Audiology programme code: MB011 or MB018 (Intervention Programme).
Plan code: MB011AHS02. SAQA registration number: 12105.]
[BSc Speech-Language Pathology programme code: MB010 or MB019 (Intervention Programme).
Plan code: MB010AHS01. SAQA registration number: 12107.]

These two degree programmes lead to the registration of graduates with the Health Professions Council of South Africa as speech-language therapists or audiologists. Graduates are required by the HPCSA to complete one year of community service before they may practise their professions in South Africa. Speech-language Pathology is the discipline addressing the assessment and management of individuals who have difficulties with speech (including disorders of articulation, voice and fluency) language, communication and swallowing. Audiology is the discipline dealing with the assessment and management of hearing and balance, hearing impairment and deafness. Speech-language therapists and audiologists work with people of all ages. These professions require background knowledge of biological, physical, psychological and behavioural sciences, which are all part of the learning programme. The field offers wide clinical and research opportunities.

Duration of programme
FBC1 Each curriculum extends over four years of full-time study. Students who pass through the Intervention Programme will take an additional year to complete the degree.

Curriculum
[Note: See p9 for explanatory notes about HEQSF levels and NQF credits.]

<table>
<thead>
<tr>
<th>FBC2.1</th>
<th>First year Course</th>
<th>NQF Credits</th>
<th>HEQSF Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>PPH1001F</td>
<td>Becoming a Professional</td>
<td>15</td>
<td>5</td>
</tr>
<tr>
<td>PPH1002S</td>
<td>Becoming a Health Professional</td>
<td>15</td>
<td>5</td>
</tr>
<tr>
<td>AHS1003F</td>
<td>Speech and Hearing Sciences</td>
<td>18</td>
<td>5</td>
</tr>
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<td>PSY1004F</td>
<td>Introduction to Psychology Part I or</td>
<td></td>
<td></td>
</tr>
<tr>
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<td>Introduction to Psychology Part I Plus</td>
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<td>5</td>
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<td>Introduction to Psychology Part II or</td>
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<td></td>
</tr>
<tr>
<td>PSY1007S</td>
<td>Introduction to Psychology Part II Plus</td>
<td>18</td>
<td>5</td>
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<td>HUB1014S</td>
<td>Anatomy for Communication Sciences</td>
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<td>5</td>
</tr>
<tr>
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<td>Early Intervention</td>
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<tr>
<td>AHS1042F</td>
<td>Human Communication Development</td>
<td>18</td>
<td>5</td>
</tr>
<tr>
<td>AXL1300F</td>
<td>Introduction to Language Studies</td>
<td>18</td>
<td>5</td>
</tr>
<tr>
<td>AHS1045S</td>
<td>Basis of Hearing and Balance</td>
<td>18</td>
<td>5</td>
</tr>
<tr>
<td>AXL1301S</td>
<td>Introduction to Applied Language Studies</td>
<td>18</td>
<td>5</td>
</tr>
</tbody>
</table>

Course credits per year: 176

FBC2.2 A student who fails one or more of the following courses in the first semester may be required to enter the
Intervention Programme Parts 1 and 2:

AHS1003F Speech and Hearing Science 18 5
PSY1004F Introduction to Psychology Part I 18 5
AHS1042F Human Communication Development 18 5
AXL1300F Introduction to Language Studies 18 5

FBC2.3 A student who fails one or more of the following courses at the end of semester 2 of the standard curriculum may be required to enter the Intervention Programme Part 2:

**In the case of BSc Audiology:**
PSY1005S Introduction to Psychology Part II 18 5
AHS1025S Early Intervention 18 5
AHS1045S Basis of Hearing and Balance 18 5

**In the case of BSc Speech-Language Pathology:**
PSY1005S Introduction to Psychology Part II 18 5
AHS1025S Early Intervention 18 5
AXL1301S Introduction to Applied Language Studies 18 5

[See rule FBC3 below for the Intervention Programme curriculum. The Intervention Programme starts in July and first year ends in June of the following year, after which the student joins the second semester of the standard first year curriculum.]

FBC2.4 Second year

<table>
<thead>
<tr>
<th>Number</th>
<th>Course</th>
<th>NQF</th>
<th>Credits</th>
<th>HEQSF</th>
<th>Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>SLL1028H</td>
<td>Xhosa for Health and Rehabilitation Sciences* or ........................................18 5</td>
<td></td>
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<tr>
<td>SLL1048H</td>
<td>Afrikaans for Health and Rehabilitation Sciences* ........................................18 5</td>
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<tr>
<td>PSY2006F</td>
<td>Research in Psychology I ..........................................................24 6</td>
<td></td>
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<tr>
<td>PSY2010S</td>
<td>Cognition and Neuroscience ..............................................................24 6</td>
<td></td>
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<tr>
<td>AHS2047S</td>
<td>Paediatric Rehabilitative Audiology .........................................18 6</td>
<td></td>
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<tr>
<td>AHS2106F</td>
<td>Child Language .....................................................................21 6</td>
<td></td>
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<tr>
<td>AHS2046F</td>
<td>Diagnostic Audiology ...................................................................18 6</td>
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<tr>
<td>AHS2110W</td>
<td>Clinical Audiology I ...............................................................24 6</td>
<td></td>
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<tr>
<td>AHS2111S</td>
<td>Diagnostic Audiology in Special Populations ................................15 6</td>
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<tr>
<td>AHS2107F</td>
<td>Child Speech ........................................................................18 6</td>
<td></td>
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<tr>
<td>AHS2108W</td>
<td>Clinical Speech Therapy I ....................................................24 6</td>
<td></td>
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<tr>
<td>AHS2109S</td>
<td>School-based Interventions ......................................................21 6</td>
<td></td>
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<tr>
<td><strong>Total credits per year</strong></td>
<td>...............................................................162/168</td>
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</tbody>
</table>

[*Students who speak an African language as home language will be required to register for Afrikaans; those who speak English or Afrikaans as a home language will register for Xhosa.]*

FBC2.5 Third year

<table>
<thead>
<tr>
<th>Number</th>
<th>Course</th>
<th>NQF</th>
<th>Credits</th>
<th>HEQSF</th>
<th>Level</th>
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<tbody>
<tr>
<td>AHS1054W</td>
<td>South African Sign Language .........................................................8 5</td>
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<tr>
<td>AHS3078H</td>
<td>Research Methods and Biostatistics I ..............................................10 7</td>
<td></td>
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<tr>
<td>AHS3008H</td>
<td>Clinical Audiology II ............................................................30 7</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>AHS3062F</td>
<td>Rehabilitation Technology .................................................................22 7</td>
<td></td>
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<tr>
<td>AHS3065S</td>
<td>Adult Rehabilitative Audiology ................................................18 7</td>
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<tr>
<td>AHS3075F</td>
<td>OAEs and Electro physiology ..........................................................22 7</td>
<td></td>
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<tr>
<td>AHS3104S</td>
<td>Vestibular Management ................................................................15 7</td>
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</tbody>
</table>
### Rule 62: Rules and Curricula for Undergraduate Programmes

#### Number Course NQF Credits HEQSF Level

**AHS3105F**  
Public Health Audiology ............................................................... 15 7

*Courses for Speech-Language Pathology students:*

**AHS3004H**  
Clinical Speech Therapy II ............................................................ 30 7

**AHS3071F**  
Acquired Neurogenic Language Disorders .................................. 22 7

**AHS3072S**  
Paediatric Dysphagia and Motor Speech ..................................... 22 7

**AHS3073F**  
Adult Dysphagia and Motor Speech ............................................ 18 7

**AHS3102F**  
Child Language II ........................................................................ 15 7

**AHS3103S**  
Voice .................................................................................................. 15 7

*Total credits per year ................................................................. 140*

**FMB2.6 Fourth year**

<table>
<thead>
<tr>
<th>Number</th>
<th>Course</th>
<th>NQF Credits</th>
<th>HEQSF Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>AHS4000W</td>
<td>Research Report ................................................................. 30 8</td>
<td></td>
<td></td>
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<tr>
<td>AHS4067S</td>
<td>Seminars in Communication Sciences ........................................ 4 8</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Courses for Audiology students:*

**AHS4008H**  
Clinical Audiology IIIA ............................................................ 45 8

**AHS4009H**  
Clinical Audiology IIIB ............................................................ 45 8

*Courses for Speech-Language Pathology students:*

**AHS4005H**  
Clinical Speech Therapy IIIA ..................................................... 45 8

**AHS4006H**  
Clinical Speech Therapy IIIB ..................................................... 45 8

*Total credits per year ................................................................. 124*

*Total credits for programme ...................................................... 600/606*

### Intervention Programme

**FBC3.1** The following courses must be satisfactorily completed during the Intervention Programme by a student who enters the Intervention Programme after semester 1 of the standard curriculum:

#### Intervention Programme Part 1:

<table>
<thead>
<tr>
<th>Number</th>
<th>Course</th>
<th>NQF Credits</th>
<th>HEQSF Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>HSE1003S</td>
<td>Preparation for Entry-level Psychology for Health and Rehabilitation Sciences Part I ................................................................. 18 5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HSE1004S</td>
<td>Fundamentals of Speech and Hearing Sciences ........................................ 18 5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HSE1005S</td>
<td>Foundational Concepts in Human Communication Development 18 5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>AXL1302S</td>
<td>Linguistics Foundation ................................................................. 18 5</td>
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</tr>
</tbody>
</table>

**FBC3.2** A student who fails HSE1003S or AXL1302S or HSE1004S or HSE1005S will be required to register for and complete a summer term course and to rewrite the examination at the end of this course (in December of the year in which he/she failed).

**FBC3.3** A student entering IP who failed PSY1004F or PSY1006F in the first semester of the standard first year programme will be required not only to pass HSE1003S but also to register for PSY1006F in IP2.

**FBC3.4** The following courses must be satisfactorily completed during the Intervention Programme by a student who has completed the Intervention Programme Part 1 or who is required to enter the Intervention Programme after semester 2 of the standard curriculum:

#### Intervention Programme Part 2:

<table>
<thead>
<tr>
<th>Number</th>
<th>Course</th>
<th>NQF Credits</th>
<th>HEQSF Level</th>
</tr>
</thead>
</table>
Number Course NQF Credits HEQSF Level
PSY1006F Introduction to Psychology Part I Plus* ........................................ 10 5
HSE1006F Foundational Concepts in Early Intervention............................... 18 5
HSE1007F Foundations of Hearing and Balance (Audiology students).......... 18 5
AXL1303F Sociolinguistics Foundation (Speech-Lang Path students) .......... 18 5
Total credits per year .................................................................................. 118

[*Note: For students who failed PSY1006F or PSY1004F in the first semester of first year.]

FBC3.5 Once a student has satisfactorily completed all the prescribed courses of the Intervention Programme, he/she may proceed to semester 2 of the standard first year curriculum.

Attendance and DP (Due Performance) requirements
FBC4 (a) Attendance at all lectures is compulsory. If a student misses a lecture without permission, he/she may be prohibited from taking the examination and could fail the course.
(b) A minimum of 80% attendance is required at clinics. If this attendance requirement is not met, the student will be required to repeat the course or block (clinical rotation).
(c) Absence from clinics or other commitments on medical grounds requires a medical certificate. Validity of absence on grounds of personal or other problems will be considered on an individual basis by the staff of the Division.
(d) All coursework must be completed.
(e) Students who do not demonstrate professional conduct will receive a written warning. Thereafter, violations of professional conduct will result in DP being refused for the course in question.

Progression rules
FBC5.1 Students may not proceed to courses which have prerequisites until they have successfully completed the prerequisite courses (see individual course outlines in the pages that follow).
FBC5.2 A student is required to pass AHS2106F Child Language and AHS2107F Child Speech in order to continue the second semester of the second year clinical practical course AHS2108W Clinical Speech Therapy I. If a student should fail either course, he/she will have to deregister from the clinical course AHS2108W at the start of the second semester. The student will continue with the clinical course AHS2108W following successful completion of AHS2107F and/or AHS2106F in the following year, if permitted to repeat these courses.
FBC5.3 A student is required to pass AHS3071F Acquired Neurogenic Language Disorders and AHS3073F Adult Dysphagia and Motor Speech in order to continue with the second semester of the third year clinical practical course AHS3004H Clinical Speech Therapy II. If a student should fail these courses, he/she will have to deregister from the clinical course AHS3004H. The student will then continue with the programme following successful completion of AHS3071F and/or AHS3073F in the following year. Students will retain credit for the clinical hours obtained in the first semester of the clinical course.
FBC5.4 A student is required to pass both AHS3062F Rehabilitation Technology and AHS3075F OAEs & Electrophysiology in order to continue with second semester of AHS3008H Clinical Audiology II. If a student fails either AHS3062F or AHS3075F, he/she will have to deregister from the clinical course AHS3008H. The student will then continue with the programme following successful completion of
AHS3062F and/or AHS3075F in the following year. Students will retain credit for the clinical hours obtained in the first semester of AHS3008H.

FBC5.5 If a student is registered only for theoretical modules for any semester, he/she continues to be involved in clinical work under the direction of the clinical co-ordinator, and receives credit for additional clinical hours.

FBC5.6 First year students are expected to complete independently organised electives requiring observation of clinical work in a variety of settings, and professional activities as per programme requirements. Total elective hours are 20, to be completed prior to registration for the second year of study.

FBC5.7 In the fourth year clinical courses AHS4005H Clinical Speech Therapy IIIA, AHS4006H Clinical Speech Therapy IIIB, AHS4008W Clinical Audiology IIIA and AHS4009H Clinical Audiology IIIB, students are required to pass the final qualifying examinations in order to pass the course (i.e. obtain a minimum mark of 50% for each FQE).

If a student fails any section of the examination in each course, the student will fail the course, and a maximum mark of 49% will be awarded.

In the first semester: If a student fails the final qualifying examination in a course in June, and the final examination mark is above 45%, he/she may be offered a re-assessment of the section that has been failed, in November (at the same time as the second semester final qualifying examinations). If the student fails to obtain an overall mark of 45% in June, he/she will not qualify for a re-assessment and will fail the course. In the second semester: If the student fails the November final qualifying examination in a course, and the final examination mark is above 45%, the student may be offered a re-examination within two weeks of the final examination.

FBC5.8 In the fourth year clinical course: AHS4005H, AHS4006H, AHS4008H and AHS4009H, the student must pass each clinic of each block (obtain a minimum mark of 50% for each clinic). If the student fails any clinic, he/she will be required to repeat and pass the clinic.

FBC5.9 Following a supplementary examination (if awarded), the final mark in a course will be determined as follows: coursework: 70%; supplementary examination mark: 30%.

Readmission rules (standard programme and Intervention Programme)

FBC6.1 Except by permission of the Senate, a student will not be permitted to renew his/her registration for the degree, or may have his/her registration cancelled:

(a) if he/she is in the Intervention Programme and fails any course in it (no supplementary examinations are allowed for IP2 courses but students who fail an IP1 course may be allowed to repeat the course as a summer term course in the same year and write another examination. If the student fails this examination, he/she may be refused readmission);

(b) if he/she fails a course which he/she is repeating;

(c) unless he/she, from the second year of study, successfully completes in each year’s examination cycle half or more of the course load for which he/she is registered in that year (an examination cycle being an examination plus a supplementary or deferred examination, if awarded);

(d) unless he/she successfully completes all the prescribed courses for any single year in two years;

(e) if he/she is unable to complete the standard programme in six years;
(f) if he/she is found guilty of unprofessional behaviour or deemed to be impaired.

FBC6.2 A student who has not fulfilled the required number of clinical hours will not be permitted to graduate.

[Note: These rules must be read in conjunction with the general rules in the front section of this handbook.]

**Distinction**

FBC7 The degree may be awarded with distinction (average of 75% or above for all courses from first to final year of study).

**Courses for BSc Audiology and BSc Speech-Language Pathology:**

**PPH1001F** BECOMING A PROFESSIONAL  
15 NQF credits at HEQSF level 5  
**Convener:** L Olckers  
**Course entry requirements:** None  
**Course outline:**  
This course introduces first year students in all health sciences professions to professionalism and professional conduct. The course aims to promote the conduct, knowledge, attitudes and values associated with being a professional and a member of a professional team. Students learn interpersonal skills, including being non-judgemental, empathetic, ethical and respectful of human rights when working with colleagues, clients, patients and community members who may have different values and traditions. Students learn theory on interviewing and interpersonal skills, which is applied in simulated and real interviews; theory related to group and social roles applied in simulated experiences to build team membership and leadership skills; and critical analysis of and reflection on professional conduct, diversity, health and human rights. The educational approach is participatory and experiential and all students are required to engage actively in small learning groups. Academic, digital and information literacies are systematically integrated from the outset. The course also includes a workshop on HIV-AIDS, designed to introduce students to the relevance of HIV-AIDS issues in their private and professional lives.  
**DP requirements:** Attendance at all small group learning sessions and other academic commitments, including the HIV-AIDS workshop; completion of all set assignments and assessment activities.  
**Assessment:** Continuous, performance-based assessment provides students with regular feedback. In-course assignments comprise 60% of the total mark. The final, summative exam assessment makes up 40% of the total mark.

**PPH1002S** BECOMING A HEALTH PROFESSIONAL  
15 NQF credits at HEQSF level 5  
**Convener:** L Olckers  
**Course entry requirements:** PPH1001F  
**Course outline:**  
This course builds on the knowledge and skills gained in PPH1001F Becoming a Professional. Focus is on the primary health care approach and disability. The course equips students to work collaboratively on a community-oriented project based on the primary healthcare principles and approach including comprehensive healthcare (promotive, preventive, curative, rehabilitative and palliative care within the primary, secondary and tertiary levels of care), intersectoral collaboration, community involvement, and accessibility of and equity in healthcare. Students are required to apply the knowledge, skills and values from PPH1001F to develop an appreciation of the
contribution of all healthcare professionals to the promotion, maintenance and support of health and the healthcare of individuals, families and communities within the context of disability. The educational approach is participatory and project-based and all students are required to engage actively in the project and in small learning groups. Academic, digital and information literacies are systematically integrated from the outset. The course includes a basic life support skills workshop.

**DP requirements:** Attendance at all group sessions, community and health service site visits and the life support skills workshop; completion of all assignments and assessment activities.

**Assessment:** Continuous, performance-based assessment provides students with regular feedback and comprises 60% of the total mark. The final summative assessment makes up 40% of the total mark.

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**AHS1003F  SPEECH AND HEARING SCIENCES**
18 NQF credits at HEQSF level 5

**Convener:** Assoc Prof L Ramma

**Course entry requirements:** None

**Course outline:**
The aim of this course is an understanding of the nature of sound, how sound is perceived by humans and how speech is produced. Content includes the nature, dimensions and parameters of sound; transmission of sound; analysis of sound; resonance; measurement of sound; range of hearing; the concept of threshold; concepts of loudness and pitch; masking as well as binaural hearing; speech production; nature of speech; vocal anatomy, the vocal tract articulators and resonators; linguistic function of speech sounds as well as spectra and spectrograms. Skills taught include basic numeracy, interpretation of graphs as well as ability to relate physical concepts of sound to speech and hearing. Students should develop an appreciation of the physical nature of sound as well as an appreciation of the fact that perception of sound is an individual experience.

Teaching and learning activities comprise lectures; practical demonstrations; assigned activities, self-directed study (websites), and group discussions.

**DP requirements:** Attendance at all lectures; completion of all coursework.

**Assessment:** In-course assessments comprise bi-weekly quizzes, two summative tests and are weighted 30% per test (total of 60%); the final summative assessment in June contributes 40% towards the final mark. All assessments are based on independent work.

---

**PSY1004F  INTRO TO PSYCHOLOGY PART 1**

*(Faculty of Humanities)*
18 NQF credits at HEQSF level 5

**Convener:** Dr L Schrieff-Elsin

**Course outline:**
The course aims to introduce the student to some of the areas of specialisation within psychology. These include history of psychology, biopsychology and memory, genetics and evolutionary psychology, health psychology, developmental psychology, psychopathology and psychotherapy, and learning. Students are taught a great deal about plagiarism and develop skills necessary to write essays and prepare other submissions to the Psychology department.

**Lecture times:** 1st or 5th period.

**DP requirements:** Satisfactory completion of all assignments by due date, attend at least 80% of tutorials, complete all class tests. In addition, obtain one Student Research Participation Programme (SRPP) point or equivalent.

**Assessment:** Coursework (term assignments and tests) counts 50%; one two-hour examination in June counts 50%. Students are expected to complete the June examination as well as all coursework before being awarded a pass in this class. **NOTE:** Credit will not be given for both PSY1004F and PSY1006F.
PSY1006F  INTRODUCTION TO PSYCHOLOGY PART 1 +
10 NQF credits at HEQSF level 5
Convener: Dr L Schrieff-Elson
Course entry requirements: PSY1006F is only open to students registered in the Humanities Faculty Extended Degree Programme (HB062) who hope to major in Psychology or Organisational Psychology, and to students in named Health Sciences and Social Development programmes who do not meet the APS requirements for PSY1004F. Students registered for HB062 must have completed MAM1022F and MAM1016S. Students registered for Social Development programmes (HB063) must also be registered for MAM1014F.
Co-requisites: PSY1004F
Course outline:
The purpose of this course is to augment and support its co-requisite course: PSY1004F Introduction to Psychology Part 1. It aims to improve students’ performance by enhancing their grasp of key ideas and concepts, and by developing their mastery of the disciplinary discourse. It provides additional pedagogic enrichment in the form of regular Plus Tuts that extend into Writing Hub exercises and consultations. In these tutorials, students will receive explicit support around the co-requisite course assignments and detailed feedback on their written work.
Lecture times: Tutorial times by sign-up with the department.
DP requirements: 100% tutorial attendance plus successful completion of all coursework assignments.
Assessment: Coursework 100% comprising of tutorial assessments and other written work.

PSY1005S  INTRO TO PSYCHOLOGY PART 2
18 NQF credits at HEQSF level 5
Convener: Dr L Schrieff-Elson
Course entry requirements: PSY1004F
Course outline:
This course builds on the content covered in Introduction to Psychology part 1. There is a major focus on research methods, both quantitative and qualitative methods. The student is also introduced to other areas of specialization, including intelligence, consciousness, emotion and motivation, personality and social psychology. With a focus on research methods, students develop skills necessary to write a research report and prepare other submissions to the Psychology department and to carry out conceptual analyses of research materials and results.
Lecture times: 1st or 5th period.
DP requirements: Satisfactory completion of all assignments by due date, attend at least 80% of classroom tutorials, submit all statistic lab-based exercises, complete all class tests. In addition, obtain 1 Student Research Participation Programme (SRPP) point or equivalent.
Assessment: Coursework (term assignments and tests) counts 50%; one two-hour examination in November counts 50%. Students are expected to complete the November examination as well as all coursework before being awarded a pass in this class. NOTE: Credit will not be given for both PSY1005S and PSY1007S.

PSY1007S  INTRODUCTION TO PSYCHOLOGY PART 2 +
10 NQF credits at HEQSF level 5
Convener: Dr L Schrieff-Elson
Course entry requirements: Students must have passed PSY1006F. PSY1007S is only open to students registered in the Humanities Faculty Extended Degree (HB062) who hope to major in Psychology or Organisational Psychology, and to students in named Health Sciences and Social Development programmes who have passed PSY1006F. Students registered for HB062 must have completed MAM1022F and MAM1016S.
Course outline:
The purpose of this course is to augment and support its co-requisite course: PSY1006F INTRO TO PSYCHOLOGY PART 2. It aims to improve students’ performance by enhancing their grasp of
key ideas and concepts, and by developing their mastery of the disciplinary discourse. It provides additional pedagogic enrichment in the form of regular Plus Tuts that extend into Writing Hub exercises and consultations. In these tutorials, students will receive explicit support around the co-requisite course assignments and detailed feedback on their written work.

**Lecture times:** Tutorial times by sign-up with the department.

**DP requirements:** 100% tutorial attendance plus successful completion of all coursework assignments.

**Assessment:** Coursework 100% comprising of tutorial assessments and other written work.

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**HUB1014S  ANATOMY FOR COMMUNICATION SCIENCES**

20 NQF credits at HEQSF level 5

**Convener:** Dr C Warton

**Course entry requirements:** None

**Course outline:**

This course gives an overview of the anatomy relevant for the practice of the communication sciences. It covers the morphological anatomy of the head and neck and relevant parts of the thorax, neuro-anatomy, and the areas of embryology relating to these subjects. The course consists of five lectures and one practical per week for one semester. The practical involves the examination of pre-dissected specimens of the related body parts.

**DP requirements:** Completion of all coursework by the due dates.

**Assessment:** Continuous assessment involves written and practical tests. The in-course assessments carry 45% of the marks and the final written and practical examinations the remaining 55%.

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**AHS1025S  EARLY INTERVENTION**

18 NQF credits at HEQSF level 5

**Convener:** V Norman

**Course entry requirements:** None

**Course outline:**

The course aims to develop an understanding of the need for the speech-language therapist's/audiologist’s role in early intervention in the South African context; of risk populations; and of principles and approaches to screening, assessment and intervention. Content includes early intervention within the primary healthcare framework; an introduction to hearing, communication and feeding difficulties in specific risk populations; specific approaches to screening, early intervention (asset-based, family-centred); and basic assessment and management of communication in children up to the age of three. The approach is that family is central to a holistic view of the child, and that culture and individual differences influence communication development. Students are guided to problem-solve when clients and clinicians do not share a common language. Teaching and learning activities include lectures; small group discussions; literature search and review; class presentations; and observation of interactions with young children. Themes underpinning the course are primary healthcare and contextual relevance; multilingual, multicultural society; ethics and human rights; and developing agents for change.

**DP requirements:** Attendance at all lectures; completion of all coursework by the due dates.

**Assessment:** In-course assessments comprise two summative assessments (60%) and there is a final summative assessment in November (40%).

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**AHS1042F  HUMAN COMMUNICATION DEVELOPMENT**

18 NQF credits at HEQSF level 5

**Convener:** Dr M Pascoe

**Course entry requirements:** None

**Course outline:**

The purpose of this course is to enable the student to understand the communication chain and difficulties when breakdown occurs; and key aspects of communication development in children up to the age of six and school-age children. Content also includes general principles of development;
typical communication (speech, language and auditory) development; and a framework for language development. Students develop the skills of observation and interaction with children; profile a child’s development in relation to expected milestones; and develop materials. The course emphasises an appreciation of the influence of culture and individual differences on communication development. Teaching and learning activities comprise lectures, small group discussions, class presentations, and observation of and interaction with young children. Themes underpinning the course include primary healthcare and contextual relevance; a multilingual, multicultural society; ethics and human rights.

**DP requirements:** Attendance at all lectures; completion of all coursework by the due dates.

**Assessment:** Mid-term test (20%); an assignment (30%); and a final summative examination (50%).

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**AXL1300F  INTRODUCTION TO LANGUAGE STUDIES**  
*Faculty of Humanities*  
18 NQF credits at HEQSF level 5  
**Convener:** S Bowerman  
**Course entry requirements:** None  
**Course outline:**  
This course provides an introduction to the main branches of Linguistics. On completion of the course students would have covered topics which include themes such as: introduction (description vs. prescription, speech vs. writing, competence vs. performance); phonetics (the International Phonetic Alphabet, articulatory phonetics, classification of sounds, suprasegmentals); phonology (phoneme/allophone); morphology and syntax (morphemes, word-formation, constituents, phrase structure, elements of generative grammar); semantics and pragmatics (approaches to meaning, sense/reference, truth value, semantic features, speech acts, pragmatic rules); sociolinguistics (standard vs. dialect, social and regional variation, gender, register); psychology of language (the mental lexicon, elements of neurolinguistics); historical linguistics (language families, introduction to language change, language contact).

**Lecture times:** 3rd period, Monday – Wednesday.

**DP requirements:** All written work to be handed in and at least 75% attendance at lectures and tutorials.

**Assessment:** Tests and other written assignments set during the semester count for 50% of the final mark; one two-hour examination in June counts for 50%.

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**AHS1045S  BASIS OF HEARING AND BALANCE**  
18 NQF credits at HEQSF level 5  
**Convener:** C Rogers  
**Course entry requirements:** None  
**Course outline:**  
This course aims to develop an understanding and knowledge of the anatomy, physiology and pathology of hearing and balance underpinning audiology diagnoses; the impact of hearing and balance difficulties; and prevention and health promotion strategies. Content includes the anatomy and physiology of hearing and balance, and the patho-physiology of hearing and vestibular disorders. Students learn to appreciate that a thorough knowledge of the anatomy, physiology and pathology is fundamental to an audiology diagnosis. They acquire a holistic view of clients and appreciate the need to exercise duty of care. Teaching and learning activities include lectures, web-based learning, case studies and group learning. Themes underpinning the course include primary healthcare, the burden of disease, and a bio-psycho-social model of healthcare.

**DP requirements:** Attendance of all academic activities; completion of all coursework by the due dates.

**Assessment:** Coursework: four assessments 60%; final summative assessment in November: 40%.
AXL1301S  INTRODUCTION TO APPLIED LANGUAGE STUDIES  
(Faculty of Humanities)  
18 NQF credits at HEQSF level 5  
Convener: Professor A Deumert  
Course entry requirements: None  
Course outline:  
This course focuses on the study of language in its social context. 
On completion of the course students would have covered topics which include themes such as:  
introduction (basic concepts and issues in Sociolinguistics); regional variation; social variation; 
language change; multilingualism; language and interaction; gender and language; language contact; 
pidgins, creoles and new Englishes; language planning and policy; language and education; the 
sociolinguistics of sign language.  
Lecture times: 3rd period, Monday – Wednesday.  
DP requirements: All written work to be handed in and at least 75% attendance at lectures and 
tutorials.  
Assessment: Tests and other written assignments set during the semester count for 50% of the final 
mark; one two-hour examination in October/November counts 50%.  

SLL1028H  XHOSA FOR HEALTH AND REHABILITATION SCIENCES  
(Faculty of Humanities)  
18 NQF credits at HEQSF level 5  
Convener: TBA  
Course entry requirements: None.  
Course outline:  
This course introduces students to communication skills required for a successful interaction 
between a healthcare professional and a client. The course takes an integrated approach to language 
learning through incorporation of clinical experiences related to the disciplines of physiotherapy, 
occupational therapy, and communication and speech disorders. The main focus of this course is on 
pronunciation, grammar and interaction with clients. Interaction is used as a means of exposing 
students to the Xhosa ways of expression, as well as to issues of cross-cultural and inter-cultural 
communication. At the end of this course students will be able to communicate with a speaker of 
Xhosa about common everyday topics; be able to elicit and understand information from a client 
using terminology specific to the fields of physiotherapy, occupational therapy and communication 
and speech disorders; and will have an awareness of some cultural issues that emanate from cross-
cultural communication.  
DP requirements: Attendance of at least 80% of the lectures; completion by the due dates of all 
assessments and projects.  
Assessment: Coursework (vocabulary and oral assessments based on topics covered in the course) 
counts 50% and comprises four tests (two weighted at 15% each, and two weighted at 10% each); 
and examinations (June examination – simulated client interviews: 20%; and November 
examination – simulated client interviews: 30%).  

SLL1048H  AFRIKAANS FOR HEALTH AND REHABILITATION SCIENCES  
For students registered in the School of Health and Rehabilitation Sciences only.  
18 NQF credits at HEQSF level 5  
Convener: Dr I van Rooyen  
Co-requisites: Students must be registered for a degree in physiotherapy, occupational therapy, 
speech and language pathology or audiology.  
Course outline:  
The content of the course is based on case studies covered in the streams of physiotherapy, 
occupational therapy and communication sciences and speech disorders. The focus of the Afrikaans 
course is on communication skills, and specifically on those skills that may be required for an 
interaction between a healthcare professional and a client. Other skills include skill in asking
questions and the ability to enter effectively into dialogue with a client. The course is taught at both
beginner and intermediate levels and focuses on the unique pronunciation and stylistic variants of
individual clients and culture-specific words and expressions.
**Lecture times:** Arranged internally.
**DP requirements:** At least 80% class attendance and completion of all assessments.
**Assessment:** Coursework (vocabulary and oral assessments based on topics covered in the course) –
50%; June assessment (simulated client interviews) – 20%; November examination (simulated client
interviews) – 30%.

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**PSY2006F  RESEARCH IN PSYCHOLOGY I**

*This course is a prerequisite for PSY2010S, PSY3007S, PSY3009F and PSY3010S. Students will
therefore only be admitted to PSY2010S, PSY3007S, PSY3009F and PSY3010S if they have passed
PSY2006F*

24 NQF credits at HEQSF level 6

**Convener:** Associate Professor C Ward

**Course entry requirements:** Students must have passed (PSY1004F* and PSY1005S*) and have
met the Mathematics proficiency requirements of PSY1004F.* Was PSY1001W

**Course outline:**
This course introduces students to research in psychology. There are four central components: (a)
introduction to research methods in psychology; (b) introduction to statistical analysis in
psychology; (c) qualitative methods in psychology, and (d) psychological measurement.

**Lecture times:** Meridian.

**DP requirements:** Completion of all coursework, as well as completion of 90 minutes in the
Student Research Participation Programme (SRPP) or equivalent.

**Assessment:** Coursework (essay, tests and projects) counts 50%; one two-hour examination in June
counts 50% towards the final mark.

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**PSY2010S  COGNITION AND NEUROSCIENCE**

*Students who have passed PSY2005S will not be permitted to take PSY2010S.*

24 NQF credits at HEQSF level 6

**Convener:** Dr S Malcolm-Smith

**Course entry requirements:** Students must have passed (PSY1004F* and PSY1005S*) and
PSY2006F.* Was PSY1001W

**Course outline:**
An introduction to cognitive neuroscience. This course covers brain structures and functions that are
involved in cognition. Cognitive functions covered include perception, memory, and language
among others. There is a strong focus on the research methods used in this field. Classic research
protocols are introduced as practical exercises and statistical analysis of data sets is required.

**Lecture times:** Meridian.

**DP requirements:** Completion of all coursework (7 class tests and 2 tutorial reports), as well as
completion of 90 minutes in the students’ research participation program (SRPP) or equivalent.

**Assessment:** Coursework (tests and practical assignments) counts 50% (comprised of: class tests
10%; tutorial reports 15%; midterm test 25%); one two-hour examination in October counts 50%
towards the final mark.

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**AHS2047S  PAEDIATRIC REHABILITATIVE AUDIOLOGY**

18 NQF credits at HEQSF level 6

**Convener:** Dr C Rutherford

**Course entry requirements:** AHS1041S and AHS2106F

**Course outline:**
This course aims to enable the student to describe and discuss the paediatric population with hearing
impairment; analyse and apply theoretical frameworks relating to communication, and assess and
comprehensively manage children with hearing impairment. Content includes factors contributing
to diversity in the paediatric population with hearing impairment; a “disability model of deafness” and bio-psycho-social models; as well as approaches to aural rehabilitation for children with hearing impairment. Students learn critical thinking skills, knowledge translation, understanding of diversity and context, how to select appropriate assessment material, interpretation of assessment results in light of the client’s context, and holistic client management. They acquire awareness of diverse client contexts, appreciation of the range of auditory dysfunction, sensitivity to issues of disability, empathy, agents for change, respect for client communication choices, and develop a client and family-centred approach. Teaching and learning activities include lectures, case studies, guided self-study, videos, an interview of a parent with a child with a hearing impairment, and role-play. Themes underpinning the course are primary healthcare and contextual relevance, disability and burden of disease, ethics and human rights, bio-psycho-social models of disability, developing agents for change, and equity and affirmation of diversity.

**DP requirements:** Attendance at all lectures; completion of all coursework by the due dates.

**Assessment:** Coursework comprises two formative assessments and two summative assessments totalling 60%; final examination in November: 40%.

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**AHS2106F CHILD LANGUAGE**
21 NQF credits at HEQSF level 6
Convener: Dr M Harty

**Course entry requirements:** AHS1042F or AHS1043S; and AXL1300F

**Course outline:**
This course aims to enable the student to compare and contrast child language delay, difference and disorder; to describe and critically discuss the principles and nature of assessment and comprehensive management of child language. Content includes the nature, assessment and management of child language difficulties. Students learn to profile a child’s general development in relation to expected milestones. They acquire knowledge and skills in the transcription and analysis of child language; clinical reasoning; and strategies for working with child language difficulties in multilingual, multicultural environments. They acquire an appreciation of a multilingual, multicultural society in the assessment and management of child language difficulties and a willingness to problem-solve when clients and clinicians do not share a common language. Teaching and learning activities include lectures, small group discussions, class presentations and case discussions (video and paper). Themes underpinning the course are a multilingual, multicultural society, provision of contextually relevant services, and developing agents for change.

**DP requirements:** Attendance of all academic activities; completion of all coursework by the due dates.

**Assessment:** Coursework assessments are weighted 60%; final summative examination in June is weighted 40%.

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**AHS2046F DIAGNOSTIC AUDIOLOGY**
18 NQF credits at HEQSF level 6
Convener: L Petersen

**Course entry requirements:** AHS1003F or AHS1041S

**Course outline:**
This course aims to enable students to devise and implement an appropriate audiology case history interview; describe and discuss a comprehensive diagnostic audiology process; describe audiology tests; and reflect on and communicate assessment outcomes to the client. Content includes case history; fundamentals of the audiology diagnostic process; audiology test battery; pure tone, speech and immittance audiometry; functional hearing loss; principles of masking; clinical reasoning; differential diagnosis; and clinical report writing. Students acquire the skills of jargon-free communication, appropriate test selection, analysis and interpretation, and knowing when and how to refer. They learn that information and personal adjustment counselling are key in the empowerment of clients, and learn an appreciation of the role of the team; they also cultivate an awareness of professional boundaries. Teaching and learning activities include lectures, case studies, self-directed study, role-play, experiential learning, simulations, and group-work. Themes
underpinning course are primary healthcare and contextual relevance, disability and burden of
disease, ethics and human rights, bio-psycho-social models of health, developing agents for change,
and equity and affirmation of diversity.

**DP requirements:** Attendance of all academic activities; completion of all coursework by the due
dates.

**Assessment:** Two formative assessments; two summative assessments totalling 60%; a final
examination: 40%.

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**AHS2110W**  
**Clinical Audiology 1**  
24 NQF credits at HEQSF level 6  
**Convener:** Dr L Ramma and T Kuhn  
**Course entry requirements:** AHS2046F  
**Course outline:**  
This course aims to enable the student to  
demonstrate professional conduct; to promote  
communication development in children aged 0 – 5yrs, to prevent communication difficulties in  
children, and to assess peripheral auditory function in adults. Content includes neonatal hearing  
screening, school-based hearing screening, prevention and promotion, early childhood intervention,  
and diagnostic audiology in adults. There are six clinical blocks, which include Disability in  
Primary Healthcare. Learning takes place at a variety of sites, which may include community health  
centres, primary schools, university clinics and/or tertiary hospitals. Students acquire skills of  
ethical and professional practice, professional communication, clinic management, and assessment  
and management of the client. Students learn to develop a willingness to engage professionally and  
ethically, begin to accept responsibility for clinical service provision, acquire sensitivity to cultural  
diversity, and develop respect for client autonomy. Teaching and learning activities include clinical  
practice, clinic workshops, modelling (by clinical educators) and guided observation, simulations  
(e.g. Otis), clinic preparatory worksheets, tutorials and reflective tasks. Themes underpinning the  
course are primary healthcare, evidence-based practice, ethical and professional practice, and a  
client-/family-centered approach.

**DP requirements:** Attendance of all academic activities including clinics, completion of all  
coursework and required documentation (e.g. ELOs, hours) by the due dates, and professional  
conduct.

**Assessment:** Formative assessments: Two marked clinic sessions per semester. Summative  
assessment: three marked clinic sessions per semester = 80% of final mark; Disability in Primary  
Healthcare Project = 20%.

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**AHS2111S**  
**Diagnostic Audiology in Special Populations**  
15 NQF credits at HEQSF level 6  
**Convener:** Dr V Narne  
**Course entry requirements:** None  
**Course outline:**  
This course aims to enable the student to understand and discuss the nature, assessment and  
management of central auditory processing disorders (CAPD); hearing assessment of (a) the  
paediatric population (0-6 years), and (b) the difficult-to-test individual. Content includes CAPD –  
its nature, assessment, differential diagnosis, management, paediatrics and difficult-to-test  
populations. Students also learn the design and interpretation of test protocol, communication of  
results, and further management. Students acquire the ability to select an appropriate diagnostic test  
battery and the analysis and integration of test results. They design a management plan for further  
testing/referral/therapy (CAPD). They learn that early diagnosis and management of CAPD and  
hearing disorders in special populations is critical to a successful outcome and that holistic  
management and exercising duty of care are important. Teaching and learning activities include  
lectures, self-study, and case-based learning. Themes underpinning the course are disability and the  
burden of disease, equity and affirmation of diversity, and ethical conduct.

**DP requirements:** Attendance of all academic activities; completion of all coursework by the due  
dates.
Assessment: Coursework: four assessments – 60%; final examination in November – 40%.

AHS2107F  CHILD SPEECH
18 NQF credits at HEQSF level 6
Convener: Dr M Pascoe
Course entry requirements: AHS1042F or AHS1043S; and AXL1300F.
Course outline:
This course aims to enable students to compare different speech difficulties in children, describe and discuss speech assessment and principles of speech intervention, and apply principles of intervention to special populations. Content includes the nature of articulation and phonological difficulties, and assessment of and therapy for children with articulation and phonological difficulties. Students learn skills of observation and interaction with children, learn to profile a child’s development in relation to expected milestones, and learn transcription and analysis of child speech, as well as knowledge translation and clinical reasoning skills. They acquire an awareness that culture and individual differences influence children’s speech and acquire an ability and willingness to problem-solve when clients and clinicians do not share a common language. Teaching and learning activities include lectures, small group discussions, class presentations, and observations of and interaction with young children. Themes underpinning the course are a multilingual, multicultural context; provision of contextually relevant services; and developing agents for change.

DP requirements: Attendance of all academic activities; completion of all coursework by the due dates.
Assessment: Coursework marks comprise 60%; the final summative assessment in June counts 40%.

AHS2108W  CLINICAL SPEECH THERAPY 1
24 NQF credits at HEQSF level 6
Convener: Prof S Amosun and V Norman
Course entry requirements: AHS2106F and AHS2107F
Course outline:
This course aims to enable the student to demonstrate professional conduct; promote communication development and prevent communication delays in children; and assess and manage children with speech and language delays, disorders and differences. Students have the opportunity to work with children of different ages and within different clinical settings. Students learn the skills of knowledge translation, effective written and verbal communication, and operational clinic management. They learn the need for respectful interpersonal relationships and professionalism and acquire an appreciation of ethical behaviour. Teaching and learning activities include observation of experienced clinicians, clinical practice, promotion and prevention activities, and assessment and management of children. Themes underpinning the course are primary healthcare, equity and affirmation of diversity, developing agents for change, evidence-based practice, ethical and professional practice, and a client-family-centred approach.

DP requirements: At least 80% attendance at clinics, completion of all coursework and required documentation by the due dates.
Assessment: Formative assessments plus 3 summative assessments per semester = 80%; Disability in Primary Healthcare Project = 20%.

AHS2109S  SCHOOL-BASED INTERVENTIONS
21 NQF credits at HEQSF level 6
Convener: Prof H Kathard
Course entry requirements: AHS2106F
Course outline:
This course aims to enable the student to compare and contrast the range of communication challenges experienced by learners in school settings, including preschool, and to describe appropriate assessment and intervention strategies for managing these in the SA educational context.
Content includes the nature, assessment and management of children with communication challenges including language learning delays, difficulties and disorders (LLDs); fluency; and auditory processing/attention difficulties in the school context. Students acquire the skills of observation and interaction with school-age children, knowledge translation, assessment and analysis of language and literacy profiles of school-age children, clinical reasoning, as well as strategies for working in a multilingual, multicultural educational environment. They acquire an appreciation of a multilingual, multicultural society in the assessment and management of school-age children. They learn to develop willingness to problem-solve when clients and clinicians do not share a common language; teaching and learning activities. Teaching activities include lectures, guided self-study, internet learning, role-play, case discussions (video and paper) and presentations. Themes underpinning the course are a multilingual, multicultural society; provision of contextually relevant services; and developing agents for change.

**DP requirements:** Attendance of all academic activities; completion of all coursework by the due dates.

**Assessment:** Coursework: formative assessments; two summative assessments – 60%; final summative examination in November – 40%.

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**AHS1054W SOUTH AFRICAN SIGN LANGUAGE**
8 NQF credits at HEQSF level 5  
Convener: L Petersen  
**Course entry requirements:** None  
**Course outline:**  
The aim of this course is use of South African Sign Language (SASL) at a basic level to obtain case history, give instructions (plus diagnostic testing), feedback and informational counselling, and to demonstrate use of appropriate communication strategies for sign language. Content includes greetings, basic communication, finger-spelling and numbers, hand-shape, location, orientation, movement and non-manual features, production and reception of signs, dominant and passive hands, how to change the language structure from SASL into English and English into SASL, specific sign vocabulary relating to audiology and speech and language therapy, and general sign vocabulary. Students learn to conduct a case history using basic sign language. They acquire an attitude of empathy and respect for multilingual and multicultural diversity. Teaching and learning activities include modelling, lectures, group-work, role-play, and videos/DVDs. Students have interactions with members of the deaf community.

**DP requirements:** Attendance of all academic activities; completion of all coursework by the due dates.

**Assessment:** First semester assessment is weighted 20%; second semester assessment is weighted 20%; role-play contributes 20%; and the final summative examination in November contributes 40% to the overall mark.

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**AHS3078H RESEARCH METHODS & BIOSTATISTICS I**  
10 NQF credits at HEQSF level 7  
Convener: Prof J Jelsma  
**Course entry requirements:** None  
**Course outline:**  
The course provides students with the necessary skills and conceptual knowledge to conduct research in occupational therapy and physiotherapy. Students receive lectures which cover the theory of qualitative and quantitative research, the ethics of research, epidemiology and basic biostatistics. Students learn how to analyse research articles critically and to develop a research proposal. This course is taught through lectures, tutorials and online assignments.

**DP requirements:** No student may proceed to the examination without attending lectures on ethics or completing an online ethics course. No student may proceed to the research project until the research protocol has been awarded a mark of 50%. The protocol may need to be resubmitted.
Assessment: The mark allocation is as follows: Research methodology continuous assessment (5%); research methodology paper (5%); epidemiology paper (5%); research protocol for fourth year (25%); biostatistics (10%) and examination – critical appraisal (50%).

AHS3008H CLINICAL AUDIOLOGY II
30 NQF credits at HEQSF level 7
Convener: Prof S Amosun and S Kuschke
Course entry requirements: AHS2046F, AHS2047S, AHS2110W, AHS2111S, AHS3062F and AHS3075F
Course outline: This course aims to enable the student to assess and manage hearing impairment, demonstrate professional conduct, assess peripheral auditory function with guidance, plan and implement management with support, and assess and support individuals with disabilities in a primary healthcare context. Content includes Disability in Context Part III (a multidisciplinary module), evidence-based practice, community-based rehabilitation, and ethics (distributive justice). Learning takes place at a variety of community and clinical placements with both adult and paediatric clients. Students acquire skills of ethical and professional practice and reflective practice. They learn to design and implement an assessment and management plan based on a holistic view of the client, they learn to operate a multidisciplinary practice, and they acquire clinical reasoning skills. They learn an appreciation of diversity, the need to embrace rehabilitation and to own their role as a rehabilitative audiologist. Teaching and learning activities include experiential learning (clinical practice), written reports, and guided and structured reflection. Themes underpinning the course: a holistic and a client-/family-centred approach, primary healthcare, ethics and human rights, equity and affirmation of diversity, developing agents for change, disability and burden of disease, and evidence-based practice.

DP requirements: Full attendance of all clinics; completion of all coursework and required documentation (e.g. ELOs, hours) by the due dates; professional conduct.
Assessment: Formative assessments: two marked clinic sessions per semester. Summative assessment: three marked clinic sessions per semester = 63% of final mark; Disability in Primary Healthcare Project = 17%; final exam in November = 20%.

AHS3062F REHABILITATION TECHNOLOGY
22 NQF credits at HEQSF level 7
Convener: S Kuschke
Course entry requirements: None
Course outline: The aim of this course is to enable students to compare the roles of professionals and technology in the rehabilitation process, to assess and analyse the client’s need for rehabilitation technology, to design and discuss comprehensive management, and to debate relevant legal rights and ethical issues. Content includes the role of technology in the rehabilitation process, speech perception with hearing loss, hearing aids, frequency modulation (FM) systems, cochlear implants, features of amplification technology, and the verification and validation of technology fitting. Students acquire the skills of linking patient factors with technology and effective listening. They learn attitudes of client-centeredness and a respect for diversity. Teaching and learning activities include case-based learning, demonstrations, hands-on practice, and role-play. Themes underpinning the course are primary healthcare and contextual relevance, disability and the burden of disease, ethics and human rights, bio-psycho-social models of health, developing agents for change, equity and affirmation of diversity.

DP requirements: Attendance at all lectures; completion of all coursework by the due dates.
Assessment: Mid-term assignment (weighted 25% of the final mark); a group assignment (15%); a cochlear implant assignment (20%) and a final summative examination in first semester (40%).
### AHS3065S  ADULT REHABILITATIVE AUDIOLOGY

18 NQF credits at HEQSF level 7  
Convener: Dr C Rutherford  
**Course entry requirements:** None  
**Course outline:**  
This course aims to enable students to understand the role of the rehabilitative audiologist, to learn about auditory dysfunction and its impact, to analyse and apply frameworks guiding aural rehabilitation, to assess and establish candidacy for aural rehabilitation, and to design and implement aural rehabilitation plans. Content includes the holistic management of an adult with a hearing impairment, psychological levels of hearing, communication models, international classification of functioning, disability and health (ICF classification), principles of assessment and aural rehabilitation, and counselling. Students acquire skills of critical thinking, adapting to cultural context, selection and administration of appropriate assessments, interpretation of results, clinical reasoning, and the creation of client profiles to guide management. They acquire sensitivity to cultural and contextual diversity, learn respect and sensitivity to issues of disability, and learn to recognise the need for individualised management plans and to be agents for change. Teaching and learning activities include lectures, brainstorming and snowball, case studies, guided self-study, and role-play. Themes underpinning the course include primary healthcare and contextual relevance, disability and the burden of disease, ethics and human rights, bio-psycho-social models of disability, developing agents for change, and equity and affirmation of diversity.  
**DP requirements:** Attendance of all academic activities; completion of all coursework by the due dates.  
**Assessment:** Coursework: two formative assessments and two summative assessments – 60%; final summative examination in November – 40%.

### AHS3075F  OAES AND ELECTROPHYSIOLOGY

22 NQF credits at HEQSF level 7  
Convener: Dr V Narne  
**Course entry requirements:** AHS2046F  
**Course outline:**  
This course aims to enable the student to justify, implement, and interpret oto-acoustic emissions (OAEs) and electro-physiological measures in adults and children. Content includes oto-acoustic emissions and auditory evoked potentials in relation to auditory anatomy and physiology, specificity and sensitivity of these tests, test parameters and set-up, analysis and interpretation of results, and management decisions. Students acquire skills of clinical reasoning and the effective communication of results. They learn the need for a client-centred approach and respect for diversity. Teaching and learning activities include case-based learning, demonstrations, hands-on practice, and guided group-work. Themes underpinning the course are primary healthcare and contextual relevance, disability and burden of disease, ethics and human rights, bio-psycho-social models of health, developing agents for change, and equity and affirmation of diversity.  
**DP requirements:** Attendance of all academic activities; completion of all coursework by the due dates.  
**Assessment:** Coursework: formative assessments; two summative assessments – 60%; final summative examination in June – 40%.

### AHS3104S  VESTIBULAR MANAGEMENT

15 NQF credits at HEQSF level 7  
Convener: C Rogers  
**Course entry requirements:** None  
**Course outline:**  
This course aims to enable the student to discuss the nature and impact of dizziness and vertigo, and to assess and manage vestibular disorders. Content includes anatomy, physiology and pathology of vestibular and related balance disorders; clinical and technological assessments of vestibular
disorders; and vestibular rehabilitation therapy. Students acquire skills of analysis and of the 
interpretation of results of clinical and objective evaluation, as well as the ability to select the
appropriate management paradigm. They learn that balance disorders are multifactorial in nature,
that management is possible at all levels of care, and that the audiologist is an integral part of
management. Teaching and learning activities include lectures, web-based learning, case study and
group learning. Themes underpinning the course include disability and burden of disease, bio-
psycho-social model, and ethical conduct.
**DP requirements:** Attendance of all academic activities; completion of all coursework. Attendance
is monitored through the signing of an attendance register at each session.
**Assessment:** Coursework: two formative assessments; two summative assessments totalling 60%;
final examination in November: 40%.

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**AHS3105F**  PUBLIC HEALTH AUDIOLOGY
15 NQF credits at HEQSF level 7
**Convener:** Assoc Prof L Ramma
**Course entry requirements:** None
**Course outline:**
This course aims to enable students to describe and discuss frameworks for audiology service
delivery in the public health sector; and to plan, implement and manage audiology services for the
health of the public. Content includes noise and the health of the public, ototoxicity monitoring,
cerumen management, and the management of hearing screening programs. Students acquire skills
of critical and analytical thinking, knowledge translation, health communication, effective
communication with key stakeholders, skills in training of other health workers, and the ability to
critique literature. They learn the importance of empathy, the ethical principle of respect, an
appreciation of and willingness to address challenges, social responsibility, an appreciation of the
value of prevention measures, and to promote healthy and safe acoustic environments. Teaching
and learning activities include lectures, case studies, class debates, self-guided study and group
learning. Themes underpinning the course are primary healthcare, the burden of disease, developing
agents for change, equity and affirmation of diversity, and ethics and human rights.
**DP requirements:** Attendance of all academic activities; completion of all coursework by the due
dates.
**Assessment:** Coursework: two formative assessments; two summative assessments totalling 60%;
final examination in June: 40%.

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**AHS3004H**  CLINICAL SPEECH THERAPY II
30 NQF credits at HEQSF level 7
**Convener:** Prof S Amosun and J Le Roux
**Course entry requirements:** AHS2108W, AHS2109S, AHS3071F and AHS3073F
**Course outline:**
This course aims to enable students to: (i) assess, manage and support children (of all ages) with a
range of communication difficulties, and their caregivers/teachers, in a variety of settings; (ii) assess,
manage and support adults with acquired communication difficulties and dysphagia. Students
acquire skills of knowledge translation, effective written and verbal communication, operational
clinic management, and clinical reasoning. They learn the need for an appreciation and respect for
cultural and linguistic variability, empathy, and the need for ethical and professional practice.
Teaching and learning activities may include observation of experienced clinicians, clinical practice,
promotion and prevention activities, assessment and management of children and adults, and team-
work. Themes underpinning the course are primary healthcare, ethics and human rights, equity and
affirmation of diversity, developing agents for change, disability and burden of disease, and
evidence-based practice.
**DP requirements:** At least 80% attendance at clinics; completion of all coursework and required
documentation by the due dates.
**Assessment:** Formative assessments: two marked clinic sessions per semester. Summative assessment: three marked clinic sessions per semester = 63% of final mark; Disability in Primary Healthcare Project = 17%; final exam in November = 20%.

**AHS3071F  ACQUIRED NEUROGENIC LANGUAGE DISORDERS**  
22 NQF credits at HEQSF level 7  
**Convener:** Dr M Harty  
**Course entry requirements:** None  
**Course outline:**  
This course aims to enable students to describe and critically discuss the consequences of an adult neurogenic language disorder with reference to the international classification of functioning, disability and health (ICF) and from a disability perspective. They learn the aetiologies and nature of adult neurogenic language disorders and the nature of assessments and comprehensive management of adults with neurogenic language disorders. Content includes the nature and prevalence of CVA, TBI and degenerative diseases; principles and nature of assessment and management; role of SLP and multidisciplinary management; and evidence-based practice. Students acquire skills of knowledge translation, critical and analytical thinking, and differential diagnosis. They acquire attitudes of empathy, ethical principles of respect and a holistic view of individuals. Teaching and learning activities include lectures, case discussions and presentations, videos, observation, and construction of assessment materials. Themes underpinning the course include management within a multilingual and multicultural context, the need for a holistic view of clients, developing agents for change, and materials development.  
**DP requirements:** Attendance of all academic activities; completion of all coursework by the due dates.  
**Assessment:** Formative assessments; summative assessments totalling 60%; final summative examination in June: 40%.

**AHS3072S  PAEDIATRIC DYSPHAGIA AND MOTOR SPEECH**  
22 NQF credits at HEQSF level 7  
**Convener:** V Norman  
**Course entry requirements:** None  
**Course outline:**  
This course aims to enable the student to describe and discuss aetiologies, the nature and consequences of (i) dysphagia in infants and children and (ii) dysarthria in children. It addresses the nature of assessments and comprehensive management. Content includes anatomy, physiology, pathology, aetiology of swallowing and motor speech disorders; principles and nature of clinical and objective assessments (video-fluoroscopic swallow study for dysphagia); differential diagnosis; evidenced-based management within relevant frameworks; teamwork; and working with special populations and families. Students acquire skills of knowledge translation, critical and analytical thinking, effective communication and group-work. They learn to have a holistic view of individuals and acquire an appreciation of the infant/child within the family context. They learn about their role in improving participation, about client-centred interventions, advocacy, responsiveness to diversity, the need for an asset-based approach, and the importance of evidence-based practice. Teaching and learning activities include lectures, videos, case discussions, video analyses, literature reviews and critiques, group-work and presentations. Themes underpinning the course include management within a multilingual and multicultural context, developing agents for change, and materials development.  
**DP requirements:** Attendance of all academic activities, and completion of all coursework by the due dates.  
**Assessment:** Formative assessments; two summative assessments – 60%; final summative examination in November – 40%.
AHS3073F ADULT DYSPHAGIA AND MOTOR SPEECH
18 NQF credits at HEQSF level 7
Convener: Assoc Prof S Singh
Course entry requirements: HUB1014S
Course outline:
The aim of this course is to enable the student to describe and critique the nature, assessment, and management of swallowing and motor speech disorders in adults. Content includes neuro-anatomy, anatomy, physiology, pathology, aetiology of swallowing and motor speech; and the principles and nature of clinical and objective assessments, as well as differential diagnosis and evidenced-based management within an ICF framework. Students acquire skills of knowledge translation, critical and analytical thinking, effective communication and group-work. They learn the importance of empathy and respect and of having a holistic view of individuals. They learn to appreciate the challenges to participation and their role in improving participation through client-centred interventions. Teaching and learning activities include case discussions, lectures, video analysis, literature reviews, critiques and role-play. Through communal constructivism, students learn how to use an asset based approach in devising, administering and interpreting culturally and linguistically relevant materials (in Xhosa and Afrikaans). Themes underpinning the course include clinical management within a multilingual and multicultural context, developing agents for change, disability and burden of disease, equity, and affirmation of diversity.

Assessment: Formative assessments; two summative assessments – 60%; final summative examination in June – 40%.

AHS3102F CHILD LANGUAGE II
15 NQF credits at HEQSF level 7
Convener: Dr M Harty
Course entry requirements: AHS2109S
Course outline:
This course aims to build on basic knowledge of child language acquired in AHS2106F and AHS2109S. In this course students learn to assess and manage the communication of children who have a range of special education needs such as cerebral palsy, autism spectrum disorders, and traumatic brain injury. Students learn to implement Augmentative and Alternative Communication (AAC) strategies to assist children to participate within the home and school context. Content includes the nature, assessment and management of child language difficulties linked to a range of different etiologies. Students develop clinical reasoning skills and strategies for working with child language difficulties in a multilingual, multicultural environment. Teaching and learning activities include lectures, small group discussions, class presentations and case discussions (video and paper). Themes underpinning the course are a multilingual, multicultural society; provision of contextually relevant services; and developing agents for change.

Assessment: Summative assessments – 60%; final summative examination – 40%.

AHS3103S VOICE
15 NQF credits at HEQSF level 7
Convener: Dr M Harty
Course entry requirements: None
Course outline:
This course aims to apply the International Classification of Functioning, disability and health (ICF) framework to voice and resonance disorders; to develop the ability to describe and critically discuss the nature of voice disorders; to impart knowledge of the principles and methods of voice assessment; and to enable students to conduct a comprehensive management of the client with voice
difficulties. Content includes laryngeal anatomy and physiology; nature, signs and symptoms of voice disorders; principles and nature of assessment, differential diagnosis and management. Students learn skills of critical and analytical thinking and clinical reasoning. They learn the importance of empathy and respect and of a client-/caregiver-centred approach. Teaching and learning activities include lectures, case analyses and presentations, journal article reviews, observation of multi-professional management (stroboscopy clinic), and an analysis of audio and video recordings. Themes underpinning the course include disability and burden of disease, ethics and human rights, and bio-psycho-social models of health.

**DP requirements:** Attendance at all lectures; completion of all coursework by the due dates.

**Assessment:** Formative assessments – 60%; final summative examination – 40%.

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**AHS4000W  RESEARCH REPORT**

30 NQF credits at HEQSF level 8

**Convener:** L Petersen

**Course entry requirements:** None

**Course outline:**
The aim of this course is the formulation of a research proposal with guidance. Students learn to review and critique the literature; plan and manage data collection; analyse and interpret results; and describe, discuss, critique and present (oral and written) research findings. Content includes topic definition, quantitative and qualitative research methods, proposal writing, literature review, data management, research ethics, and referencing. Students learn skills of working in teams; identifying, reviewing and critiquing appropriate literature; academic writing; succinct reporting and the interpretation of results. They learn the importance of appreciating individual and group contributions, develop awareness of personal bias, and acquire a willingness to accept feedback. Teaching and learning activities include workshops, lectures, group-work, supervision sessions, written feedback on drafts, and oral presentations. Themes underpinning the course are primary healthcare and contextual relevance, disability and burden of disease, ethics and human rights, bio-psycho-social models of health, developing agents for change, and equity and affirmation of diversity.

**DP requirements:** Attendance of all academic activities, supervision sessions, workshops and presentations, and participation in group-work.

**Assessment:** Minimum of five formative assessments; a written research report 100%.

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**AHS4067S  SEMINARS IN COMMUNICATION SCIENCES**

4 NQF credits at HEQSF level 8

**Convener:** Assoc Prof H Kathard

**Course entry requirements:** None

**Course outline:**
The aims of this course are to enable students to review and critique literature, develop and present integrated and coherent oral and written arguments, and facilitate academic discussion and debate. Content includes topical and professional issues in audiology and speech-language pathology (SLP). Students acquire skills of knowledge translation; they develop academic writing skills through the ability to integrate and critique relevant literature, and learn the skill of self-directed learning for continuing professional development. They acquire an appreciation of the professions in context. Teaching and learning activities include guided self-study, small group discussions, tutorials and class presentations. Themes underpinning the course include the provision of contextually relevant services in a multilingual, multicultural society; evidence-based practice; and developing agents for change.

**DP requirements:** Attendance of all academic activities and participation in group-work, tutorials and presentations.

**Assessment:** Written work 60%; oral presentation 40%.
AHS4008H  CLINICAL AUDIOLOGY IIIA
45 NQF credits at HEQSF level 8
Convener: N Keeton and C Rogers
Course entry requirements: AHS3008H, AHS3065S and AHS3104S
Course outline:
The key focus of this clinical course is paediatric and adult assessment and management. Teaching takes place at a variety of clinical sites which may include secondary and tertiary hospitals, community clinics, university clinics, schools for children who are deaf/hard-of-hearing, and occupational settings. Each student is exposed to each of the major rotations although sites may differ. The course descriptors reflect learning across all four clinical blocks. Intended learning outcomes include a demonstration of professional conduct, an independent assessment and evidence-based management of adults and children with hearing and vestibular difficulties across the continuum of care (prevention, promotion, curative, rehabilitation), in a variety of contexts and levels of care (primary, secondary, tertiary). Teaching and learning activities include observation and modelling of experienced clinicians, service provision, clinical practice, teamwork, tutorials and workshops, and written reports. Themes underpinning the course are primary healthcare, ethics and human rights, equity and affirmation of diversity, developing agents for change, disability and burden of disease, and evidence-based practice.
DP requirements: Full attendance at all clinics; completion of all coursework by the due dates; professional conduct.
Assessment: Formative assessments; summative assessments of each clinical block totalling 70%; final qualifying examination in June: 30%.

AHS4009H  CLINICAL AUDIOLOGY IIIB
45 NQF credits at HEQSF level 8
Convener: N Keeton and C Rogers
Course entry requirements: AHS3065S and AHS3104S
Course outline:
The key focus of this clinical course is paediatric and adult assessment and management. Teaching takes place at a variety of clinical sites which may include secondary and tertiary hospitals, community clinics or university clinics, schools for children who are deaf/hard of hearing, and/or occupational settings. Each student is exposed to each of the major rotations, although sites may differ. Intended learning outcomes include a demonstration of professional conduct; and of independent assessment and the evidence-based management of adults and children with hearing and vestibular difficulties across the continuum of care (prevention, promotion, curative, rehabilitation), in a variety of contexts and levels of care (primary, secondary, tertiary). Teaching and learning activities include observation and modelling of experienced clinicians, service-provision, clinical practice, teamwork, workshops and written reports. Themes underpinning the course are primary healthcare, ethics and human rights, equity and affirmation of diversity, developing agents for change, disability and burden of disease, and evidence-based practice.
DP requirements: Full attendance at all clinics; completion of all coursework by the due dates; and professional conduct.
Assessment: Formative assessments; summative assessments of each clinical block totalling 70%; final qualifying examination in June: 30%.

AHS4005H  CLINICAL SPEECH THERAPY IIIA
45 NQF credits at HEQSF level 8
Convener: V Norman
Course entry requirements: AHS3004H, AHS3072S & AHS3103S
Course outline:
The key focus of this clinical course is to enable the student to demonstrate professional conduct; to conduct independent assessment and comprehensive evidence-based management of speech, language, communication, feeding and swallowing in children and adults across the continuum of care (prevention, promotion,
Students rotate through a number of clinical blocks and sites during the year. They learn to problem-solve, communicate effectively; engage in clinical reasoning; and to plan, implement, manage and evaluate service delivery programmes. They learn the skill of reflection; of needs analysis; of community engagement; and of competent clinical practice. They learn that ethical practice is vital and that collaborative, client- and family-centred intervention is key to best practice. Teaching and learning activities include the observation and modelling of experienced clinicians, service provision, clinical practice, team-work, tutorials and workshops, and written reports. Themes underpinning the course are primary healthcare, ethics and human rights, equity and affirmation of diversity, developing agents for change; disability and burden of disease, and evidence-based practice.

**Assessment:** Formative assessments; summative assessments of each clinical block totalling 70%; final qualifying examination in June: 30%.

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### AHS4006H  CLINICAL SPEECH THERAPY IIIB

**45 NQF credits at HEQSF level 8**

**Convener:** V Norman

**Course entry requirements:** AHS3004H, AHS3072S & AHS3103S.

**Course outline:**

This course aims to enable the student to demonstrate professional conduct; to conduct independent assessment and comprehensive evidence-based management of speech, language, communication, feeding and swallowing in children and adults across the continuum of care (prevention, promotion, curative, rehabilitation) in a variety of contexts and levels of care (primary, secondary, tertiary); and to learn skills enabling the independent planning and management of service delivery at sites. Students rotate through a number of clinical blocks and sites during the year. They learn to problem-solve, communicate effectively; engage in clinical reasoning; and plan, implement, manage and evaluate service delivery programmes. They learn the skill of reflection; of needs analysis; of community engagement; and of competent clinical practice. They learn that ethical practice is vital and that collaborative, client- and family-centred intervention is key to best practice. Teaching and learning activities include the observation and modelling of experienced clinicians, service provision, clinical practice, team-work, tutorials and workshops, and written reports. Themes underpinning the course are primary healthcare, ethics and human rights, equity and affirmation of diversity, developing agents for change; disability and burden of disease, and evidence-based practice.

**DP requirements:** Full attendance at clinics; completion of all coursework by the due dates; professional conduct.

**Assessment:** Formative assessments; summative assessments of each clinical block totalling 70%; final qualifying examination in November – 30%.

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### HSE1003S  PREPARATION FOR ENTRY-LEVEL PSYCHOLOGY FOR HEALTH AND REHAB SCIENCES PART I

**18 NQF credits at HEQSF level 5**

**Convener:** Dr B Ige and E Badenhorst

**Course entry requirements:** None

**Course outline:**

This course develops and strengthens students’ understanding of the basic psychological concepts, principles and terminology introduced in semester one by revisiting material covered in PSY1004F. Students are introduced to the building blocks, core principles and concepts of PSY1004F, such as learning, memory, developmental psychology, health psychology and psychopathology, in order to develop and strengthen a basic knowledge of central areas in psychology. The course also develops...
and strengthens empirical skills in order to allow students to critically assess studies on which psychological theory is based. Students engage with the discipline in a critical and analytical way by revisiting the core principles of theory and research. In order to familiarise students with the modes of learning that will be required of them upon entry into PSY1005S, as well as the style of instruction they will encounter in the course, students attend lectures and small group tutorials to develop academic skills and techniques. The outcome of AHS1031S is a fundamental understanding of psychology, an ability to look critically at concepts and theories in the discipline, and an understanding of the practical application of psychology in everyday life and in students’ future professions.

**DP requirements:** Full attendance of and participation in all lectures, practical sessions, workshops and tutorials. All assignments must be submitted by their due date.

**Assessment:** In-course assessment contributes 60% and comprises one essay (10%); one research project essay (15%); tutorial assignments (10%) and two tests (25%). The final written test contributes 40%.

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**HSE1004S**  
**FUNDAMENTALS OF SPEECH AND HEARING SCIENCES**  
18 NQF credits at HEQSF level 5  
**Convener:** Assoc Prof L Ramma and Dr B Ige  
**Course entry requirements:** None  
**Course outline:**  
This foundation (Intervention Programme) course revisits the core areas of AHS1003F Speech and Hearing Science and aims to facilitate a basic understanding of the nature of sound, how sound is perceived by humans and how human speech is produced. Course content includes basic numeracy skills; introductory physics relating to the characteristics, behaviour and phenomena of sound waves; as well as the concepts of frequency, intensity, phase and resonance as they relate to speech production and hearing (including measurement and perceptual correlates). Teaching/learning methods include lectures, demonstrations, practical work, tutorials and self-directed learning sessions. At the end of the course, the student will understand and describe the nature of sound, how humans hear and how speech is produced.

**DP requirements:** Full attendance of and participation in all lectures, practical sessions, workshops and tutorials. Students are required to complete all coursework.

**Assessment:** Coursework contributes 60% and comprises two tests (weighted at 20% each) and a written course assignment (20%). The examination contributes 40% to the final mark. Students who fail the final assessment may be required to register for a summer term course and write another examination in the same year.

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**HSE1005S**  
**FOUNDATIONAL CONCEPTS IN HUMAN COMMUNICATION DEVELOPMENT**  
18 NQF credits at HEQSF level 5  
**Convener:** Dr B Ige and Dr M Pascoe  
**Course entry requirements:** None  
**Course outline:**  
This foundation (Intervention Programme) course revisits key concepts of AHS1042F Human Communication Development. Content includes the scope of speech-language pathology and audiology practice; the communication chain; anatomy and physiology of speech and hearing; sign language development; principles and frameworks for understanding normal development; as well as key aspects of communication development in children aged 0-3 years, 3-6 years, 6 years and beyond. Students develop skills in profiling a child’s development in relation to expected milestones and perform materials development. They develop attitudes that appreciate the influence of culture and individual differences on communication development. Teaching activities comprise small group discussions; class presentations; demonstrations, practical work, self-study and tutorials. Themes underpinning the course include primary healthcare and contextual relevance; a multilingual, multicultural society; ethics and human rights.
**DP requirements:** Full attendance of and participation in all lectures, practical sessions, workshops and tutorials; completion of all coursework by the due dates.

**Assessment:** Coursework contributes 60% and comprises a test weighted at 30% and a second assessment weighted at 30%; the final examination contributes 40% to the final mark. Students who fail the final assessment may be required to register for a summer-term course and write another examination in the same year.

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**AXL1302S LINGUISTICS FOUNDATION**  
*(Faculty of Humanities)*

**NQF credits:** 18 at HEQSF level 5  
**Conveners:** Dr B Ige and S Bowerman  
**Course entry requirements:** None  
**Course outline:** This foundational course revisits core areas of AXL1300F. It aims to move students beyond a lay person’s understanding of the nature of language; generate a clear, basic understanding of the kinds and purposes of enquiry in linguistics and selected sub-disciplines, indicate how they are related to the study of communication sciences and disorders; ensure that students have a solid grounding in key concepts in phonetics, phonology, morphology, syntax and semantics, and that they have the skills to use these concepts in the analysis of data. Others are pragmatic rule, regional and social dialectology, elements of neurolinguistics and language families. Upon successful completion, students will understand the nature and interrelationship of language systems; grasp and work with the levels of abstraction involved in phonology, morphology, syntax and semantics; and describe, analyse and explain selected linguistic processes and types of data and use appropriate conventions to present these descriptions, analyses and explanations.  
**DP requirements:** Full attendance of and participation in all lectures, tutorials and self-directed learning sessions.  
**Assessment:** In-course assessment contributes 60% and comprises tutorial tasks (10%); and two tests (weighted at 25% each). The examination contributes 40% of the final mark. Students who fail the final assessment may be allowed to register for a summer term course and write another examination in the same year.

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**PSY1006F INTRODUCTION TO PSYCHOLOGY PART 1 +**  
10 NQF credits at HEQSF level 5  
**Convener:** Dr L Schriefff-Elson  
**Course entry requirements:** PSY1006F is only open to students registered in the Humanities Faculty Extended Degree Programme (HB062) who hope to major in Psychology or Organisational Psychology, and to students in named Health Sciences and Social Development programmes who do not meet the APS requirements for PSY1004F. Students registered for HB062 must have completed MAM1022F and MAM1016S. Students registered for Social Development programmes (HB063) must also be registered for MAM1014F.  
**Co-requisites:** PSY1004F  
**Course outline:** The purpose of this course is to augment and support its co-requisite course: PSY1004F INTRO TO PSYCHOLOGY PART 1. It aims to improve students’ performance by enhancing their grasp of key ideas and concepts, and by developing their mastery of the disciplinary discourse. It provides additional pedagogic enrichment in the form of regular Plus Tuts that extend into Writing Hub exercises and consultations. In these tutorials, students will receive explicit support around the co-requisite course assignments and detailed feedback on their written work.  
**Lecture times:** Tutorial times by sign-up with the department.  
**DP requirements:** 100% tutorial attendance plus successful completion of all coursework assignments.  
**Assessment:** Coursework 100% comprising of tutorial assessments and other written work.
HSE1006F  FOUNDATIONAL CONCEPTS IN EARLY INTERVENTION
18 NQF credits at HEQSF level 5
Convener: Dr B Ige and V Norman
Course entry requirements: None
Course outline:
This foundation (Intervention Programme) course aims to prepare students for what they will encounter in AHS1025S Early Intervention upon re-entry into the standard curriculum. The rationale for early intervention in speech-language therapy and audiology practice is introduced. Primary healthcare principles are explained in relation to the promotion of normal communication development, prevention of communication disorders, and identification and intervention in speech language therapy and audiology. Early childhood intervention is described and discussed with particular reference to risk populations. Different models of service delivery at various levels of healthcare are discussed. Some aspects of assessment will be introduced.
DP requirements: Full attendance of and participation in all lectures, practical sessions, workshops and tutorials, and completion of all coursework.
Assessment: Coursework contributes 60%; it comprises a written in-course summative assignment (40%) and a second summative assignment (20%). The final examination contributes 40% to the final mark.

HSE1007F  FOUNDATIONS OF HEARING AND BALANCE
18 NQF credits at HEQSF level 5
Convener: Dr B Ige and C Rogers
Course entry requirements: None
Course outline:
This is a foundational (Intervention Programme) course that prepares students for AHS1045S Basis of Hearing and Balance for which they register upon re-entry into the standard curriculum. The course addresses the anatomy and physiology of hearing as well as various pathologies of hearing (including embryological and genetic factors). Course content includes anatomy of the outer, middle and inner ear; eighth cranial nerve; auditory pathways and the auditory cortex; the physiology of hearing; and pathologies of the ear and hearing systems. Teaching/learning methods include lectures, demonstrations, practical work, tutorials and self-directed learning sessions. At the end of this course students should be able to describe the anatomy of the hearing and balance structures and mechanism; describe the physiology of hearing and balance; describe pathologies that impact hearing and balance ability; and apply the knowledge gained in the promotion of hearing, prevention of disease and education of peers.
DP requirements: Full attendance of and participation in all lectures, practical sessions, workshops and tutorials and completion of all coursework by the due dates.
Assessment: Coursework contributes 60% and comprises assessments weighted at 20% and 40% respectively, and a final examination is weighted 40%.

AXL1303F  SOCIOLINGUISTICS FOUNDATION
(Faculty of Humanities)
NQF credits: 18 at HEQSF level 5
Conveners: Dr B Ige and S Bowerman
Course entry requirement: AXL1302S
Course outline: This course forms part of the (foundational) Intervention Programme. It aims to prepare students for what they will encounter in AXL1301S when they re-enter the standard curriculum. The course aims to ensure that students understand the ways in which social context affects all aspects of language use and to give students a solid grounding in key areas of sociolinguistics: language in interaction; language variation and change; language and identity; language contact; and multilingualism and language policy, particularly in South Africa. The course helps to prepare students for phenomena and problems they are likely to encounter in their profession; assists students to learn to read and understand graphs, tables and other modes of data
presentation in sociolinguistic texts; and develop students’ ability to present their own descriptions and explanations of sociolinguistic phenomena appropriately in essays. At the end of the course students will be able to identify the attitudinal, aspirational, and other social factors which commonly have an impact on who speaks (or writes) to whom, about what, under what circumstances, and how these factors could shape aspects of actual and desired language use among the communities and individuals with whom they will engage in their clinical training and professional work. Students draw on the work they did in the previous semester (particularly phonetics, phonology, morphology and syntax).

**DP requirements:** Full attendance of and participation in all lectures, fieldwork and self-directed learning sessions.

**Assessment:** In-course assessment contributes 60% and comprises fieldwork and self-directed learning tasks (10%), a test (25%) and an assignment (25%). The final examination contributes 40% to the final mark. These assessments and examination contribute 60% towards the final year mark at the end of Intervention Programme 2.
BACHELOR OF SCIENCE IN OCCUPATIONAL THERAPY  
[MB003][SAQA ID:3497]

Convener:  
Dr A Sonday (Division of Occupational Therapy, Department of Health & Rehabilitation Sciences)

[Programme code: MB003 or MB016 (Intervention Programme). Plan code: MB003AHS09. SAQA registration number: 3497.]

Occupational Therapy is an applied discipline dedicated to the study of occupation and its relevance to health and well-being. The purpose of this programme is to educate students to become professionals who can help to change people's lives by facilitating their engagement in occupations that are appropriate to their environment, background and health needs. Lecturers are committed to preparing graduates to make a contribution to the practice needs in our country. Students are encouraged and enabled to become self-directed and life-long learners. The profession requires mature people with integrity who are creative and innovative thinkers, good communicators and committed to service.

Students receive instruction in English, but Xhosa and Afrikaans will increasingly be used alongside English to enable students who are not familiar with an African language to communicate with persons who are unable to express themselves in English.

The BSc in Occupational Therapy leads to registration with the Health Professions Council of South Africa (HPCSA) as an occupational therapist.

Duration of programme
FBD1 The degree programme extends over either four or (for students passing through the Intervention Programme) five years of full-time study.

Curriculum
[Note: See p9 for explanatory notes about HEQSF levels and NQF credits.]

FBD2.1 First year

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<th>Course</th>
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<td>Becoming a Professional</td>
<td>15</td>
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<td>PPH1002S</td>
<td>Becoming a Health Professional</td>
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<td>PSY1004F</td>
<td>Introduction to Psychology Part I or</td>
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<td>PSY1005S</td>
<td>Introduction to Psychology Part II or</td>
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<td>HUB1019F</td>
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<td>HUB1020S</td>
<td>Anatomy and Physiology Part IB</td>
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<td>AHS1032S</td>
<td>Occupational Perspectives on Health and Well-being</td>
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<td>AHS1035F</td>
<td>Human Occupation and Development</td>
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<td></td>
<td><strong>Total credits per year</strong></td>
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</table>

FDB2.2 A student who fails one or more of the following courses at the end of Semester 1 may be required to enter the Intervention Programme Parts 1 and 2:

- PSY1004F Introduction to Psychology Part I or
- PSY1006F Introduction to Psychology Part I Plus
- HUB1019F Anatomy and Physiology IA
- AHS1035F Human Occupation and Development

FDB2.3 A student who fails one or more of the following courses at the end of Semester 2 of the standard curriculum may be required to enter the Interventions Programme Part 2:

- PSY1004F Introduction to Psychology Part I or
- PSY1006F Introduction to Psychology Part I Plus
- HUB1019F Anatomy and Physiology IA
- AHS1035F Human Occupation and Development
PSY1005S  Introduction to Psychology Part II
HUB1020S  Anatomy and Physiology IB
AHS1032S  Occupational Perspectives on Health and Well-being

### FDB2.4 Second year

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<tr>
<td>PRY2002W</td>
<td>Psychiatry for Occupational Therapy</td>
<td>14</td>
<td>6</td>
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<td>PSY2003S</td>
<td>Social Psychology and Intergroup Relations</td>
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<td>PSY2009F</td>
<td>Developmental Psychology</td>
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<td>HUB2015W</td>
<td>Anatomy &amp; Physiology II for Health and Rehabilitation Sciences</td>
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<td>AHS2043W</td>
<td>Occupational Therapy II</td>
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*Total credits per year* .................................................................. 147

### FDB2.5 Third year

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<td>SLL1048H</td>
<td>Afrikaans for Health and Rehabilitation Sciences*</td>
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<td>AHS3078H</td>
<td>Research Methods and Biostatistics I</td>
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<td>7</td>
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<tr>
<td>AHS3107W</td>
<td>OT Theory and Practice in Physical Health</td>
<td>38</td>
<td>7</td>
</tr>
<tr>
<td>AHS3108W</td>
<td>OT Theory and Practice in Mental Health</td>
<td>38</td>
<td>7</td>
</tr>
<tr>
<td>AHS3113W</td>
<td>Foundation Theory for OT Practice I</td>
<td>26</td>
<td>7</td>
</tr>
</tbody>
</table>

*Total credits per year* .................................................................. 148

[*Note: A student may be exempted from doing Afrikaans or Xhosa in the third year only if the language concerned was taken as home language in the final school year. A copy of the NSC certificate stating the first language status is required as evidence.]*

### FDB2.6 Fourth year

<table>
<thead>
<tr>
<th>Number</th>
<th>Course</th>
<th>NQF Credits</th>
<th>HEQSF Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>AHS4119W</td>
<td>Occupational Therapy Research and Practice Management</td>
<td>48</td>
<td>8</td>
</tr>
<tr>
<td>AHS4120W</td>
<td>Foundation Theory for OT Practice II</td>
<td>48</td>
<td>8</td>
</tr>
<tr>
<td>AHS4121W</td>
<td>Occupational Therapy Practice and Service Learning</td>
<td>48</td>
<td>8</td>
</tr>
</tbody>
</table>

*Total credits per year* .................................................................. 144

*Total credits for programme* .................................................... 583

### Intervention programme

**FBD3.1** The following courses must be satisfactorily completed during the Intervention Programme by a student that enters the Intervention Programme after semester 1:

#### Intervention Programme Part 1:

<table>
<thead>
<tr>
<th>Number</th>
<th>Course</th>
<th>NQF Credits</th>
<th>HEQSF Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>HSE1008S</td>
<td>Fundamentals of Anatomy and Physiology IA</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>HSE1003S</td>
<td>Preparation for Entry-level Psychology for Health and Rehabilitation Sciences Part I</td>
<td>18</td>
<td>5</td>
</tr>
<tr>
<td>HSE1010S</td>
<td>Fundamentals of Human Occupation and Development IA</td>
<td>0</td>
<td>5</td>
</tr>
</tbody>
</table>

*Note: Credits for IP1 courses, and final assessments of IP courses, are included in those of IP2 courses.***

**FBD3.2** A student who fails HSE1003S and has met the DP requirement for this course may be permitted to repeat the course during the summer term. If he/she again fails during the summer term, he/she may be refused readmission.
FBD3.3 A student entering IP who failed PSY1004F or PSY1006F in the first semester of the standard first year programme will be required to register for all IP1 courses including HSE1003S.

FBD3.4 The following courses must be satisfactorily completed during the Intervention Programme by a student who has completed the Intervention Programme Part 1 or who is required to enter the Intervention Programme after semester 2 of the standard curriculum:

### Intervention Programme Part 2:

<table>
<thead>
<tr>
<th>Number</th>
<th>Course</th>
<th>NQF Credits</th>
<th>HEQSF Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSY1006F</td>
<td>Introduction to Psychology Part I Plus*</td>
<td>10</td>
<td>5</td>
</tr>
<tr>
<td>HSE1009F</td>
<td>Fundamentals of Anatomy and Physiology IB</td>
<td>36</td>
<td>5</td>
</tr>
<tr>
<td>HSE1011F</td>
<td>Fundamentals of Human Occupation and Development IB</td>
<td>48</td>
<td>5</td>
</tr>
</tbody>
</table>

Total credits per year ............................................. 94

[*Note: students who failed PSY1004F or PSY1006F in the first semester of the first year are required to register for PSY1006F as part of the intervention programme.]

FDB3.5 A student who has failed PPH1002S Becoming a Health Professional will register for this course as well.

FBD3.6 Once a student has satisfactorily completed all the prescribed courses of the Intervention Programme, he/she may proceed to semester 2 of the standard curriculum.

### DP (Due Performance) requirements and progression rules

FBD4 (a) 100% attendance is required for practice learning. Absence from practice learning on medical grounds requires a medical certificate. Validity of absence on grounds of personal or other problems will be considered on an individual basis by the relevant academic staff members. If this attendance requirement is not met, the student will be required to repeat the course or the practice learning block.

(b) A minimum of 80% attendance is required for lectures and practicals in all modules and courses. Absence on medical grounds requires a medical certificate. Validity of absence on grounds of personal or other problems will be considered on an individual basis by the academic staff in the Division.

(c) To qualify for the summative assessment (final examinations) in all Occupational Therapy courses, students have to attend all compulsory educational activities listed in course booklets.

(d) A student who fails a course may be permitted to write a supplementary examination. The class (or year-) mark is not added to the result of any such supplementary examination in determining the final result for the course.

### Readmission

FBD5.1 Except by permission of the Senate, a student will not be permitted to renew his/her registration for the degree, or may have his/her registration cancelled:

(a) if he/she is in the Intervention Programme and fails any course in it (no supplementary examinations are offered in the Intervention Programme);

(b) if he/she fails a course which he/she is repeating;

(c) unless he/she, from the second year of study, successfully completes in each year’s examination cycle half or more of the course load for which he/she is registered in that year (an examination cycle being an examination plus a supplementary or deferred examination, if awarded);

(d) unless he/she successfully completes all the prescribed courses for any single year in two years;
(e) if he/she is unable to complete the standard programme in six years;
(f) if he/she has been found guilty of unprofessional behaviour or found to be impaired.

FBD5.2 A student who has not fulfilled the required number of clinical hours will not be permitted to graduate.

**Distinction**

FBD6 The degree may be awarded with distinction (average of 75% or above for all courses from first to final year of study).

**Courses for BSc Occupational Therapy**

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>PPH1001F</td>
<td>BECOMING A PROFESSIONAL</td>
</tr>
<tr>
<td></td>
<td>15 NQF credits at HEQSF level 5</td>
</tr>
<tr>
<td>Convener:</td>
<td>L Ockers</td>
</tr>
<tr>
<td>Course entry requirements:</td>
<td>None.</td>
</tr>
<tr>
<td>Course outline:</td>
<td>This course introduces first year students in all health sciences professions to professionalism and professional conduct. The course aims to promote the conduct, knowledge, attitudes and values associated with being a professional and a member of a professional team. Students learn interpersonal skills, including being non-judgemental, empathetic, ethical and respectful of human rights when working with colleagues, clients, patients and community members who may have different values and traditions. Students learn theory on interviewing and interpersonal skills, which is applied in simulated and real interviews; theory related to group and social roles applied in simulated experiences to build team membership and leadership skills; and critical analysis of and reflection on professional conduct, diversity, health and human rights. The educational approach is participatory and experiential and all students are required to engage actively in small learning groups. Academic, digital and information literacies are systematically integrated from the outset. The course also includes a workshop on HIV-AIDS, designed to introduce students to the relevance of HIV-AIDS issues in their private and professional lives.</td>
</tr>
<tr>
<td>DP requirements:</td>
<td>Attendance at all small group learning sessions and other academic commitments, including the HIV-AIDS workshop; completion of all set assignments and assessment activities.</td>
</tr>
<tr>
<td>Assessment:</td>
<td>Continuous, performance-based assessment provides students with regular feedback. In-course assignments comprise 60% of the total mark. The final, summative exam assessment makes up 40% of the total mark.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PPH1002S</th>
<th>BECOMING A HEALTH PROFESSIONAL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>15 NQF credits at HEQSF level 5</td>
</tr>
<tr>
<td>Convener:</td>
<td>L Ockers</td>
</tr>
<tr>
<td>Course entry requirements:</td>
<td>PPH1001F.</td>
</tr>
<tr>
<td>Course outline:</td>
<td>This course builds on the knowledge and skills gained in PPH1001F Becoming a Professional. Focus is on the primary health care approach and disability. The course equips students to work collaboratively on a community-oriented project based on the primary healthcare principles and approach including comprehensive healthcare (promotive, preventive, curative, rehabilitative and palliative care within the primary, secondary and tertiary levels of care), intersectoral collaboration, community involvement, and accessibility of and equity in healthcare. Students are required to apply the knowledge, skills and values from PPH1001F to develop an appreciation of the contribution of all healthcare professionals to the promotion, maintenance and support of health and the healthcare of individuals, families and communities within the context of disability. The educational approach is participatory and project-based and all students are required to engage...</td>
</tr>
</tbody>
</table>
actively in the project and in small learning groups. Academic, digital and information literacies are systematically integrated from the outset. The course includes a basic life support skills workshop.

**DP requirements:** Attendance at all group sessions, community and health service site visits and the life support skills workshop; completion of all assignments and assessment activities.

**Assessment:** Continuous, performance-based assessment provides students with regular feedback and comprises 60% of the total mark. The final summative assessment makes up 40% of the total mark.

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**PSY1004F**  INTRO TO PSYCHOLOGY PART 1
*(Faculty of Humanities)*

18 NQF credits at HEQSF level 5

**Convener:** Dr L Schrieff-Elson

**Course outline:**
The course aims to introduce the student to some of the areas of specialisation within psychology. These include history of psychology, biopsychology and memory, genetics and evolutionary psychology, health psychology, developmental psychology, psychopathology and psychotherapy, and learning. Students are taught a great deal about plagiarism and develop skills necessary to write essays and prepare other submissions to the Psychology department.

**Lecture times:** 1st or 5th period.

**DP requirements:** Satisfactory completion of all assignments by due date, attend at least 80% of tutorials, complete all class tests. In addition, obtain one Student Research Participation Programme (SRPP) point or equivalent.

**Assessment:** Coursework (term assignments and tests) counts 50%; one two-hour examination in June counts 50%. Students are expected to complete the June examination as well as all coursework before being awarded a pass in this class. *NOTE:* Credit will not be given for both PSY1004F and PSY1006F.

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**PSY1006F**  INTRODUCTION TO PSYCHOLOGY PART 1 +

10 NQF credits at HEQSF level 5

**Convener:** Dr L Schrieff-Elson

**Course entry requirements:** PSY1006F is only open to students registered in the Humanities Faculty Extended Degree Programme (HB062) who hope to major in Psychology or Organisational Psychology, and to students in named Health Sciences and Social Development programmes who do not meet the APS requirements for PSY1004F. Students registered for HB062 must have completed MAM1022F and MAM1016S. Students registered for Social Development programmes (HB063) must also be registered for MAM1014F.

**Co-requisites:** PSY1004F

**Course outline:**
The purpose of this course is to augment and support its co-requisite course: PSY1004F INTRO TO PSYCHOLOGY PART 1. It aims to improve students’ performance by enhancing their grasp of key ideas and concepts, and by developing their mastery of the disciplinary discourse. It provides additional pedagogic enrichment in the form of regular Plus Tuts that extend into Writing Hub exercises and consultations. In these tutorials, students will receive explicit support around the co-requisite course assignments and detailed feedback on their written work.

**Lecture times:** Tutorial times by sign-up with the department.

**DP requirements:** 100% tutorial attendance plus successful completion of all coursework assignments.

**Assessment:** Coursework 100% comprising of tutorial assessments and other written work.

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**HUB1019F**  ANATOMY & PHYSIOLOGY IA

18 NQF credits at HEQSF level 5

**Convener:** Dr C Warton

**Course entry requirements:** None
Course outline:
This course consists of five lectures and one practical/tutorial per week. It includes an introduction to anatomy and the structure of the upper limb. It also includes an introduction to the cellular basis of physiology, tissue and body systems, with emphasis on nerve, muscle and body fluids.

DP requirements: Attendance of and participation in all lectures, practical sessions, workshops and tutorials, and submission of assignments by the due date.

Assessment: The course comprises written and on-going practical assessments, which make up 45% of the course mark. The other 55% comprises marks for the final written and practical exams.

HUB1020S  ANATOMY & PHYSIOLOGY IB
18 NQF credits at HEQSF level 5
Convener: Dr C Warton

Course entry requirements: HUB1016F or HUB1019F

Course outline:
This course consists of five lectures and one practical/tutorial per week. It focuses on human body systems and includes the anatomy and physiology of the cardiovascular system, thorax and respiratory systems and the lower limb. The main aim is to integrate anatomical and physiological knowledge in order to understand the human body as a complete organism. Content also includes the anatomy of the lower limbs.

DP requirements: Attendance of and participation in all lectures, practical sessions, workshops and tutorials, and submission of assignments by the due date.

Assessment: The course comprises written and on-going practical assessments, which make up 45% of the course mark. The other 55% is made up of marks for the final written and practical examinations.

AHS1032S  OCCUPATIONAL PERSPECTIVES ON HEALTH AND WELL-BEING
20 NQF credits at HEQSF level 5
Convener: Z Hajwani

Course entry requirements: AHS1035F or AHS1044F

Course outline:
This course analyses and explores the relationship between what people do and their health and well-being. By engaging with people of different ages in various practice learning contexts, students gain appreciation of how dimensions of occupational performance in self-care, productivity and leisure unfold across the lifespan in relation to culture, context and ability. Students develop an appreciation of the lived experience of having a disability, and how dimensions of occupational performance in self-care, productivity and leisure are affected by disability. They engage with issues of diversity and explore the role of an OT as a transformative agent. They explore how art can serve as an income-generating activity and the role that the environment plays in facilitating or hindering people’s occupational aspirations and capabilities. Students are able to describe the link between human occupation, health and well-being; discuss forms of occupational risk/dysfunction; describe their understanding of the lived experience of a person with a disability; discuss means of enabling occupational performance; understand the role of an OT and other role-players within practice learning settings; use reflection and reasoning as crucial for taking control of own learning; and learn how to turn an art form into a possible business venture.

DP requirements: Students must complete the learning tasks related to the following parts of the curriculum in order to be eligible to write the final exam: OT as a transformative agent; Occupational Performance; and Practice Learning tutorials.

Assessment: Formative assessments comprise a micro-enterprise assignment (weighted 20% of the final mark); a Human development and Occupation assignment (30%); journal 1 (5% from Practice Learning Block Form 1) (20%); and journal 2 (5% from Practice Learning Block Form 2) (30%). The final mark calculated as follows: Course mark: 50%; exam mark (including the occupational performance assignment): 50%.
**AHS1035F HUMAN OCCUPATION AND DEVELOPMENT**

22 NQF credits at HEQSF level 5

**Convener:** Z Hajwani

**Course entry requirements:** None

**Course outline:**
This course introduces students to the basic concepts that underlie occupational therapy principles, values and modes of practice. These concepts include foundational theories in the study of human occupation and development. Students develop procedural and critical thinking by exploring the occupational human and occupational behaviour in various contexts. By exploring art forms engaged in by people in urban as well as rural or informal settlements, students begin to appreciate the relationship between human occupation and the environment. Students also engage with issues of diversity through open and constructive dialogue that aims to facilitate an understanding of inter-group relations, conflict and community. By the end of this course, students are able to describe the concept of “occupation” and begin to understand its dimensions, discuss occupational therapy values and their influence on understanding people and approaches for practice, discuss the place of activity analysis in occupational therapy and begin to use macro activity analysis, discuss the experience and the practising of an occupation, describe the role that the environment plays in an occupation, describe and discuss human development in relation to the occupational human, and discuss issues of diversity in relation to the self.

**DP requirements:** Students complete written tasks related to the following parts of the curriculum in order to be eligible to write the final examination: basic concepts and human occupation.

**Assessment:** Coursework comprises an art forms report (30%); art forms presentation (30%); and test (40%). The final mark is calculated as follows: course mark (50%) and exam mark (50%).

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**MDN2002W CLINICAL SCIENCES I**

13 NQF credits at HEQSF level 6

**Convener:** Dr M De Souza

**Course entry requirements:** None

**Course outline:**
The course covers the aetiology, clinical signs and symptoms, assessment and medical and surgical treatment of patients of all age groups suffering from conditions encountered by occupational therapists and physiotherapists during their work. The lecture series has been designed to integrate information about pathology and the clinical management of a range of conditions across the previously demarcated areas of medicine, surgery, orthopaedics and paediatrics. The topics covered include pathology, oncology, orthopaedics, child health, neurosurgery, spinal cord injuries, cardiothoracic surgery, medicine and palliative care. At the end of the course, students will have a basic understanding of the physiology, pathology, clinical presentation and management of the conditions presented; will be able to recognise and deal with the clinical emergencies that may impair or result in loss of function; will understand the role of the various disciplines in managing these conditions; and will recognise the importance of a multidisciplinary team in managing patients they are likely to encounter.

**DP requirements:** Full attendance and participation in all learning activities and completion of all coursework by the due dates.

**Assessment:** There are three term assessments, in March, June and September. Each of these is a one-hour online MCQ test and counts 14% each towards the year mark. There is an examination at the end of the year (a two-hour online MCQ assessment) which accounts for 53% of the total mark. 5% of the year mark is made up from attendance, random MCQ tests and Quizzes during the year. A re-assessment (a two-hour MCQ online test) is offered for students obtaining an overall mark between 40 and 49%.

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**PRY2002W PSYCHIATRY FOR OCCUPATIONAL THERAPISTS**

14 NQF credits at HEQSF level 6

**Convener:** Dr A Hooper
Course entry requirements: PSY1005S or PSY1007S.

Course outline:
This course aims to teach occupational students about the definitions, aetiology, clinical signs and symptoms, assessment and management, and prognosis of the major psychiatric conditions as classified in the ICD10 or DSM5. The intentions are to equip students with a sound theoretical knowledge of psychiatry symptomatology and conditions, to enable them to recognise a condition clinically and to comprehend management procedures and options, so as to appreciate the role of occupational therapy in conjunction with other disciplines. It also intends to foster an awareness of legal, ethical and cultural considerations that arise in the field of mental health and to provide a basic knowledge of the mental health service structure and available mental health resources. Finally, the course introduces discussion about legal, ethical and cultural factors that impact on patient management in the South African context and provides practical information about transforming health services and mental health resources.

DP requirements: Full attendance and participation in all learning activities and completion of all coursework by the due dates.

Assessment: Two written tests of two hours during the course of the year – 30% each; end-of-year two-hour written examination – 40%; oral for borderline pass/fail or distinction candidates. The final result will be compiled as follows: April test (30%); June test (30%); and November examination (40%).

PSY2003S  SOCIAL PSYCHOLOGY AND INTERGROUP RELATIONS
(Faculty of Humanities)
24 NQF credits at HEQSF level 6
Convener: Dr B Zuma

Course entry requirements: PSY1004F* and PSY1005S* (*previously PSY1001W)

Course outline:
The course is divided into two archives or sections. The first is designed to introduce you to some of the basic principles and theories in mainstream social psychology. To this end, the course syllabus covers the following topics: attitudes and attributions, prejudice and racism, contact theory, the micro-ecology of contact, social identity theory, social constructionism, discourse and whiteness studies. We explore all these principles and theories in two ways. First, in the way they have been conceptualised in social psychology as principles and theories. Second, we make a concerted effort to apply these principles and theories in thinking about a number of issues/problematics in post-apartheid South Africa.

The second focuses on South Africa and breaks away from the conventional disciplinary protocols we followed in the first section. Here our learning is facilitated through a number of ways: students sharing their experiences of searching for different ways of being black and white in post-apartheid South Africa; lectures on new and exciting current research on Colourism in South Africa; exploring violence, trauma and psychic pain in the lives of black people; and a theoretical experiment on the question of freedom and what it means to be human in South Africa today.

Lecture times: 4th period.

DP requirements: Completion of all coursework, as well as completion of 90 minutes in the Student Research Participation Programme (SRPP) or equivalent.

Assessment: Coursework (oral and written assignments) counts 50%; one final two-hour examination counts 50% towards the final mark.

PSY2009F  DEVELOPMENTAL PSYCHOLOGY
(Faculty of Humanities)
24 NQF credits at HEQSF level 6
Convener: Dr L Wild

Course entry requirements: Students must have passed (PSY1004F* and PSY1005S*).* Was PSY1001W

Course outline:
This course introduces some of the major theoretical approaches to explaining general patterns and individual differences in human development from conception to death. Most of the material will focus on the processes that contribute to development in childhood. However, particular emphasis will be placed on the ways in which biological, social and cultural factors interact to shape psychological functioning across the entire life span.

**Lecture times:** 4th period.

**DP requirements:** Completion of all coursework.

**Assessment:** Coursework (essays and tests) counts 50%; one two-hour examination in June counts 50% towards the final mark.

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**HUB2015W  ANATOMY AND PHYSIOLOGY II FOR HEALTH AND REHABILITATION SCIENCES**

36 NQF credits at HEQSF level 6

**Convener:** Assoc Prof LM Davids

**Course entry requirements:** HUB1020S

**Objective:** To understand and obtain an integrative knowledge of the human body and its systems from an anatomical and physiological perspective.

**Course outline:**

This year-long course forms the second half of a two-year programme covering aspects of human anatomy and general physiology. Subjects include systems physiology such as respiratory, cardiovascular and reproductive physiology which are aligned with the anatomical teaching of these systems. Included in the syllabus is also aspects of endocrinology and nutrition and diet. It is a full course of lectures, interactive weekly tutorials, practicals and demonstrations. Special emphasis is placed on neuro-anatomy and neurophysiology.

**DP requirements:** Full attendance of and participation in all learning activities and completion of all coursework by the due dates.

**Assessment:** The in-course mark contributes 45% and comprises tutorial and practical tasks (15%) and a term test (30%). The summative assessment comprises two examinations, weighted at 55% and consisting of a written theory examination and structured practical examination.

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**AHS2043W  OCCUPATIONAL THERAPY II**

36 NQF credits at HEQSF level 6

**Convener:** M Motimele

**Course entry requirements:** PSY1005S or PSY1007S, HUB1020S, AHS1035F and AHS1032S.

**Course outline:**

This course focuses on the assessment of occupational performance, interests, needs and capacities in different life tasks/roles within the contexts of play, work, self-care and leisure. Students learn occupational therapy processes and assessment techniques for identifying individual health and occupational needs, interests and capacities. Content includes disability in primary healthcare, occupational performance assessment, occupational assessment of human beings and professional practice. By the end of this course, students are able to identify, conduct, interpret and record appropriate assessment of the occupational human, including sensory-motor, psycho-social and context-related dimensions; analyse human movements and human environments to identify and optimise opportunities for improved occupational engagement; analyse an activity in relation to occupational form and performance; explain restricted and intact performance components by means of activity analysis, movement analysis, contextual analysis and occupational performance; explain limitations in occupational engagement; and apply principles of professional practice at individual, group and community levels. The *Disability in Primary Healthcare* multidisciplinary module integrates with professional courses focusing on health promotion, culture, psyche and illness, equity, health and human rights.

**DP requirements:** Full attendance of and participation in all lectures, practical sessions, workshops and tutorials, and submission of all coursework by the due dates.

**Assessment:** Formative assessment contributes 60% and comprises class tests, assignments, small group projects, and practicals. The Disability in Primary Healthcare module is assessed by means of
one presentation and a written report. Summative assessment contributes 40% toward the final course mark and comprises of the following: a written theory exam, an objective standardised practical exam, and written reports.

**SLL1028H  XHOSA FOR HEALTH AND REHABILITATION SCIENCES**
18 NQF credits at HEQSF level 5
**Convener:** TBA
**Course entry requirements:** None.
**Course outline:**
This course introduces students to communication skills required for a successful interaction between a healthcare professional and a client. The course takes an integrated approach to language learning through incorporation of clinical experiences related to the disciplines of physiotherapy, occupational therapy, and communication and speech disorders. The main focus of this course is on pronunciation, grammar and interaction with clients. Interaction is used as a means of exposing students to the Xhosa ways of expression, as well as to issues of cross-cultural and inter-cultural communication. At the end of this course students will be able to communicate with a speaker of Xhosa about common everyday topics; be able to elicit and understand information from a client using terminology specific to the fields of physiotherapy, occupational therapy and communication and speech disorders; and will have an awareness of some cultural issues that emanate from cross-cultural communication.
**DP requirements:** Attendance of at least 80% of the lectures; completion by the due dates of all assessments and projects.
**Assessment:** Coursework (vocabulary and oral assessments based on topics covered in the course) counts 50% and comprises four tests (two weighted at 15% each, and two weighted at 10% each); and examinations (June examination – simulated client interviews: 20%; and November examination – simulated client interviews: 30%).

**SLL1048H  AFRIKAANS FOR HEALTH AND REHABILITATION SCIENCES**
*For students registered in the School of Health and Rehabilitation Sciences only.*
18 NQF credits at HEQSF level 5
**Convener:** Dr I van Rooyen
**Co-requisites:** Students must be registered for a degree in physiotherapy, occupational therapy, speech and language pathology or audiology.
**Course outline:**
The content of the course is based on case studies covered in the streams of physiotherapy, occupational therapy and communication sciences and speech disorders. The focus of the Afrikaans course is on communication skills, and specifically on those skills that may be required for an interaction between a healthcare professional and a client. Other skills include skill in asking questions and the ability to enter effectively into dialogue with a client. The course is taught at both beginner and intermediate levels and focuses on the unique pronunciation and stylistic variants of individual clients and culture-specific words and expressions.
**Lecture times:** Arranged internally.
**DP requirements:** At least 80% class attendance and completion of all assessments.
**Assessment:** Coursework (vocabulary and oral assessments based on topics covered in the course) – 50%; June assessment (simulated client interviews) – 20%; November examination (simulated client interviews) – 30%.

**AHS3078H  RESEARCH METHODS & BIOSTATISTICS I**
10 NQF credits at HEQSF level 7
**Convener:** Prof J Jelsma
**Course entry requirements:** None
**Course outline:**
The course provides students with the necessary skills and conceptual knowledge to conduct research in occupational therapy and physiotherapy. Students receive lectures which cover the theory of qualitative and quantitative research, the ethics of research, epidemiology and basic biostatistics. Students learn how to analyse research articles critically and to develop a research proposal. This course is taught through lectures, tutorials and online assignments.

**DP requirements:** No student may proceed to the examination without attending lectures on ethics or completing an online ethics course. No student may proceed to the research project until the research protocol has been awarded a mark of 50%. The protocol may need to be resubmitted.

**Assessment:** The mark allocation is as follows: Research methodology continuous assessment (5%); research methodology paper (5%); epidemiology paper (5%); research protocol for fourth year (25%); biostatistics (10%) and examination – critical appraisal (50%).

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**AHS3107W OCCUPATIONAL THERAPY THEORY AND PRACTICE IN PHYSICAL HEALTH**

38 NQF credits at HEQSF level 7

**Convener:** Dr A Sonday

**Course entry requirements:** AHS2043W, PRY2002W, PSY2003S or PSY2009F.

**Course outline:**
This course enables students to demonstrate knowledge about and skills in promoting physical health and well-being through human occupation, and in addressing occupational implications of specific physical health conditions. It focuses on developing a client-centred occupational therapy plan that assists people with physical health concerns to participate in life through the everyday things that they need and want to do. Students learn to select, apply and interpret appropriate assessment methods for determining performance enablers and performance components for a range of ‘physical’ health conditions. Students develop skills in selecting, implementing and applying change modalities which enable performance and/or remediate performance component deficits. Students begin to understand how policies inform service delivery and facilitate participation of people with a range of ‘physical’ health conditions at an individual level. By the end of this course, students are able to select, apply and interpret appropriate assessment methods for determining performance enablers and performance components for a range of physical health conditions; develop and justify a client-centred occupational therapy plan to address performance enablers, performance components and occupational performance as appropriate; and demonstrate skill in selecting, implementing and applying change.

**DP requirements:** Full attendance of and participation in all lectures, practical sessions, workshops and tutorials, and completion of all coursework by the due dates.

**Assessment:** Coursework assessments contribute 50% and comprise a written paper, an objective standardised practical exam (OSPE), practice learning demonstrations, student performance reports and case studies. The final examinations contribute 50% to the final mark and comprise a written paper, an objective standardised practical exam and practice learning demonstration, as well as student performance reports.

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**AHS3108W OCCUPATIONAL THERAPY THEORY AND PRACTICE IN MENTAL HEALTH**

38 NQF credits at HEQSF level 7

**Convener:** Z Hajwani

**Course entry requirements:** AHS2043W, PRY2002W, PRY2003S or PRY2009F.

**Course outline:**
This course focuses on promoting mental health and well-being through human occupation and addresses occupational implications of specific mental health disorders. Students develop a client-centred occupational therapy plan to assist people with mental health concerns to participate in everyday life. They select, apply and interpret appropriate assessment methods for psycho-social performance impairments and occupational performance enablers and apply change modalities that address psycho-social impairments and promote people’s engagement in valued life tasks and roles. They learn how policies inform mental health service delivery and their role in addressing
psychiatric disability. By the end of this course, students have knowledge about mental health and the occupational performance implications of mental disorders; can implement an occupational therapy process with individuals and groups of mental health service users; can use and interpret standardised and non-standardised OT assessments; and can apply knowledge, skill and attitudes in client-centred, professional interactions with individuals who have a psychiatric illness. They also have skill in altering, adapting and creating optimal environments that support participation and occupational performance during and following an emotional crisis or mental health episode or when structural risks exist that impact adversely on people’s mental health.

**DP requirements:** Full attendance of and participation in practice learning; and completion of all course requirements by the due dates.

**Assessment:** Coursework assessments contribute 50% and comprise a written paper, an objective standardised practical exam, practice learning demonstrations, student report forms and case studies, and a mental health assignment. The final examinations contribute 50% to the final mark and comprise a written paper, an objective standardised practical exam, practice learning demonstrations and student report forms.

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**AHS3113W FOUNDATION THEORY FOR OCCUPATIONAL THERAPY PRACTICE I**

26 NQF credits at HEQSF level 7

**Convener:** Z Hajwani

**Course entry requirements:** AHS2043W.

**Course outline:**
This course includes occupational therapy models and philosophy, theories of empowerment and development, equity and diversity, and disability in primary healthcare. Themes underpinning the course are primary healthcare and contextual relevance, and developing agents for change. Course objectives include skills of knowledge translation, problem-solving, professional writing and presentation, ethical reasoning and an attitude of professionalism. Teaching and learning activities include lectures, small group discussions, class presentations, and visits to service sites. By the end of this course, students will be able to understand the philosophy of client-centred practice; demonstrate competence in following the occupational therapy process; demonstrate skill in selecting, implementing and applying activity as a means and occupation as an end; understand and work effectively with diversity in context; understand professional and ethical use of self in relationships with individuals, groups, and other stakeholders; demonstrate an ability to select and apply an appropriate OT practice model matched to the client; demonstrate skill in documenting OT plans; demonstrate skill in using the five modes of clinical reasoning; and demonstrate a multidisciplinary approach.

**DP requirements:** Attendance at all lectures; completion of all coursework by the due dates.

**Assessment:** Coursework assessments contribute 50% to the final mark and comprise a written paper, assignments and small group projects. The final examination contributes 50% to the overall mark and comprises a written paper.

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**AHS4119W OCCUPATIONAL THERAPY RESEARCH & PRACTICE MANAGEMENT**

48 NQF credits at HEQSF level 8

**Convener:** Assoc Prof E Duncan

**Course entry requirements:** AHS3078H, AHS3107W, AHS3108W, AHS3113W and SLL1028H or SLL1048H.

**Course outline:**
This course equips students with the knowledge, skills and attitudes required for learning through research, effective management and leadership, and a sound appreciation of OT philosophy and ethics. Students enter with a completed research proposal developed in AHS3078H. They implement and document a research project and acquire skill in writing and presenting findings to professional and stakeholder audiences. Content includes organisational development, practice management and service administration. Core functions include marketing, human resources,
project and financial management and the theory of planning, implementing and evaluating health and development programmes across a range of public and private sectors. At the end of this course, students can demonstrate knowledge, skills and attitudes required for rigorous and ethical OT; are able to implement evidence-based OT interventions; appreciate relationships between management functions of controlling, leading, planning and organising in OT practice contexts; describe organisational development; recognise dynamics within an organisation; and identify strategies for working within the limitations imposed by these dynamics. They understand core principles of operations management, financial management, project management, strategic management and marketing in OT.

DP requirements: Attendance at all lectures; completion of all coursework by the due dates.

Assessment: Coursework assessments contribute 50% to the final mark and comprise a group research project and a June online test. The final examinations contribute 50% to the overall mark and comprise a policy brief and a written examination paper.

AHS4120W FOUNDATION THEORY FOR OCCUPATIONAL THERAPY PRACTICE II
48 NQF credits at HEQSF level 8
Convener: P Gretschel
Course entry requirements: AHS3113W.
Course outline:
This course focuses on occupation-based approaches to human and social development appropriate for the health needs of individuals, groups and populations across the life span within the South African context. OT for the promotion of well-being and full participation of people with disabilities and people at risk for health and social marginalisation are explored. Disability and diversity politics, legislation and policies lay the foundation for understanding the contribution of occupational therapy to social change. Content also includes OT principles of promotive, preventive, therapeutic and rehabilitative practice. These principles are addressed with reference to the primary healthcare philosophy. Clinical, population and professional reasoning is developed, as is an occupation-focused understanding of contexts in which people play, learn, live, work and socialise. Students learn how policy applies to OT practice and how OT practice can promote social inclusion and participation. They analyse health, education/labour and social development policies in relation to occupational needs; influences shaping the world of work, play, learning and development; learn to appreciate the value of play as to promote development and health; to understand the occupational therapist’s role in promoting occupational engagement; to identify actions promoting occupational justice; and to design appropriate interventions.

DP requirements: Attendance at all lectures; completion of all coursework by the due dates.

Assessment: Formative assessments contributes 50% to the final mark and comprise a work practice strategies assignment, a child learning development and play assignment, a community development practice assignment and a June test paper. Summative assessment contributes 50% to the final mark and comprises a written examination paper.

AHS4121W OCCUPATIONAL THERAPY PRACTICE AND SERVICE LEARNING
48 NQF credits at HEQSF level 8
Convener: T Mohomed
Course entry requirements: AHS3107W, AHS3108W.
Course outline:
This course applies OT learning theory and processes in direct and indirect service to individuals, groups and communities to attain health and development objectives through occupation. An OT perspective of public health and the primary healthcare approach forms the basis of practice. Students acquire skills in the design and implementation of appropriate, comprehensive, OT programmes, in collaboration with role-players. Knowledge, skills and attitudes, including clinical and population-based reasoning and reflection are developed. The course provides learning environments across health and socio-economic conditions, age groups, settings and sectors for each
individual student within available resources. At the end of this course, the student can identify occupational injustice; facilitate co-operation between government sectors; promote inclusive environments within policy frameworks; interpret limitations in or barriers to occupational performance; select, use and justify conceptual frameworks and change modalities to promote play, learning and development informed by evidence-based practice; contribute to children’s development from an OT perspective; recommend enhancing opportunities for work entry/re-entry; implement a community-based OT programme or project using a developmental approach; and apply occupation-based methods that support social action.

DP requirements: Attendance of all practice-learning placements and practice-learning tutorials.

Assessment: Coursework assessments contribute 45% to the final mark and comprise practical demonstrations and a practice-learning student performance report. The final examinations contribute 55% to the overall mark and comprise a portfolio, a video and poster of students’ work with a client, group or organisation, as well as an objective standardised practical examination.

HSE1003S PREPARATION FOR ENTRY-LEVEL PSYCHOLOGY FOR HEALTH AND REHAB SCIENCES PART I
The credits are included in those for PSY1104F.
18 NQF credits at HEQSF level 5

Convener: Dr B Ige and E Badenhorst

Course entry requirements: None

Course outline:
This course develops and strengthens students’ understanding of the basic psychological concepts, principles and terminology introduced in semester one by revisiting material covered in PSY1004F. Students are introduced to the building blocks, core principles and concepts of PSY1004F, such as learning, memory, developmental psychology, health psychology and psychopathology, in order to develop and strengthen a basic knowledge of central areas in psychology. The course also develops and strengthens empirical skills in order to allow students to critically assess studies on which psychological theory is based. Students engage with the discipline in a critical and analytical way by revisiting the core principles of theory and research. In order to familiarise students with the modes of learning that will be required of them upon entry into PSY1005S, as well as the style of instruction they will encounter in the course, students attend lectures and small group tutorials to develop academic skills and techniques. The outcome of AHS1031S is a fundamental understanding of psychology, an ability to look critically at concepts and theories in the discipline, and an understanding of the practical application of psychology in everyday life and in students’ future professions.

DP requirements: Full attendance of and participation in all lectures, practical sessions, workshops and tutorials. All assignments must be submitted by their due date.

Assessment: In-course assessment contributes 60% and comprises one essay (10%); one research project essay (15%); tutorial assignments (10%) and two tests (25%). The final written test contributes 40%.

HSE1008S FUNDAMENTALS OF ANATOMY AND PHYSIOLOGY IA
0 NQF credits at HEQSF level 5

Convener: Dr A Abrahams and Dr B Ige

Course entry requirements: None

Course outline:
This foundation (Intervention Programme) course revisits the key concepts and core material of HUB1019F Anatomy and Physiology IA. Course content addresses the fundamental anatomical and physiological knowledge and skills relevant to the rehabilitation sciences professions and includes an overview of cells and systems in the human body; cellular physiology; physiology of nerves; and the anatomy of the upper limbs. The relevance of these concepts for the rehabilitation professions is emphasised through the use of specifically selected examples of injury, health conditions and disability. Attention is given to the specific terminology of the anatomy and physiology disciplines, as well as to the underlying scientific literacy and numeracy skills required to achieve proficiency in
these areas. At the end of this course, students will be able to describe the anatomy of the upper limb, explain the basic physiological and anatomical concepts and processes outlined above, and give an overview of human physiology from the level of cells to the whole body. Teaching and learning strategies include lectures, tutorials, practical sessions, clinical case discussions and self-directed learning sessions.  

**DP requirements:** Students must attend and participate in all lectures, practical sessions, workshops and tutorials. All assignments must be submitted by their due date.

**Assessment:** Assessment of the course comprises written assignments and in-course assessments. The in-course mark contributes 50% to the final mark and comprises two tests (weighted 10% and 20% respectively); physiology assignments (10%); and anatomy assignments (10%) in HSE1008S. The final written test contributes 50% to the mark for HSE1008S. These assessments contribute 40% towards the final year mark in HSE1009F at the end of IP2.

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**HSE1010S  FUNDAMENTALS OF HUMAN OCCUPATION AND DEVELOPMENT IA**

The credits are included in those for HSE1011F

0 NQF credits at HEQSF level 5

**Convener:** Dr B Ige and Ms Z Hajwani

**Course entry requirements:** None

**Course outline:**

This foundational (Intervention Programme) course revisits key concepts of the AHS1035F Human Occupation and Development course. The course develops students’ procedural and critical thinking by exploring how basic concepts and theories in occupational therapy, including definitions, terminology, classification and professional values, are applied in practice. By engaging with people of different ages in various practice learning contexts, students gain a deeper appreciation of human development across the lifecycle. An integrated understanding of self-care, productivity and leisure unfolds as students explore these dimensions of occupational performance across the lifespan in relation to ability, culture and context. By the end of this course, students will be able to defend in verbal and written form, using at least two occupational theories, their stance on the notions of ‘doing’, ‘being’ and ‘becoming’ as applied to their personal participation in selected occupations; execute and document with reasoned explanations a detailed macro and micro activity analysis on a selected occupation; retrieve, analyse and use literature to explain various dimensions of human development as evidenced in the performer/‘doer’ of a selected occupation; and explain and critique a range of occupational therapy terms and taxonomies in relation to their origins, meanings and relevance in context.

**DP requirements:** Students are expected to attend and participate in all learning activities –lectures, self-studies, tutorials and practice learning visits. All self-study tasks must be completed by the due dates.

**Assessment:** Assessment comprises continuous assessment tasks (10%), which include class tests, learning paragraphs and oral presentations; two assignments (10% and 20% respectively); two tests (20% and 40% respectively). These assessments contribute 40% towards the final year mark in HSE1011F at the end of IP2. There is no summative examination for this course after IP1. The final assessment takes place in HSE1011F.

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**PSY1006F  INTRODUCTION TO PSYCHOLOGY PART 1 +**

10 NQF credits at HEQSF level 5

**Convener:** Dr L Schrieff-Elson

**Course entry requirements:** PSY1006F is only open to students registered in the Humanities Faculty Extended Degree Programme (HB062) who hope to major in Psychology or Organisational Psychology, and to students in named Health Sciences and Social Development programmes who do not meet the APS requirements for PSY1004F. Students registered for HB062 must have completed MAM1022F and MAM1016S. Students registered for Social Development programmes (HB063) must also be registered for MAM1014F.

**Co-requisites:** PSY1004F
Course outline:
The purpose of this course is to augment and support its co-requisite course: PSY1004F INTRO TO PSYCHOLOGY PART 1. It aims to improve students’ performance by enhancing their grasp of key ideas and concepts, and by developing their mastery of the disciplinary discourse. It provides additional pedagogic enrichment in the form of regular Plus Tuts that extend into Writing Hub exercises and consultations. In these tutorials, students will receive explicit support around the co-requisite course assignments and detailed feedback on their written work.

Lecture times: Tutorial times by sign-up with the department.

DP requirements: 100% tutorial attendance plus successful completion of all coursework assignments.

Assessment: Coursework 100% comprising of tutorial assessments and other written work.

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HSE1009F  FUNDAMENTALS OF ANATOMY AND PHYSIOLOGY IB
36 NQF credits at HEQSF level 5
Convener: Dr A Abrahams and Dr B Ige
Course entry requirements: None

Course outline:
This foundation course aims to prepare students for HUB1020S Anatomy and Physiology IB when they re-enter the standard curriculum. It revisits key concepts and core material of HUB1019F and builds on knowledge and skills acquired in HSE1008S. It focuses on key systems within the human body. Content includes the physiology of muscle, the cardiovascular system, the respiratory system, and the anatomy of the lower limb. The underlying physiological concepts, principles and mechanisms and relevant structural anatomy of the thorax, heart and lungs are presented in an integrated manner. Carefully selected studies relate the cases to the clinical practice of occupational therapy and physiotherapy. Specific terminology of the anatomy and physiology disciplines is included, and underlying scientific literacy and numeracy skills are developed. Teaching/learning strategies include lectures, tutorials, practical sessions, clinical case discussions and computer-aided learning sessions. At the end of this course, students will be able to describe the anatomy of the lower limb; explain key concepts in the normal physiology of muscle and nerve cells; describe the anatomy of the thorax, heart, blood vessels and lungs; explain key concepts in the normal physiology of the cardiovascular and respiratory systems; and explain how the cardiovascular and respiratory systems work together.

DP requirements: Attendance of and participation in all lectures, practical sessions, workshops and tutorials, and submission of assignments by the due date.

Assessment: Assessment of the course comprises a written in-course assessment and a final course examination. The in-course assessment consists of two tests (weighted 10% and 20% respectively towards the total mark); physiology assignments (10%) and anatomy assignments (10%). The final written examination contributes 50% towards the total mark. These assessments and examination contribute 60% towards the final year-mark at the end of IP2.

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HSE1011F  FUNDAMENTALS OF HUMAN OCCUPATION AND DEVELOPMENT 1B
48 NQF credits at HEQSF level 5
Convener: Dr B Ige and Z Hajwani
Course entry requirements: HSE1010S

Course outline:
This foundational (Intervention Programme) course prepares students for what they will encounter in AHS1035F Human Occupation and Development when they re-enter the standard curriculum. It develops students’ analytical thinking by exploring the relationship between what people do and their health, well-being and quality of life. By investigating the environments in which people function, students will appreciate the needs, aspirations and capabilities of humans as occupational beings. By the end of the course, students can execute a detailed macro and micro analysis of an activity executed by able and disabled people using a range of different approaches [e.g. Hagedorn, Cynkin and ICF] and identify links with psychology, anatomy and physiology; execute a basic
ergonomic analysis of a selected occupational performance challenge experienced by a disabled person in context; identify and provide a rationale for the environmental determinants that influence what, why, when, where, how and with whom people do the things they do every day; identify and explain various forms of occupational risk factors; and draw on a range of sources (electronic, experiential, and documented) to critique and defend the values and philosophy of occupational therapy as evidenced in practice.

**DP requirements:** Students are required to attend and participate in all learning activities, practice learning visits, lectures, self-studies and tutorials. All self-study tasks must be completed by the due dates.

**Assessment:** This comprises continuous assessment tasks (weighted 10% towards the final mark); two assignments weighted 15% each; two tests weighted 15% each; and an examination that contributes 30% to the final mark.
BACHELOR OF SCIENCE IN PHYSIOTHERAPY
[MB004][SAQA ID:3345]

Convener:
Dr S Maart (Department of Health & Rehabilitation Sciences)

Programme code: MB004 or MB017 (Intervention Programme). Plan code: MB004AHS08. SAQA registration number: 3345.

Physiotherapy is an applied discipline dedicated to the study of human movement and function and its relevance to health and well-being. As such, physiotherapy involves the skilled use of physiologically-based movement techniques, supplemented when necessary by massage, electrotherapy and other physical means, for the prevention and treatment of injury and disease. It is used to assist the processes of rehabilitation and restoration of function, including the achievement of personal independence. Candidates for the degree programme should be interested in human relationships and have a strong commitment to service within the field of healthcare.

The Division of Physiotherapy strives to be a world-class, African Division of Physiotherapy and is committed to the primary healthcare approach of educating physiotherapists who will be well prepared to meet the health, rehabilitation and research needs of our country. The programme is designed to equip students both academically and professionally with the skills and clinical expertise required to practise competently and confidently within a variety of healthcare settings, including hospitals, clinics, community health centres, special schools, homes and other community-based facilities. Accordingly, students are required to carry out clinical practice in urban and peri-urban areas as well as informal settlements. Students are required to wear shorts and T-shirts for practical classes. As physiotherapy is a practical discipline, students are expected to disrobe for some of their practical classes. They are expected to wear suitable navy trousers and a prescribed white shirt for their clinical practice. The lecturers are committed to a philosophy of evidence-based teaching within the undergraduate programme.

Duration of programme
FBE1 The curriculum for the degree extends over four years of full-time study. Students who pass through the Intervention Programme will take an additional year to complete the degree.

Curriculum
[Note: See p9 for explanatory notes about HEQSF levels and NQF credits.]

FBE.2.1 First year

<table>
<thead>
<tr>
<th>Number</th>
<th>Course</th>
<th>NQF Credits</th>
<th>HEQSF Level</th>
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<tr>
<td>PSY1004F</td>
<td>Introduction to Psychology Part I or</td>
<td>18</td>
<td>5</td>
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<tr>
<td>PSY1006F</td>
<td>Introduction to Psychology Part I Plus</td>
<td>10</td>
<td>5</td>
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<tr>
<td>HUB1019F</td>
<td>Anatomy and Physiology IA</td>
<td>18</td>
<td>5</td>
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<tr>
<td>HUB1022F</td>
<td>Biosciences for Physiotherapy IA</td>
<td>9</td>
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<tr>
<td>AHS1033F</td>
<td>Movement Science I</td>
<td>18</td>
<td>5</td>
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<tr>
<td>PPH1002S</td>
<td>Becoming a Health Professional</td>
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<td>5</td>
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<tr>
<td>HUB1020S</td>
<td>Anatomy and Physiology IB</td>
<td>18</td>
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<tr>
<td>AHS1034S</td>
<td>Introduction to Applied Physiotherapy</td>
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<td>Total credits per year</td>
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FBE2.2 Any student who fails one or more of the following courses may be required to enter the Intervention Programme Parts 1 and 2:

PSY1004F Introduction to Psychology Part I
PSY1006F Introduction to Psychology Part I Plus
HUB1019F Anatomy and Physiology IA
HUB1022F Biosciences for Physiotherapy IA
AHS1033F Movement Science I

FBE2.3 A student who was not required to enter the Intervention Programme Part 1, or who fails a course in the second semester of the first year of the standard curriculum, may be required to enter the Intervention Programme Part 2:
PPH1002S Becoming a Health Professional
HUB1020S Anatomy & Physiology IB
HUB1023S Biosciences for Physiotherapy IB
AHS1034S Introduction to Applied Physiotherapy

FBE2.4 Second year

<table>
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<th>Course</th>
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<tr>
<td>SLL1028H</td>
<td>Xhosa for Health and Rehabilitation Sciences* or</td>
<td>18</td>
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<tr>
<td>SLL1048H</td>
<td>Afrikaans for Health and Rehabilitation Sciences*</td>
<td>18</td>
<td>5</td>
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<tr>
<td>MDN2002W</td>
<td>Clinical Sciences I</td>
<td>13</td>
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<td>HUB2015W</td>
<td>Anatomy &amp; Physiology II for Health &amp; Rehab Sciences</td>
<td>36</td>
<td>6</td>
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<tr>
<td>HUB2023W</td>
<td>Biosciences for Physiotherapy II</td>
<td>9</td>
<td>6</td>
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<td>AHS2050H</td>
<td>Clinical Physiotherapy I</td>
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<td>AHS2052H</td>
<td>Movement Science II</td>
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<td>AHS2053H</td>
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<td><strong>164</strong></td>
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*Note: Students who speak an African language as a home language will be required to register for Afrikaans; students who speak English or Afrikaans as a home language will register for Xhosa.*

FBE2.5 Third year

<table>
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<th>Number</th>
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<td>AHS3069W</td>
<td>Clinical Physiotherapy II</td>
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<td>7</td>
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<tr>
<td>AHS3070H</td>
<td>Becoming a Rehabilitation Professional I</td>
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<td>7</td>
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<td>AHS3076H</td>
<td>Movement Science III</td>
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<td>AHS3077H</td>
<td>Applied Physiotherapy II</td>
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<td>AHS3078H</td>
<td>Research Methods and Biostatistics I</td>
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<td><strong>Total credits per year</strong></td>
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FBE2.6 Fourth year

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<td>AHS4071H</td>
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<td>AHS4072H</td>
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<td><strong>Total credits per year</strong></td>
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**Total credits for programme** | **588** |

Intervention programme

FBE3.1 The following courses must be satisfactorily completed during the Intervention Programme by a student who enters the Intervention Programme after semester 1:
### Intervention Programme Part 1:

#### Core Modules

<table>
<thead>
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<td>HSE1012S</td>
<td>Fundamentals of Biosciences for Physiotherapy IA</td>
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<td>HSE1003S</td>
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<td>HSE1014S</td>
<td>Fundamentals of Movement Science and Applied Physiotherapy IA</td>
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</table>

FBE3.2 A student who fails HSE1003S and has met the DP requirement for this course may be permitted to repeat the course during the summer term. If he/she again fails HSE1003S during the summer term, he/she may be refused readmission.

FBE3.3 A student entering IP who failed PSY1004F or PSY1006F in the first semester of the standard first year programme will be required to register for all IP1 courses, including HSE1003S.

FBE3.4 The following courses must be satisfactorily completed during the Intervention Programme by a student who has completed the Intervention Programme Part 1 or who is required to enter the Intervention Programme after semester 2 of the standard curriculum:

### Intervention Programme Part 2:

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<td>HSE1013F</td>
<td>Fundamentals of Biosciences for Physiotherapy IB</td>
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<td>HSE1015F</td>
<td>Fundamentals of Movement Science and Applied Physiotherapy IB</td>
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<tr>
<td>PSY1006F</td>
<td>Introduction to Psychology Part I Plus*</td>
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</tbody>
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* [Note: For students who failed PSY1004F in the first semester of first year.]

### DP (Due Performance) requirement

FBE4 A minimum of 80% attendance is required for lectures, practicals and tutorials in all professional modules and courses. Absence on medical grounds requires a medical certificate. Validity of absence on grounds of personal or other problems is considered on an individual basis by the academic staff in the Division.

### Minimum requirements for progression and readmission

[Note: These rules must be read in conjunction with the general rules for students in the Faculty in the relevant front section of this Handbook.]

FBE5.1 Students are required to do a nursing elective as part of AHS2050H. The elective must be for a total of 40 hours, at a facility recognised by the Divisional Board of Physiotherapy, and must be completed before the start of the second semester. Students whose performance in the nursing elective is deemed unsatisfactory have to repeat the
elective before progressing to the next year of study.

FBE5.2 Students are required to complete a three-week elective satisfactorily as part of AHS4065W and before the start of the second semester, during which they may arrange to work at any healthcare facility recognised by the Divisional Board. Students whose performance is deemed unsatisfactory are required to undertake a period of additional clinical work, at the discretion of the Divisional Board.

FBE5.3 Except by permission of the Senate, a student will not be permitted to renew his/her registration for the degree:
(a) if he/she is in the Intervention Programme and fails any course in it (no supplementary examinations are offered in IP);
(b) if he/she fails a course which he/she is repeating;
(c) unless he/she, from the second year of study, successfully completes in each year’s examination cycle half or more of the course (an examination cycle being an examination plus a supplementary or deferred examination, if awarded);
(d) unless he/she successfully completes all the prescribed courses for any single year in two years;
(e) if he/she is unable to complete the standard programme in six years.

FBE5.4 A student who has not fulfilled the required number of clinical hours will not be permitted to proceed to the next year of study (or to graduate, if he/she is in his/her final year of study).

FBE5.5 A student who fails any course and is required to repeat any year will be required to repeat the Clinical Physiotherapy course for that year (AHS2050H Clinical Physiotherapy I; AHS3069W Clinical Physiotherapy II; AHS4065W Clinical Physiotherapy III) and to pay full fees. A student who has passed but obtained less than 55% for either the Applied Physiotherapy or Movement Science professional physiotherapy courses will be required to repeat those courses.

Distinction
FBE6 The degree may be awarded with distinction (a credit-weighted average of 75% or above for all courses from first to final year of study).

Courses for BSc in Physiotherapy

PPH1001F BECOMING A PROFESSIONAL
15 NQF credits at HEQSF level 5
Convener: L Ockers
Course entry requirements: None
Course outline:
This course introduces first year students in all health sciences professions to professionalism and professional conduct. The course aims to promote the conduct, knowledge, attitudes and values associated with being a professional and a member of a professional team. Students learn interpersonal skills, including being non-judgemental, empathetic, ethical and respectful of human
rights when working with colleagues, clients, patients and community members who may have different values and traditions. Students learn theory on interviewing and interpersonal skills, which is applied in simulated and real interviews; theory related to group and social roles applied in simulated experiences to build team membership and leadership skills; and critical analysis of and reflection on professional conduct, diversity, health and human rights. The educational approach is participatory and experiential and all students are required to engage actively in small learning groups. Academic, digital and information literacies are systematically integrated from the outset. The course also includes a workshop on HIV-AIDS, designed to introduce students to the relevance of HIV-AIDS issues in their private and professional lives.

**DP requirements:** Attendance at all small group learning sessions and other academic commitments, including the HIV-AIDS workshop; completion of all set assignments and assessment activities.

**Assessment:** Continuous, performance-based assessment provides students with regular feedback. In-course assignments comprise 60% of the total mark. The final, summative exam assessment makes up 40% of the total mark.

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**PSY1004F INTRO TO PSYCHOLOGY PART 1**  
*(Faculty of Humanities)*  
18 NQF credits at HEQSF level 5  
**Convener:** Dr L Schrieff-Elson  
**Course outline:**  
The course aims to introduce the student to some of the areas of specialisation within psychology. These include history of psychology, biopsychology and memory, genetics and evolutionary psychology, health psychology, developmental psychology, psychopathology and psychotherapy, and learning. Students are taught a great deal about plagiarism and develop skills necessary to write essays and prepare other submissions to the Psychology department.  
**Lecture times:** 1st or 5th period.  
**DP requirements:** Satisfactory completion of all assignments by due date, attend at least 80% of tutorials, complete all class tests. In addition, obtain one Student Research Participation Programme (SRPP) point or equivalent.  
**Assessment:** Coursework (term assignments and tests) counts 50%; one two-hour examination in June counts 50%. Students are expected to complete the June examination as well as all coursework before being awarded a pass in this class. *NOTE: Credit will not be given for both PSY1004F and PSY1006F.*

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**PSY1006F INTRODUCTION TO PSYCHOLOGY PART 1**  
10 NQF credits at HEQSF level 5  
**Convener:** Dr L Schrieff-Elson  
**Course entry requirements:** PSY1006F is only open to students registered in the Humanities Faculty Extended Degree Programme (HB062) who hope to major in Psychology or Organisational Psychology, and to students in named Health Sciences and Social Development programmes who do not meet the APS requirements for PSY1004F. Students registered for HB062 must have completed MAM1022F and MAM1016S. Students registered for Social Development programmes (HB063) must also be registered for MAM1014F.  
**Co-requisites:** PSY1004F  
**Course outline:**  
The purpose of this course is to augment and support its co-requisite course: PSY1004F INTRO TO PSYCHOLOGY PART 1. It aims to improve students’ performance by enhancing their grasp of key ideas and concepts, and by developing their mastery of the disciplinary discourse. It provides additional pedagogic enrichment in the form of regular Plus Tuts that extend into Writing Hub exercises and consultations. In these tutorials, students will receive explicit support around the co-requisite course assignments and detailed feedback on their written work.  
**Lecture times:** Tutorial times by sign-up with the department.
**DP requirements:** 100% tutorial attendance plus successful completion of all coursework assignments.

**Assessment:** Coursework 100% comprising of tutorial assessments and other written work.

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**HUB1019F** ANATOMY & PHYSIOLOGY IA

18 NQF credits at HEQSF level 5

**Convener:** Dr C Warton

**Course entry requirements:** None

**Course outline:**
This course consists of five lectures and one practical/tutorial per week. It includes an introduction to anatomy and the structure of the upper limb. It also includes an introduction to the cellular basis of physiology, tissue and body systems, with emphasis on nerve, muscle and body fluids.

**DP requirements:** Attendance of and participation in all lectures, practical sessions, workshops and tutorials, and submission of assignments by the due date.

**Assessment:** The course comprises written and on-going practical assessments, which make up 45% of the course mark. The other 55% comprises marks for the final written and practical exams.

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**HUB1022F** BIOSCIENCES FOR PHYSIOTHERAPY IA

9 NQF credits at HEQSF level 5

**Convener:** S Steiner

**Course entry requirements:** None

**Objective:** Physics: To equip students with basic skills to assess simple problems involving forces and torques in systems; predict what forces and torques are required to cause motion. Chemistry: To provide students with a basic understanding of the chemical principles and how they relate to the physiology of the body.

**Course outline:**
This introductory course provides first year physiotherapy students with the fundamental aspects of chemistry, biochemistry and fundamental physical science related to biomechanics. Topics have been selected to promote the integration of theoretical and practical knowledge. Content for physical science includes measurement, units, conversion of units, review of trigonometry; vectors, vector algebra and resolution of vectors; displacement, velocity and acceleration; free-body diagrams; forces and Newton’s laws in linear systems; torques and angular systems; and lever systems. Content for chemistry includes physical chemistry; principles of atoms and elements; basic stoichiometry of reactions in solutions, with an emphasis on molar concentrations and the principle of osmosis; an introduction to physiological enzyme structure and kinetics; the basics of cellular metabolism; chemical equilibrium, acids and bases and biological buffering systems. The course is taught through lectures, weekly tutorials and assignments. By the end of the course, students should be able to assess simple problems and determine forces and torques in systems; predict what forces and torques are required to cause motion; and understand basic chemical principles and how they relate to body physiology.

**DP requirements:** Students must attend 75% of tutorials, hand-ins and mini tests and must obtain a combined class mark of at least 40%.

**Assessment:** The course mark contributes 60% and comprises assignments (10%); class tests (30%); and ad hoc mini tests (20%). The examination contributes 40% and consists of a three-hour written examination in June. Both the physics and chemistry components of the course must be passed, with a subminimum of at least 40% for each component in the final examination.

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**AHS1033F** MOVEMENT SCIENCE I

18 NQF credits at HEQSF level 5

**Convener:** N Naidoo

**Course entry requirements:** None

**Course outline:**
Students are introduced to the basic terminology and science associated with human movement. Course content includes basic assessment and mobilisation of joints, principles of muscle strengthening and soft tissue mobilising techniques. This course is taught through lectures, practical demonstrations, workshops, self-study sessions and tutorials. At the end of this course, students will be able to apply techniques of joint mobilisation (passive movements); measure and record joint range of motion; evaluate muscle strength and apply the principles of strengthening; and will understand soft tissue healing and apply techniques to treat soft tissue dysfunction.

**DP requirements:** Full attendance of and participation in all lectures, practical sessions, workshops and tutorials, and submission of assignments by the due dates.

**Assessment:** The course mark is weighted 50% and comprises tutorial tasks (weighted 15% towards the final mark); a theory test (20%); and a structured practical test (15%). The final examination mark is weighted at 50% and comprises a written theory examination (25%) and a structured practical examination (25%).

**PPH1002S   BECOMING A HEALTH PROFESSIONAL**
15 NQF credits at HEQSF level 5

**Convener:** L Ockers

**Course entry requirements:** PPH1001F

**Course outline:**
This course builds on the knowledge and skills gained in PPH1001F Becoming a Professional. Focus is on the primary health care approach and disability. The course equips students to work collaboratively on a community-oriented project based on the primary healthcare principles and approach including comprehensive healthcare (promotive, preventive, curative, rehabilitative and palliative care within the primary, secondary and tertiary levels of care), intersectoral collaboration, community involvement, and accessibility of and equity in healthcare. Students are required to apply the knowledge, skills and values from PPH1001F to develop an appreciation of the contribution of all healthcare professionals to the promotion, maintenance and support of health and the healthcare of individuals, families and communities within the context of disability. The educational approach is participatory and project-based and all students are required to engage actively in the project and in small learning groups. Academic, digital and information literacies are systematically integrated from the outset. The course incudes a basic life support skills workshop.

**DP requirements:** Attendance at all group sessions, community and health service site visits and the life support skills workshop; completion of all assignments and assessment activities.

**Assessment:** Continuous, performance-based assessment provides students with regular feedback and comprises 60% of the total mark. The final summative assessment makes up 40% of the total mark.

**HUB1020S   ANATOMY & PHYSIOLOGY IB**
18 NQF credits at HEQSF level 5

**Convener:** Dr C Warton

**Course entry requirements:** HUB1016F or HUB1019F

**Course outline:**
This course consists of five lectures and one practical/tutorial per week. It focuses on human body systems and includes the anatomy and physiology of the cardiovascular system, thorax and respiratory systems and the lower limb. The main aim is to integrate anatomical and physiological knowledge in order to understand the human body as a complete organism. Content also includes the anatomy of the lower limbs.

**DP requirements:** Attendance of and participation in all lectures, practical sessions, workshops and tutorials, and submission of assignments by the due date.

**Assessment:** The course comprises written and on-going practical assessments, which make up 45% of the course mark. The other 55% is made up of marks for the final written and practical examinations.
HUB1023S  BIOSCIENCES FOR PHYSIOTHERAPY IB
9 NQF credits at HEQSF level 5
Convener: S Steiner
Course entry requirements: HUB1022F or HSE1013F
Objective: Physics: To equip students to analyse basic biomechanical issues involving movement, forces, torques and stresses on the body. Chemistry: To provide students with a foundation for pharmacology, physiology and metabolism.
Course outline: This course builds on the foundational concepts, terminology and science covered in Biosciences for Physiotherapy 1A. The course content for physical science includes centre of gravity; body-segment parameters; Hooke’s law; work, energy and power; momentum and impulse; static and dynamic systems; buoyancy; friction and stress analysis. Students learn how to assess journal articles. The course content for chemistry includes basic organic chemistry, covering fundamental aspects of structure and bonding, acids and bases, amines, carbohydrates, lipids and nucleic acids. Integrated with the chemistry principles, aspects of fat and protein metabolism are covered. The course is taught through lectures, weekly tutorials and assignments. By the end of the course, students should be able to assess simple problems and determine how forces and torques affect the work, energy and power in systems; determine whether certain types of loading are safe; and understand organic chemical principles and how they relate to body physiology.
DP requirements: Students must attend 75% of tutorials, hand-ins, and mini tests and obtain a combined class mark of at least 40%.
Assessment: The course mark contributes 60% and consists of assignments (10%), class tests (30%) and ad hoc mini tests (20%). The examination contributes 40% and consists of a three-hour written paper in November. Both the physics and chemistry components must be passed with a subminimum of 40% for each component in the final examination.

AHS1034S  INTRODUCTION TO APPLIED PHYSIOTHERAPY
22 NQF credits at HEQSF level 5
Convener: N Naidoo
Course entry requirements: All first semester courses in the BSc Physiotherapy programme
Course outline: This course builds on the foundational concepts, terminology and science covered in Movement Science 1. Course content includes exercise prescription, posture analysis and correction of postural dysfunction, normal development, gait analysis, assistive devices, lifting, transfers and introduction to NMS conditions. The course is taught through lectures, practical demonstrations and workshops, self-study sessions and weekly tutorials. Students are exposed to the clinical situation in order to familiarise them with the scope of physiotherapy practice. At the end of the course students will understand the concepts of tissue healing, will be able to describe normal infant development, and will be able to assess posture and apply the principles of postural re-education.
DP requirements: Full attendance of and participation in all lectures, practical sessions, workshops and tutorials, and submission of assignments by the due dates.
Assessment: Assignment (August) (5%); tutorial tests (alternate week tests) (15%); theory test (September) (15%); SPE test (October) (15%); final exam (Oct/Nov) theory (25%); and SPE (25%).

SLL1028H  XHOSA FOR HEALTH AND REHABILITATION SCIENCES
18 NQF credits at HEQSF level 5
Convener: TBA
Course entry requirements: None
Course outline: This course introduces students to communication skills required for a successful interaction between a healthcare professional and a client. The course takes an integrated approach to language learning through incorporation of clinical experiences related to the disciplines of physiotherapy, occupational therapy, and communication and speech disorders. The main focus of this course is on
pronunciation, grammar and interaction with clients. Interaction is used as a means of exposing students to the Xhosa ways of expression, as well as to issues of cross-cultural and inter-cultural communication. At the end of this course students will be able to communicate with a speaker of Xhosa about common everyday topics; be able to elicit and understand information from a client using terminology specific to the fields of physiotherapy, occupational therapy and communication and speech disorders; and will have an awareness of some cultural issues that emanate from cross-cultural communication.

**DP requirements:** Attendance of at least 80% of the lectures; completion by the due dates of all assessments and projects.

**Assessment:** Coursework (vocabulary and oral assessments based on topics covered in the course) counts 50% and comprises four tests (two weighted at 15% each, and two weighted at 10% each); and examinations (June examination – simulated client interviews: 20%; and November examination – simulated client interviews: 30%).

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**SLL1048H AFRIKAANS FOR HEALTH AND REHABILITATION SCIENCES**

For students registered in the School of Health and Rehabilitation Sciences only.

18 NQF credits at HEQSF level 5

**Convener:** Dr I van Rooyen

**Co-requisites:** Students must be registered for a degree in physiotherapy, occupational therapy, speech and language pathology or audiology.

**Course outline:** The content of the course is based on case studies covered in the streams of physiotherapy, occupational therapy and communication sciences and speech disorders. The focus of the Afrikaans course is on communication skills, and specifically on those skills that may be required for an interaction between a healthcare professional and a client. Other skills include skill in asking questions and the ability to enter effectively into dialogue with a client. The course is taught at both beginner and intermediate levels and focuses on the unique pronunciation and stylistic variants of individual clients and culture-specific words and expressions.

**Lecture times:** Arranged internally.

**DP requirements:** At least 80% class attendance and completion of all assessments.

**Assessment:** Coursework (vocabulary and oral assessments based on topics covered in the course) – 50%; June assessment (simulated client interviews) – 20%; November examination (simulated client interviews) – 30%.

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**MDN2002W CLINICAL SCIENCES I**

13 NQF credits at HEQSF level 6

**Convener:** Dr M De Souza

**Course entry requirements:** None

**Course outline:** The course covers the aetiology, clinical signs and symptoms, assessment and medical and surgical treatment of patients of all age groups suffering from conditions encountered by occupational therapists and physiotherapists during their work. The lecture series has been designed to integrate information about pathology and the clinical management of a range of conditions across the previously demarcated areas of medicine, surgery, orthopaedics and paediatrics. The topics covered include pathology, oncology, orthopaedics, child health, neurosurgery, spinal cord injuries, cardiothoracic surgery, medicine and palliative care. At the end of the course, students will have a basic understanding of the physiology, pathology, clinical presentation and management of the conditions presented; will be able to recognise and deal with the clinical emergencies that may impair or result in loss of function; will understand the role of the various disciplines in managing these conditions; and will recognise the importance of a multidisciplinary team in managing patients they are likely to encounter.

**DP requirements:** Full attendance and participation in all learning activities and completion of all coursework by the due dates.
Assessment: There are three term assessments, in March, June and September. Each of these is a one-hour online MCQ test and counts 14% each towards the year mark. There is an examination at the end of the year (a two-hour online MCQ assessment) which accounts for 53% of the total mark. 5% of the year mark is made up from attendance, random MCQ tests and Quizzes during the year. A re-assessment (a two-hour MCQ online test) is offered for students obtaining an overall mark between 40 and 49%.

HUB2015W  ANATOMY AND PHYSIOLOGY II FOR HEALTH AND REHABILITATION SCIENCES
36 NQF credits at HEQSF level 6
Convener: Assoc Prof LM Davids
Course entry requirements: HUB1020S
Objective: To understand and obtain an integrative knowledge of the human body and its systems from an anatomical and physiological perspective.
Course outline: This year-long course forms the second half of a two-year programme covering aspects of human anatomy and general physiology. Subjects include systems physiology such as respiratory, cardiovascular and reproductive physiology which are aligned with the anatomical teaching of these systems. Included in the syllabus is also aspects of endocrinology and nutrition and diet. It is a full course of lectures, interactive weekly tutorials, practicals and demonstrations. Special emphasis is placed on neuro-anatomy and neurophysiology.
DP requirements: Full attendance of and participation in all learning activities and completion of all coursework by the due dates.
Assessment: The in-course mark contributes 45% and comprises tutorial and practical tasks (15%) and a term test (30%). The summative assessment comprises two examinations, weighted at 55% and consisting of a written theory examination and structured practical examination.

HUB2023W  BIOSCIENCES FOR PHYSIOTHERAPY II
9 NQF credits at HEQSF level 6
Convener: S Steiner
Course entry requirements: HUB1023S, AHS1033F or AHS1040F
Course outline: This course builds on the concepts taught in Biosciences IA and IB. The course content includes principles in orthopaedics; biomechanics of bone; fractures of the femur and the pelvis; joint biomechanics; ankle, knee, shoulder and elbow; waves and basic electricity relevant to the principles of electrotherapy; laser, ultrasound, shortwave diathermy, interferential stimulation; gait analysis; and electromyography. The course is taught by means of lectures, practical demonstrations and assignments. By the end of the course, students should understand joint mechanics, modes of bone fracture and the influence of forces and torques on bones and joints; select the appropriate treatment modality for electrotherapy, with an understanding of the physics involved; analyse human movement and gait using Gaitlab software; and demonstrate an understanding of EMG as a predictor for muscle activity.
DP requirements: Full attendance of and participation in all lectures, practical sessions, workshops and tutorials, and submission of assignments by the due dates.
Assessment: The course mark contributes 60% and comprises assignments (15%), ad hoc mini tests (5%) and class tests in April, June and September (40%). There is a three-hour written theory examination in November (40%). The final exam must be passed with a subminimum of 40%.

AHS2050H  CLINICAL PHYSIOTHERAPY I
18 NQF credits at HEQSF level 6
Convener: L Rustin and D Scott
Course entry requirements: All first year courses
Course outline:
This course comprises three parts: The clinical component addresses the theory and practical application of respiratory, orthopaedic, paediatric neurology and musculoskeletal therapy. An introductory module introduces the students to the concepts of the International Classification of Functioning and how to relate these concepts to assessment. Students spend a portion of the week in various clinical areas, working with patients under supervision. Clinical reasoning sessions are included. Students are required to do a nursing elective of 40 hours at an approved facility. Disability in Primary Healthcare is a 160 hour, multidisciplinary module spread over the second and third years of study. It integrates vertically with the Becoming a Professional/Becoming a Health Professional multidisciplinary courses at first year level. The module consists of lectures and facilitated site visits. The content focuses on health promotion, culture, psyche and illness; and equity, health and human rights. Disability theory and the theory of health promotion and community development are also addressed.

DP requirements: Full attendance and participation in all coursework. Student attendance at clinicals is monitored in accordance with HPCSA regulations.

Assessment: Clinical component: This component is assessed entirely through continuous assessment in the clinical area. Students complete a portfolio of tasks including reflections, patient assessment, journal submissions and practical skill tests. The introductory ICF module is assessed via an online test at the end of the module. Disability in Primary Healthcare module: Students are assessed by means of group poster presentation, group assignment, peer assignment and reflective tasks. An overall average of 50% is required to pass this course. No supplementary examinations are awarded. The mark allocation is as follows: PCHD (20%); ICF module (10%) clinical block portfolio (70%). Students whose performance in the nursing elective is deemed unsatisfactory have to repeat the nursing elective before progressing to the next year of study.

AHS2052H MOVEMENT SCIENCE II
38 NQF credits at HEQSF level 6
Convener: Dr T Burgess and Dr R Parker
Course entry requirements: All first year courses
Course outline:
This course covers orthopaedics and neuromusculoskeletal physiotherapy and proprioceptive neuromuscular facilitation. The orthopaedics component covers the scope of physiotherapy assessment and management of orthopaedic conditions, focusing on the assessment and treatment of traumatic orthopaedic conditions of the lower quarter, amputations and paediatric orthopaedic conditions. The neuromusculoskeletal component covers the physiotherapy assessment and treatment and rehabilitation of neuromusculoskeletal (NMS) conditions, focusing on NMS conditions of the lower quarter. The proprioceptive neuromuscular facilitation (PNF) component covers the theory and practical application of PNF as it applies to the assessment and rehabilitation of patients. This course is taught through lectures, practical demonstrations and workshops, self-study sessions and tutorials. At the end of this course, students will be able to assess traumatic orthopaedic conditions of the lower quarter, amputations and paediatric orthopaedic conditions; and NMS conditions of the lower quarter according to the International Classification of Functioning (ICF); apply joint and soft tissue mobilisation techniques to treat NMS conditions of these areas; apply PNF techniques to treat NMS and orthopaedic conditions of these areas; and prescribe progressive exercises to rehabilitate NMS and orthopaedic conditions of these areas.

DP requirements: Full attendance of and participation in all lectures, practical sessions, workshops and tutorials, and submission of assignments and coursework requirements by the due dates.

Assessment: March/April tests (NMS: 5%; orthopaedics: 5%); June tests (theory: 19%, structured practical evaluation: 10%; assignment: 10%) and November examination (theory: 36% and structured practical evaluation: 15%).

AHS2053H APPLIED PHYSIOTHERAPY I
32 NQF credits at HEQSF level 6
Convener: S Manie
**Course entry requirements:** All first year courses

**Course outline:**
This course covers modules in paediatric neurology, cardiopulmonary rehabilitation, women’s health, electrotherapy, geriatrics and key requirements for becoming a rehabilitation professional, including ethics. The ICF framework tool is used in all modules in the course.

The paediatric neurology component covers the foundation of neurological techniques of child development and the assessment and treatment techniques used by physiotherapists in paediatric neurology. The cardiopulmonary rehabilitation component covers the theory, manual techniques and assistive devices required for the holistic assessment and treatment of cardiopulmonary clients.

The emphasis is on primary healthcare and a problem-solving approach, using the ICF. The electro-physical agents component includes the theoretical and practical application of electro-physical agents, including the application of electro-physical modalities in the physiotherapy management of patients. The women’s health component focuses on the physiotherapy management during pregnancy, birth and breastfeeding. The rehabilitation professional/ethics component includes the ethics of individual patient care and a deeper exploration of the concepts of primary healthcare. The geriatrics component covers the process of ageing and the assessment and treatment techniques used by physiotherapists in the field of gerontology.

**DP requirements:** Full attendance of and participation in all lectures, practical sessions, workshops and tutorials, and submission of assignments by the due dates.

**Assessment:** The Continuous Evaluation (CE) mark contributes 48% and the final November Examination mark (comprising of a theory examination 42% and a practical examination 10%) contributes 52% to the final mark for AHS2053H. The CE mark comprises marks from assignments and/ tests in April, a June theory test and practical test, September assignments and/tests. The individual weighting for tests, assignments and practical tests that contribute to the CE mark will be provided by the course convener. An integrated test format and use of MCQ is the preferred approach for all tests and examinations.

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**MDN3004W  CLINICAL SCIENCES II**

10 NQF credits at HEQSF level 7

**Convener:** Dr M Setshedi

**Course entry requirements:** MDN2002W

**Course outline:**
The course covers the aetiology, clinical signs and symptoms, assessment and medical and surgical treatment of patients of all age groups suffering from conditions encountered by physiotherapists during their work. The lecture series has been designed to integrate information about pathology and the clinical management of a range of conditions across the previously demarcated areas of medicine, surgery, orthopaedics and paediatrics. Topics covered include microbiology, pain, nutrition, introduction to pharmacology, pathology, orthopaedics, medicine, cardiothoracic surgery, obstetrics and gynaecology, mental health, and neurosurgery. At the end of the course, students will have a basic understanding of the physiology, pathology, clinical presentation and management of the conditions presented; will be able to recognise and deal with the clinical emergencies that may impair or result in loss of function; will understand the role of the various disciplines in managing these conditions; and will recognise the importance of a multidisciplinary team in managing patients they are likely to encounter.

**DP requirements:** Full attendance of and participation in all lectures, practical sessions, workshops and tutorials, and submission of assignments by the due dates.

**Assessment:** There are three term assessments, in March, June and September. Each of these is a one-hour on-line MCQ test and counts 9%, 14% and 14% respectively towards the year mark. Additionally, there is a microbiology test that takes place in April, accounting for 5% of the year mark. The examination at the end of the year, comprising a two-hour online MCQ assessment, accounts for 53% of the total mark. 5% of the year mark is made up from attendance during the year and random MCQ and quiz tests during the year. A supplementary assessment (a two-hour MCQ online test) is offered for students obtaining an overall mark between 40-49%, before the final mark is submitted.
AHS3069W  CLINICAL PHYSIOTHERAPY II
62 NQF credits at HEQSF level 7
Convener: H Talberg
Course entry requirements: All second year courses. Proof of malpractice insurance needs to be provided by students to allow them to practice in clinical blocks.
Course outline:
The course provides practical exposure to the areas of paediatrics, cardiopulmonary, orthopaedic, musculoskeletal, women’s health and geriatric care. Students spend four mornings a week in various clinical areas, working under supervision with patients. This course is taught through practical sessions, group teaching and clinical practice.
DP requirements: Students are obliged to complete all the required hours for the year as per HPCSA regulations. Further requirements are full attendance of and participation in all coursework activities and submission of coursework requirements by the due dates.
Assessment: Students undergo a clinical examination at the end of each rotation, in the format of either a patient treatment or a patient assessment. In addition, students’ performance during each of their clinical rotations is assessed in a performance evaluation form by their clinical educator and/or clinician, and a mark awarded. The final course mark is made up of five rotation marks. Each rotation mark is comprised of the examination mark (60%) and the performance evaluation (40%). Students need to obtain an average of 60% for the course mark to be exempt from further testing. Students who obtain an average of less than 50% for the course mark fail the course and have to repeat the full course the following year. Students who obtain a course mark of between 50 – 59% are required to undergo a further clinical examination in October. Should the student achieve a pass of 50% or more for this clinical examination, this mark will be incorporated into the course mark (equivalent to a combined block and examination mark) and the student will pass the course. Should a student obtain less than 50% for this additional examination, he/she will be required to repeat the course in the following year. There are no supplementary examinations.

AHS3070H  BECOMING A REHABILITATION PROFESSIONAL I
22 NQF credits at HEQSF level 7
Convener: S Maart
Course entry requirements: AHS2050H
Course outline:
This course consists of four modules: Counselling Skills for Physiotherapists; Gender, Culture and Health; Disability and Primary Healthcare; as well as an Introduction to Social Anthropology. This course is taught through lectures, tutorials and participation in a community-based project. It aims to provide the student with the skills, knowledge and attitudes to be a reflective contextually relevant practitioner. The objective of the Counselling and Communication Skills module is for students to learn the basic principles of counselling and to develop their own self-awareness as practicing professionals. At the end of the Gender, Culture and Health module students should understand how gender and culture influences determinants of disease and health. The Disability in Primary Healthcare module is a multidisciplinary module focusing on community-based rehabilitation as the philosophy of care for people with disabilities. The Introduction to Anthropology module includes the study of social and cultural beliefs and practices associated with the origin, recognition and management of health and illness. This course encompasses both sociocultural and biocultural approaches to examine the multiple human experiences of health with a focus on physiotherapy.
DP requirements: Full attendance of and participation in all lectures, practical sessions, workshops and tutorials, and submission of assignments by the due dates.
Assessment: Essays, assignments and tests (60%); Disability in Primary Healthcare (20%) and November examination (20%).

AHS3076H  MOVEMENT SCIENCE III
24 NQF credits at HEQSF level 7
**Course entry requirements:** All second year courses

**Course outline:**
This course covers orthopaedics and neuromusculoskeletal conditions. The orthopaedic component covers the scope of physiotherapy assessment and management of orthopaedic conditions, focusing on non-traumatic orthopaedic conditions of the spine and upper quarter, rheumatological conditions, joint replacements and peripheral nerve injuries. The neuromusculoskeletal component covers the physiotherapy assessment and treatment of neuromusculoskeletal (NMS) conditions. The focus is on NMS conditions of the upper quarter. At the end of this course, students will be able to assess orthopaedic and NMS conditions of the upper quarter according to the International Classification of Functioning (ICF); apply joint and soft tissue mobilisation techniques to treat NMS conditions of these areas; prescribe progressive exercises to rehabilitate NMS and orthopaedic conditions of these areas; assess orthopaedic conditions, including rheumatological conditions, joint replacements, non-traumatic spinal conditions, and peripheral nerve and tendon injuries; and apply physiotherapy treatment and rehabilitation for orthopaedic conditions, including rheumatological conditions, joint replacements, non-traumatic spinal conditions, peripheral nerve and tendon injuries.

**DP requirements:** Students are expected to attend and participate in all lectures, practical sessions, workshops and tutorials. Students are required to submit all coursework as required in their course manuals.

**Assessment:** The mark allocation is as follows: April tests (10%); June tests (Theory: 19% and structured practical evaluation: 10%); assignment (10%) and November examination (theory: 36% and structured practical evaluation: 15%).

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**AHS3077H  APPLIED PHYSIOTHERAPY II**
22 NQF credits at HEQSF level 7

**Convener:** G Ferguson

**Course entry requirements:** AHS2053H and all second year courses

**Course outline:**
This course covers modules in adult neurology, cardiopulmonary rehabilitation, women’s health and management of burn injuries. **Adult neurology:** This module aims to equip the student with key knowledge and skills pertaining to the physiotherapy management of a variety of adult neurological conditions. The course contains applied neurosciences modules as well as modules dealing with specific neurological conditions. The modules are designed to develop clinical reasoning and creative problem-solving skills within the South African context. **Cardiopulmonary rehabilitation:** This module aims to equip the student with the knowledge and skills pertaining to the physiotherapy management of a variety of common adult and paediatric pulmonary conditions which include adult cardiothoracic surgery and cardiopulmonary rehabilitation. The emphasis is on primary healthcare and clinical reasoning. This course is taught through lectures, practical sessions and tutorials. **Women’s health:** This module aims to equip the student with key knowledge and skills pertaining to the physiotherapy management of women’s health conditions. This module places emphasis on the physiotherapy management of stress incontinence, mastectomy and pelvic floor dysfunction. **Management of burn injuries:** The burn injuries module is taught using case studies relevant to the South African context. The module includes visits to specialist burns units in the Western Cape.

**DP requirements:** Students are expected to attend and participate in all lectures, practical sessions, workshops and tutorials. Attendance is monitored through the signing of an attendance register at each session. Students are required to submit all coursework as required in the different modules by the due dates.

**Assessment:** Coursework contributes 60% toward the final mark and comprises of: Neuro, CPR and Women’s health class tests (3x5%) scheduled in term 1; a combined (Neuro, CPR, Women’s health) Theory Test (20%), and OSPE (CPR and Neuro) (10%) scheduled in term 2; CPR, Neuro and Burns assignments (3x5%), due in term 3. The final examination comprises a combined (Neuro, CPR, Burns) Theory Exam (40%) written in term 4. All tests and examinations use an integrated case study approach. Students who achieve a final mark ≥45%-49% qualify to write a supplementary
examination. If a supplementary examination is awarded, the year mark is not included in the final mark.

**AHS3078H RESEARCH METHODS & BIOSTATISTICS I**
10 NQF credits at HEQSF level 7
Convener: Prof J Jelsma
Course entry requirements: None
Course outline:
The course provides students with the necessary skills and conceptual knowledge to conduct research in occupational therapy and physiotherapy. Students receive lectures which cover the theory of qualitative and quantitative research, the ethics of research, epidemiology and basic biostatistics. Students learn how to analyse research articles critically and to develop a research proposal. This course is taught through lectures, tutorials and online assignments.

**DP requirements:** No student may proceed to the examination without attending lectures on ethics or completing an online ethics course. No student may proceed to the research project until the research protocol has been awarded a mark of 50%. The protocol may need to be resubmitted.

**Assessment:** The mark allocation is as follows: Research methodology continuous assessment (5%); research methodology paper (5%); epidemiology paper (5%); research protocol for fourth year (25%); biostatistics (10%) and examination – critical appraisal (50%).

**AHS4065W CLINICAL PHYSIOTHERAPY III**
98 NQF credits at HEQSF level 8
Convener: N Edries
Course entry requirements: All third year courses. Proof of malpractice insurance needs to be provided by students in order to practice on their clinical blocks.

**Course outline:**
This course addresses the practical application of paediatrics, cardiopulmonary, orthopaedic, neurological, musculoskeletal and other tertiary level skills as well as a community placement. Students spend approximately 30 hours per week in clinical areas, working under supervision with patients. In addition, there is a three-week elective period in June, where students may work at any healthcare facility recognised by the Divisional Board. This course is taught entirely through clinical practice and group teaching sessions.

**DP requirements:** Students need to complete the necessary course hours as prescribed by the HPCSA as well as obtain a satisfactory elective performance report.

**Assessment:** Students complete five clinical blocks during the year. They have one clinical examination at the end of each of their clinical blocks, in the form of either a patient treatment or a patient assessment. During the community placement a presentation takes the place of a patient treatment examination. In addition, students’ performance during each of their clinical rotations is assessed through a performance evaluation form by their clinical educator and/or clinician, and a mark is awarded. Should multi-professional practice (MPP) occur on a given clinical rotation, student participation is assessed by a variety of methods, including portfolios, case and project presentations. This mark is then incorporated into the students’ performance mark. Each clinical block mark is then made up by the clinical examination (60%) and a performance evaluation (40%). The final course mark is made up of all the student’s rotation marks, plus the additional clinical examination mark completed at the end of the final clinical rotation. This additional examination takes the form of a patient evaluation. Students need to obtain an average of 60% for the course mark to be exempt from further testing. Students who obtain a course mark of between 50 – 59% are required to undergo a further clinical examination in October. Should a student achieve a pass of 50% or more for this clinical examination, this mark is incorporated into the course mark (equivalent to a combined block and examination mark) and the student will pass the course. Should the student obtain less than 50% for this additional examination, he/she will be required to do a further six months of clinical work in the following year and then undergo the same system of examination. There are no supplementary examinations.
AHS4066H  BECOMING A REHABILITATION PROFESSIONAL II  
4 NQF credits at HEQSF level 8  
Convener: S Maart  
Course entry requirements: All third year courses  
Course outline:  
The emphasis of the course is on developing appropriate knowledge, skills and attitudes for independent physiotherapy practice. This course includes two modules viz Professional Ethics and Practice Management. Lectures are offered during block teaching weeks. At the end of the professional ethics module, students should have an understanding of the ethical codes and policies that regulate physiotherapy practice in the private and public sector. At the end of the practice management module, students should have the basic knowledge for starting a physiotherapy private practice, and managing a physiotherapy department in the public sector.  
DP requirements: Full attendance of and participation in all lectures, practical sessions, workshops and tutorials, and submission of assignments by the due dates.  
Assessment: Year mark: tests/assignments: 49%; November examination: 51%. Should a student obtain between 45 – 49% in the final mark, he/she may be eligible for an additional assessment before the final mark is submitted.  

AHS4071H  APPLIED PHYSIOTHERAPY III  
20 NQF credits at HEQSF level 8  
Convener: C Hendricks  
Course entry requirements: All third year courses  
Course outline:  
This course consists of a variety of workshops/teaching sessions on specialist/advanced topics within physiotherapy and South African healthcare. The course also comprises modules on sports physiotherapy, adult and paediatric ICU management, adult neurology and pharmacology. This course is taught through lectures, practical sessions and tutorials.  
DP requirements: Full attendance of and participation in all lectures, practical sessions, workshops and tutorials, and submission of assignments by the due dates.  
Assessment: The assessment is weighted as follows: March theory test/assignment (10%); June theory test (30%); August theory test/assignment (15%); November theory examination (45%). A student who obtains between 45% and 49% for their final mark may be offered a supplementary oral or additional written assessment. A student who obtains less than 50% for this additional assessment will fail the course and need to repeat their 4th year.  

AHS4072H  RESEARCH METHODS AND BIOSTATISTICS II  
10 NQF credits at HEQSF level 8  
Convener: Prof J Jelsma  
Course entry requirements: AHS3078H and all other third year courses  
Course outline:  
Students, working in groups, prepare a 3500 word literature review and will conduct a research project that will be documented as a scientific article of no more than 3500 words.  
Assessment: The allocation of marks is as follows: literature review (35%); presentation (15%); and project (50%). The individual student's contribution to the project will be peer evaluated and this mark will be incorporated into the project.  

HSE1008S  FUNDAMENTALS OF ANATOMY AND PHYSIOLOGY IA  
0 NQF credits at HEQSF level 5  
Convener: Dr A Abrahams and Dr B Ige  
Course entry requirements: None  
Course outline:  
This foundation (Intervention Programme) course revisits the key concepts and core material of HUB1019F Anatomy and Physiology IA. Course content addresses the fundamental anatomical and
physiological knowledge and skills relevant to the rehabilitation sciences professions and includes an overview of cells and systems in the human body; cellular physiology; physiology of nerves; and the anatomy of the upper limbs. The relevance of these concepts for the rehabilitation professions is emphasised through the use of specifically selected examples of injury, health conditions and disability. Attention is given to the specific terminology of the anatomy and physiology disciplines, as well as to the underlying scientific literacy and numeracy skills required to achieve proficiency in these areas. At the end of this course, students will be able to describe the anatomy of the upper limb, explain the basic physiological and anatomical concepts and processes outlined above, and give an overview of human physiology from the level of cells to the whole body. Teaching and learning strategies include lectures, tutorials, practical sessions, clinical case discussions and self-directed learning sessions.

**DP requirements:** Students must attend and participate in all lectures, practical sessions, workshops and tutorials. All assignments must be submitted by their due date.

**Assessment:** Assessment of the course comprises written assignments and in-course assessments. The in-course mark contributes 50% to the final mark and comprises two tests (weighted 10% and 20% respectively); physiology assignments (10%); and anatomy assignments (10%) in HSE1008S. The final written test contributes 50% to the mark for HSE1008S. These assessments contribute 40% towards the final year mark in HSE1009F at the end of IP2.

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**HSE1012S**  
**FUNDAMENTALS OF BIOSCIENCES FOR PHYSIOTHERAPY IA**

0 NQF credits at HEQSF level 5  
**Convener:** Dr N T L Chigirimbo-Tsikiwa, Dr B Ige and Dr S Sivarasu  
**Course entry requirements:** None

**Course outline:**  
This foundation (Intervention Programme) course revisits the key concepts and core material of HUB1022F. It is an introductory course for physiotherapy students with a focus on the fundamental aspects of chemistry and fundamental physical science related to biomechanics. In addition, fundamental mathematical skills are covered to enable students to address the course syllabus. Course content for physical science includes measurement, units, conversion of units and review of trigonometry, vectors, vector algebra and resolution of vectors; displacement, velocity and acceleration in linear and angular systems. Principals of matter, atoms and elements, basic stoichiometry and the mole concept, chemical reactions and equilibria, acids, bases, buffers and gases are covered. By the end of the course, students should be able to assess simple problems and determine displacement, velocities and accelerations in linear and angular systems; understand the relationship between displacement, velocity and acceleration; understand basic physical chemistry principles; and be able to solve basic problems in general chemistry.

**DP requirements:** Full attendance of and participation in all lectures, practical sessions, workshops and tutorials, and submission of all coursework by the due dates.

**Assessment:** The course mark contributes 50% and comprises tutorial assessments (20%); class tests (30%) and a final test comprising a three-hour written theory test in November (50%). These assessments contribute 40% towards the final year mark in HSE1013F at the end of IP2. There is no summative examination for this course after IP1. The final assessment takes place in HSE1013F.

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**HSE1003S**  
**PREPARATION FOR ENTRY-LEVEL PSYCHOLOGY FOR HEALTH AND REHAB SCIENCES PART I**

*The credits are included in those for PSY1104F*  
18 NQF credits at HEQSF level 5  
**Convener:** Dr B Ige and E Badenhorst  
**Course entry requirements:** None

**Course outline:**  
This course develops and strengthens students’ understanding of the basic psychological concepts, principles and terminology introduced in semester one by revisiting material covered in PSY1004F. Students are introduced to the building blocks, core principles and concepts of PSY1004F, such as learning, memory, developmental psychology, health psychology and psychopathology, in order to
develop and strengthen a basic knowledge of central areas in psychology. The course also develops and strengthens empirical skills in order to allow students to critically assess studies on which psychological theory is based. Students engage with the discipline in a critical and analytical way by revisiting the core principles of theory and research. In order to familiarise students with the modes of learning that will be required of them upon entry into PSY1005S, as well as the style of instruction they will encounter in the course, students attend lectures and small group tutorials to develop academic skills and techniques. The outcome of AHS1031S is a fundamental understanding of psychology, an ability to look critically at concepts and theories in the discipline, and an understanding of the practical application of psychology in everyday life and in students’ future professions.

**DP requirements:** Full attendance of and participation in all lectures, practical sessions, workshops and tutorials. All assignments must be submitted by their due date.

**Assessment:** In-course assessment contributes 60% and comprises one essay (10%); one research project essay (15%); tutorial assignments (10%) and two tests (25%). The final written test contributes 40%.

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**HSE1014S**  FUNDAMENTALS OF MOVEMENT SCIENCE AND APPLIED PHYSIOTHERAPY IA

There is no summative assessment for this course and therefore there are no NQF credits. The credits are included in those for AHS1040F.

0 NQF credits at HEQSF level 5

**Convener:** Dr B Ige and N Naidoo

**Course entry requirements:** None

**Course outline:**
This foundation (Intervention Programme) course builds on the foundational concepts, terminology and science covered in AHS1033F Movement Science I. It re-visits aspects of the basic assessment and mobilisation of joints, muscle and soft tissue structure and function, and principles of muscle strengthening and theories on soft tissue healing. The principles and rationale underpinning the evaluation and treatment of movement dysfunction as covered in Movement Science I are re-emphasised. Teaching/learning strategies include lectures, practical demonstrations and workshops, tutorials and self-directed learning sessions. At the end of this course students will be able to apply techniques of joint mobilisation (passive movements), measure and record joint range of motion, evaluate muscle strength and apply the principles of strengthening as indicated, and discuss soft tissue healing and apply techniques to treat soft tissue dysfunction.

**DP requirements:** Students must attend all lectures and tutorial sessions, participate in lectures and practical sessions, and submit homework, self-study tasks and assignments by the due dates.

**Assessment:** In-course assessments contribute 50% towards the final mark and consist of term tests (15%); OSPE tests (15%); and assignments (20%). The final test contributes 50% and consists of a written theory paper (25%) and a structured practical test (25%). These assessments contribute 40% towards the final year mark for AHS1040F at the end of IP2. There is no summative examination for this course after IP1. The final assessment takes place in AHS1040F.

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**HSE1009F**  FUNDAMENTALS OF ANATOMY AND PHYSIOLOGY IB

36 NQF credits at HEQSF level 5

**Convener:** Dr A Abrahams and Dr B Ige

**Course entry requirements:** None

**Course outline:**
This foundation course aims to prepare students for HUB1020S Anatomy and Physiology IB when they re-enter the standard curriculum. It revisits key concepts and core material of HUB1019F and builds on knowledge and skills acquired in HSE1008S. It focuses on key systems within the human body. Content includes the physiology of muscle, the cardiovascular system, the respiratory system, and the anatomy of the lower limb. The underlying physiological concepts, principles and mechanisms and relevant structural anatomy of the thorax, heart and lungs are presented in an integrated manner. Carefully selected studies relate the cases to the clinical practice of occupational
therapy and physiotherapy. Specific terminology of the anatomy and physiology disciplines is included, and underlying scientific literacy and numeracy skills are developed. Teaching/learning strategies include lectures, tutorials, practical sessions, clinical case discussions and computer-aided learning sessions. At the end of this course, students will be able to describe the anatomy of the lower limb; explain key concepts in the normal physiology of muscle and nerve cells; describe the anatomy of the thorax, heart, blood vessels and lungs; explain key concepts in the normal physiology of the cardiovascular and respiratory systems; and explain how the cardiovascular and respiratory systems work together.

**DP requirements:** Attendance of and participation in all lectures, practical sessions, workshops and tutorials, and submission of assignments by the due date.

**Assessment:** Assessment of the course comprises a written in-course assessment and a final course examination. The in-course assessment consists of two tests (weighted 10% and 20% respectively towards the total mark); physiology assignments (10%) and anatomy assignments (10%). The final written examination contributes 50% towards the total mark. These assessments and examination contribute 60% towards the final year-mark at the end of IP2.

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**HSE1013F  FUNDAMENTALS OF BIOSCIENCES FOR PHYSIOTHERAPY IB**
36 NQF credits at HEQSF level 5

**Convener:** Dr N T L Chigorimbo-Tsikiwa, Dr B Ige and Dr S Sivarasu

**Course entry requirements:** HSE1012S

**Course outline:**
This foundational (Intervention Programme) course is designed to prepare students for what they will encounter when they return to HUB1023S in the standard curriculum. The course employs the concepts, terminology and science covered in Fundamentals of Biosciences for Physiotherapy 1A. Course content for physical sciences includes forces and Newton’s laws in linear systems (static and dynamic), torque and lever systems (static), and free body diagrams associated with force and torque systems. Students are introduced to the concepts of moment of inertia and its application in dynamic torque systems; centre of mass; work, energy and power; momentum and impulse; and stress analysis. Basic organic chemistry and biomolecules are introduced, including structure and bonding, classes of organic compounds, functional groups and isomers. An introduction to the major organic molecules of cells is also included. By the end of the course students should be able to assess simple problems and determine forces and torque systems, and understand the relationship between kinematics and force and torque systems. They will have a basic understanding of fundamental biochemistry and will be able to integrate and apply organic chemistry to life.

**DP requirements:** Full attendance of and participation in all lectures, practical sessions, workshops and tutorials and submission of all coursework by the due dates.

**Assessment:** The course mark contributes 70% and comprises the HSE1012S final mark (40%); tutorials (12%); and class tests in August and October (18%). The final examination contributes 30% and consists of a three-hour written theory examination in June.

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**HSE1015F  FUNDAMENTALS OF MOVEMENT SCIENCE & APPLIED PHYSIOTHERAPY IB**
36 NQF credits at HEQSF level 5

**Convener:** Dr B Ige and N Naidoo

**Course entry requirements:** HSE1014S

**Course outline:**
This foundational (Intervention Programme) course is designed to prepare students for what they will encounter in AHS1034S when they re-enter the standard curriculum. The course builds on the foundational concepts, terminology and science covered in HSE1014S. Content includes an introduction to therapeutic massage, exercise prescription, movement analysis, posture analysis and correction of postural dysfunction, and the basic re-education of functional activities. Students are exposed to clinical situations to familiarise them with the scope of physiotherapy practice and to emphasise the relevance of the classroom learning activities. In addition, debriefing sessions are held to discuss students’ experiences in clinical areas. Teaching/learning strategies include lectures,
practical demonstrations and workshops, tutorials, clinical visits and self-directed learning sessions. At the end of this course, students will be able to apply techniques of therapeutic massage and soft tissue mobilisation; analyse the components of normal human movement; assess posture and apply the principles of postural re-education; prescribe, demonstrate and teach exercises to address problems related to movement dysfunction; and demonstrate basic strategies and techniques for the rehabilitation of functional activities.

**DP requirements:** Students must attend all lecture and tutorial sessions and participate in lectures and practical sessions. They must submit homework, self-study tasks and assignments by the due dates.

**Assessment:** Coursework contributes 50% and consists of term tests (weighted 15% of the final mark); OSPE tests (15%); and assignments (20%). The examination contributes 50% and consists of a written theory examination (25%) and a structured practical examination (25%).

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**PSY1006F INTRODUCTION TO PSYCHOLOGY PART 1 +**

10 NQF credits at HEQSF level 5

**Convener:** Dr L Schrieff-Elson

**Course entry requirements:** PSY1006F is only open to students registered in the Humanities Faculty Extended Degree Programme (HB062) who hope to major in Psychology or Organisational Psychology, and to students in named Health Sciences and Social Development programmes who do not meet the APS requirements for PSY1004F. Students registered for HB062 must have completed MAM1022F and MAM1016S. Students registered for Social Development programmes (HB063) must also be registered for MAM1014F.

**Co-requisites:** PSY1004F

**Course outline:**
The purpose of this course is to augment and support its co-requisite course: PSY1004F INTRO TO PSYCHOLOGY PART 1. It aims to improve students’ performance by enhancing their grasp of key ideas and concepts, and by developing their mastery of the disciplinary discourse. It provides additional pedagogic enrichment in the form of regular Plus TuTs that extend into Writing Hub exercises and consultations. In these tutorials, students will receive explicit support around the co-requisite course assignments and detailed feedback on their written work.

**Lecture times:** Tutorial times by sign-up with the department.

**DP requirements:** 100% tutorial attendance plus successful completion of all coursework assignments.

**Assessment:** Coursework 100% comprising of tutorial assessments and other written work.
HIGHER CERTIFICATE IN DISABILITY PRACTICE
[MU002AHS21]

Conveners:
Assoc Prof T Lorenzo and A Brinkman

The programme will be of benefit to current home-based carers, community-based workers and matriculants who have an interest in pursuing a career in the field of community based disability practice. It will create foundational skills for disability prevention and care. This qualification is to provide students with the basic knowledge, cognitive and conceptual tools and practical techniques for application in the field of disability inclusive development. This qualification signifies that the student has attained a basic level of higher education knowledge and competence in their role as community development workers. The Higher Certificate includes theoretical and practical work integrated learning components.

Admission requirements
FGC1.1 An applicant may be considered for admission to this Higher Certificate on the basis of
a. having obtained a matric certificate or National Senior Certificate for Adults (NASC) or HEQSF level 4 equivalent qualification.

b. RPL (Recognition of Prior Learning), in which case applicants will be required to submit a personal portfolio reflecting, amongst others, their experience in the field of disability and/or development; any relevant work experience; past attendance of relevant courses for which they may have obtained certificates or diplomas; assessments related to evidence of critical thinking skills in writing and reading.

c. evidence that they are proficient in English.

FGC1.2 An applicant is also required to submit two letters of support from his/her employer, granting the applicant study leave for the weeks requiring block attendance, and undertaking to provide support to enable the applicant to complete assigned tasks and assignments within the work context.

Structure and duration of programme
FGC2 The programme comprises four taught courses and one practical course. The curriculum extends over one year. There are 3 theoretical teaching blocks per year of up to three weeks each and 15 weeks of practice learning (a total of 24 weeks which will run from January to July). Participation in tutorials and group projects is compulsory. All coursework must be completed in a minimum of one year and a maximum of two years.

Programme outline:

<table>
<thead>
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<th>Number</th>
<th>Course</th>
<th>NQF Credits</th>
<th>HEQSF Level</th>
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<td>AHS1048W</td>
<td>Disability Information Management and</td>
<td>15</td>
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<td></td>
<td>Communication Systems</td>
<td></td>
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<tr>
<td>AHS1049S</td>
<td>Promoting Healthy Lifestyles</td>
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<td>5</td>
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<tr>
<td>AHS1050W</td>
<td>Health, Wellness and Functional Ability</td>
<td>30</td>
<td>5</td>
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<tr>
<td>AHS1051F</td>
<td>Inclusive Development and Agency</td>
<td>15</td>
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<tr>
<td>AHS1052F</td>
<td>Work-Integrated Practice Learning Part I</td>
<td>25</td>
<td>5</td>
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<tr>
<td>AHS1053S</td>
<td>Work-Integrated Practice Learning Part II</td>
<td>25</td>
<td>5</td>
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<tr>
<td>Total credits for programme</td>
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DP requirements
FGC4 In order to undergo the final examinations, students have to meet the following requirements:
RULES AND CURRICULA FOR UNDERGRADUATE PROGRAMMES

a. A minimum of 90% attendance for all lectures.
b. A minimum of 100% attendance for the work-integrated practice learning. If this attendance requirement is not met, the student will be required to repeat the course or the practice learning block (clinical rotation).
c. All coursework must be completed within the prescribed time period, unless otherwise approved by the programme convener. Participation in tutorials and group projects is compulsory and will be monitored.
d. A year mark of at least 50% is required for examination entrance to each course, unless approved otherwise by the programme convener.

[Note: Absence from courses or the practice learning block or other commitments on medical grounds requires a medical certificate. Validity on absence on grounds of personal or other problems will be considered on an individual basis by the staff of the Programme.]

Readmission and progression rules and supplementary examinations
FGC5.1 Except by permission of the Senate, a student will not be permitted to renew his/her registration for the degree, or may have his or her registration cancelled
a. if he/she fails a course which he/she is repeating.
b. unless he/she successfully completes all the prescribed courses for any single year in two years.
c. if he/she is unable to complete the standard programme in two years.
d. if he/she is found guilty of unprofessional behaviour.

FGC5.2 A student who has not fulfilled the required number of clinical hours for practice learning will not be permitted to graduate.

FGC5.3 A student who fails a course may be permitted to write a supplementary examination. Following the supplementary examination the final mark in course will be determined as follows: coursework: 60%; supplementary examination: 40%.

Course outlines for Higher Certificate in Disability Studies

AHS1048W  DISABILITY INFORMATION MANAGEMENT AND COMMUNICATION SYSTEMS
15 NQF credits at HEQSF level 5
Convener: I Nwanze
Course entry requirements: None
Course outline:
The students will learn basic information and communication systems in relation to care pathways and referral systems for people with disabilities. By the end of this course, students should appreciate critical enquiry; know how to use a variety of participatory rural appraisal methods; be able to apply ethical principles in research ethics work with DPOs; know the components of an information system; understand the principles and practice of record-keeping; know how to use a variety of different tools to gather information (WHO checklist, ICF, PRA); and know how to identify relevant support service and care pathways for effective referral across sectors.

DP requirements: Full attendance of and participation in all lectures, practical sessions, workshops and tutorials, and submission of assignments by the due dates.
Assessment: Coursework mark counts 50% and is comprised of the following: on-site assessment, assignments and structured practical tests. The examination mark counts 50% and comprises of a structured practical examination.
AHS1049S  PROMOTING HEALTHY LIFESTYLES
10 NQF credits at HEQSF level 5
Convener: S Gabriels
Course entry requirements: None
Course outline:
The student will understand the relevance of health promotion actions and advocacy strategies. By the end of the course, students will be able to define health promotion; identify social determinants of health; enable community participation in active health promotion campaigns; mediate between health services and families/persons with disabilities; advocate for access to education, health or community facilities; and liaise with NGOs/community structures and promote participation of persons with disabilities.
DP requirements: Full attendance of and participation in all lectures, practical sessions, workshops and tutorials, and submission of assignments by the due dates.
Assessment: Coursework contributes 50% and comprises the following: individual assignment 10%, group-assignment 40%. Exam contributes 50% and comprises the following: individual presentation 100%.

AHS1050W  HEALTH, WELLNESS AND FUNCTIONAL ABILITY
30 NQF credits at HEQSF level 5
Convener: Dr S Maart, A Brinkman, S Gabriels and F Gamieldien
Course entry requirements: None
Course outline:
Students learn to screen for impairments and provide basic interventions to improve participation of clients in the life areas of living, learning, working and socialising. By the end of the course, students will be able to discuss and describe normal development and wellness in children and adults; identify clients with selected disorders and difficulties; demonstrate appropriate kinetic handling and positioning skills; demonstrate appropriate use of assistive devices; identify risk factors for emotional distress in carers, clients and self; apply basic counselling and support methods to carers, clients and self; recognise when referral is required; and demonstrate appropriate referral patterns and work in a multidisciplinary team.
DP requirements: Full attendance of and participation in all lectures, practical sessions, workshops and tutorials, and submission of assignments by the due dates.
Assessment: Coursework mark counts 50% and comprises the following: Assignment 5%; case studies 10%; test 15%; portfolio 15%; practical assessment of skills 15%. Exam mark counts 40% and comprise: one written exam 20%; one practical examination 20%.

AHS1051F  INCLUSIVE DEVELOPMENT AND AGENCY
15 NQF credits at HEQSF level 5
Convener: Assoc Prof T Lorenzo
Course entry requirements: None
Course outline:
The student will acquire knowledge of the rights of people with disabilities and strategies and actions to enable participation in opportunities for development. By the end of this course, students should be able to explain the concepts of disability, inclusion development, identity, agency and power; explain the purpose of disability rights policies; identify and describe barriers to participation across sectors; implement strategies to enable participation and access to services; mobilise local resources; and work with relevant expertise and stakeholders.
DP requirements: Full attendance of and participation in all lectures, practical sessions, workshops and tutorials, and submission of assignments by the due dates.
Assessment: Coursework mark counts 50% of the year mark and comprises the following: Assignment 1 (comprehension and essay writing) 10%; Assignment 2 (poster presentation) 10%; Assignment 3 (reflective essay) 15%; Assignment 4 (practice learning) 15%. The examination mark counts 50% of the year mark and comprises of a structured practical examination.
AHS1052F  WORK-INTEGRATED PRACTICE LEARNING PART I
25 NQF credits at HEQSF level 5
Convener: A Brinkman

Course outline:
The course provides various practice learning opportunities to help students acquire the ability to screen, provide basic care, follow up and refer a person with a disability, as it relates to health, education, social development and empowerment needs of the communities in which they are placed. By the end of this course, students should be able to demonstrate an understanding of the disability issues within a wider context and in relation to the community in which they practice; be able to apply essential methods, procedures and techniques to address the difficulties and disorders experienced by people in the community; demonstrate ability to solve problems as required; demonstrate efficient information-gathering, analysis and decision-making abilities; demonstrate ability to evaluate and reflect in and on action; and demonstrate appropriate written and verbal communication skills.

DP requirements: Full attendance of and participation in all lectures, practical sessions, workshops and tutorials, and submission of assignments by the due dates.

Assessment: Coursework 60% consisting of practical demonstrations 30%, and record keeping 15% and work integrated practice learning portfolio 15%. Exam 40% consisting of OSPE, video and/or poster of their work with a client group or organisation.

AHS1053S  WORK-INTEGRATED PRACTICE LEARNING PART II
25 NQF credits at HEQSF level 5
Convener: A Brinkman

Course outline:
The course provides various practice learning opportunities to help students acquire the ability to screen, provide basic care, follow up and refer a person with a disability, as it relates to health, education, social development and empowerment needs of the communities in which they are placed. By the end of this course, students should be able to demonstrate an understanding of the disability issues within a wider context and in relation to the community in which they practice; apply essential methods, procedures and techniques to address the difficulties and disorders experienced by people in the community; demonstrate ability to solve problems as required; demonstrate efficient information-gathering, analysis and decision-making abilities; demonstrate ability to evaluate and reflect in and on action; and demonstrate appropriate written and verbal communication skills.

DP requirements: Full attendance of and participation in all lectures, practical sessions, workshops and tutorials, and submission of assignments by the due dates.

Assessment: Coursework contributes 60% consisting of practical demonstrations 30%, and record keeping 15% and work integrated practice learning portfolio 15%. Exam 40% consisting of OSPE, video and/or poster of their work with a client group or organisation.
OTHER COURSES OFFERED

RAY2001W RADIOBIOLOGY
For students in Faculty of Science; not offered every year.
48 NQF credits at HEQSF level 6
Convener: Dr A S Hendrikse and Dr A J Hunter (Department of Radiation Medicine)
Objective: To be introduced to the basic concepts of radiobiology including its application in radiotherapy.
Course outline: This course examines the biological effects of ionizing radiation (x-rays, gamma-rays, alpha particles, beta particles and neutrons) on mammalian systems, including radiation-induced cell death, DNA and chromosome damage, mutations and carcinogenesis as well as the mechanisms of radioprotectors and sensitisers. Medical aspects including the radiobiology of radiation therapy of cancer forms a significant part of this course. The radiation pathology of normal tissues and a basic introduction to cancer biology will also be presented. Students who perform well in the course may apply to do the BMedScHons (Radiobiology) once they have completed their undergraduate degrees.
DP requirements: Attendance at all lectures and tutorials and completion of all practicals. Satisfactory marks in tests during the year.
Assessment: Essays, tests and practicals count 50%. Two three-hour examinations written in November count 50%.

HUB2005F INTRODUCTION TO MEDICAL ENGINEERING
This course is intended as an introduction to the field of Biomedical Engineering and for students with an interest in applying for their engineering skills to the solution of problems in healthcare. This course is offered by the Division of Biomedical Engineering in the Department of Human Biology, and is particularly valuable for students considering postgraduate studies in Biomedical Engineering. Entrance may be limited.
8 NQF credits at HEQSF level 6
Convener: Assoc Prof D Bezuidenhout and Assoc Prof T Franz
Course entry requirements: None
Objective: To provide an introduction to biomedical engineering in particular to undergraduate students
Course outline: This course provides an introduction to the field of biomedical engineering to undergraduate students in the Faculty of Engineering and the Built Environment and others. Topics include an overview of the human body; the cardiovascular system; biomechanics of the musculoskeletal system; medical instrumentation design considerations; medical imaging physics and applications, applied biophysics and biomaterials.
DP requirements: None.
Assessment: Class tests 40% (two tests, each worth 20%), June examination two-hours 60%.

HUB2019F INTEGRATED ANATOMICAL AND PHYSIOLOGICAL SCIENCES I
 Entrance is limited to 80 students.
24 NQF credits at HEQSF level 6
Convener: Assoc Prof E Ojuka
Course entry requirements: BIO1000W (or equivalent), CEM1000W (or equivalent).
Course outline:
HUB2019F course integrates human physiology, anatomy and histology. It includes studies of cells and tissues, embryology, osteology, skeletal muscle, body fluids, endocrinology, digestion, absorption and metabolism. The course consists of lectures, practical sessions and tutorials. At the end of this course, students will be able to describe structure-function relationships of body systems covered in the course; apply concepts and principles taught in lectures and practical sessions to solve theoretical or real-life problems posed in tutorials, tests and examinations; follow and implement instructions in computer-simulated physiology experiments and interpret result; identify micro-anatomical organisations of organs under a microscope or in monographs; identify and name structures in anatomical specimens; and design simple experiments to determine physiologic parameters such as blood type, fluid compartment volumes, enzyme activities etc.

**DP requirements:** Attendance at all practical sessions and 40% average in class tests.

**Assessment:** The breakdown of course marks is as follows: Class tests 30%, practical write-up 15%, assignments or tutorials 5%. Final examinations (50%) as follows: Theory examination 30%, practical examination 20%. The pass mark for the course is 50%. Supplementary examinations, in the form of written, practical or oral assessment, may be offered to students whose overall score is 45-49%.

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**HUB2021S INTEGRATED ANATOMICAL AND PHYSIOLOGICAL SCIENCES II**

*Entrance is limited to 75 students*  
24 NQF credits at HEQSF level 6  
*Convener:* Dr E van der Merwe  
*Course entry requirements:* HUB2019F, CEM1000W (or equivalent).  
*Course outline:*  
The course covers the physiology, anatomy and histology of organ systems in the human body, including the nervous system, excretory and thermoregulation, respiratory, cardiovascular, lymphatic and immune, and reproductive systems. Students are also introduced to bone forensics and to concepts of aging and disease. Students work in small groups using computers and other equipment to study the physiology and anatomy of the nervous system; the electrical events in the contraction of cardiac muscle; the mechanics of the respiratory system; the immune system; excretion and temperature regulation; reproduction, and parts of the human body from cadavers and histological sections under a microscope. At the end of this course students will have a thorough grounding in the physiological mechanisms of the nervous, urinary, cardiovascular, respiratory, reproductive, and immune systems. They will have an understanding of the basic anatomy and microanatomical organisation (histology) of key organs within the above bodily systems; will be able to integrate the concepts above in terms of understanding structure-function relationships, so as to understand the basic key elements that impact on the physiology of organs during ageing and that lead to disease processes; and will be able to interpret data obtained from the various practicals.  
**DP requirements:** Attendance at all practicals, 40% average in class tests and an average of 50% for all assignments.  
**Assessment:** The final mark comprises class tests (30%); practicals, assignments and tutorials (20%); and final examinations (50%), consisting of a written theory exam (30%) and a practical (20%). An oral examination may be required in the case of selected students.

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**MDN3003H INTRODUCTION TO CLINICAL PRACTICE PART II**  
10 NQF credits at HEQSF level 8  
*Convener:* Dr N Gogela  
*Course entry requirements:* Students must be in the third year of the MBChB.  
*Course outline:*  
This course is designed for medical students completing the intercalated BMedScHons programme. The course aims to build on the clinical skills and knowledge acquired in the Introduction to Clinical Practice course offered in the third year of the MBChB programme. Students will attend two bedside tutorials and clerk one patient per week for the duration of the course (25 weeks). Students will be expected to further develop their skills in history-taking, physical examination and diagnostic reasoning by interviewing and examining patients with medical problems commonly encountered in
clinical in South Africa. Students will be able to conduct a full medical consultation and write a comprehensive set of clinical notes documenting the clinical encounter. They will also be expected to develop a clinical assessment of the medical problem including a differential diagnosis. A basic understanding of the treatment required for the medical problem will also be expected. Students will be expected to further develop their skills in history-taking, physical examination and diagnostic reasoning by interviewing and examining patients with medical problems commonly encountered in clinical practice in South Africa.

**DP requirements:** Students will be required to attend all bedside tutorials and complete a portfolio of 25 patient encounters to fulfil the DP requirements of the course.

**Assessment:** Students will receive an in-course mark based on their performance in the weekly bedside tutorial sessions and this mark will contribute 40% to the final year mark. Students will also do an oral portfolio-based examination at the end of the course and this will contribute 60% to the final course mark. Coursework percentage 40%, examination percentage 60%.

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**HUB3006F  GENERAL AND APPLIED PHYSIOLOGY**
36 NQF credits at HEQSF level 7  
**Convener:** Associate Professor A Bosch  
**Course entry requirements:** HUB2019F, HUB2021S  
**Objective:** Understanding the physiology with a view to furthering study at the Honours level  
**Course outline:**  
The semester theme is “Living, working and playing”. Topics dealt with include metabolism and homeostasis, sports nutrition and metabolism, obesity and diabetes, muscle physiology, cardio-respiratory physiology, sporting performance, exercise physiology, thermoregulation, and physiology in extreme environments. At the end of the course students should have a good understanding of the physiology related to movement, sport and exercise. They should understand physiological control, the basics of the physiological components underlying athletic performance, and energy balance and key components of sports nutrition. In addition, they should have a good understanding of the cardiovascular system, muscle function, and the effect of exercise on health, particularly diabetes and obesity. Students will prepare a seminar topic which will be presented as a PowerPoint presentation towards the end of the semester, during the “practical” time slot.

**DP requirements:** Attendance at all practicals, (including tutorials and seminar presentations held during the “practical” time slot), 40% average in class tests and an average of 50% for all assignments.

**Assessment:** Class test (30%); assignments/seminar presentation (5%); practicals (15%); and examinations (written theory and practical theory) (50%). An oral examination may be required in the case of selected students.

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**HUB3007S  HUMAN NEUROSCIENCES**
36 NQF credits at HEQSF level 7  
**Convener:** Dr A Gwanyanya  
**Course entry requirements:** HUB3006F (or equivalent) e.g. a result of at least 60% in HUB2017H. Exceptions are at the discretion of the convener  
**Objective:** To obtain a good grasp of core theoretical and practical concepts of human neurophysiological function.  
**Course outline:**  
This course offers theoretical and practical instructions on advanced concepts in neuroscience, such as embryological development and repair of the nervous system, histological and gross anatomical appearances of the brain, electrophysiology, principles of electrical and morphological brain imaging, neuronal signalling, signal transduction in sensory, motor and autonomic nervous systems, vision and pain perception, eating disorders, mechanisms of learning and the development of memory. At the end of the course students should be able to apply knowledge gained and practical skills acquired to solve problems in neurophysiology; read and critically evaluate neuroscience literature; apply knowledge of human physiology in medical fields in the general market place; use
acquired skills in assisting with undergraduate practical demonstrations; and teach basics of human physiology.

**DP requirements:** Attendance at all practicals, 40% average mark for class tests and an average of 50% for all assignments.

**Assessment:** Class tests (30%); tutorial project assignments (5%); practical experiments (15%); and examinations (theory and practical) (50%). An oral examination may be offered in case of selected students.

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**OBS4005W  OBSTETRICS & GYNAECOLOGY FOR EXTERNAL CREDIT**

*This course is taken by South African students studying towards a Cuban medical degree.*

20 NQF credits at HEQSF level 8

**Convener:** Dr S Allie and Sr C Zeelenberg

**Course entry requirements:** Prior courses as required by the relevant Cuban medical training programme

**Course outline:**

This is an eight-week block shared between obstetrics and neonatology. During the obstetrics blocks students acquire the knowledge, skills and professional conduct required for obstetric practice. Teaching takes place within the Maternal and Neonatal Service: Metro West, which exposes students to primary (or community-based) and secondary (or hospital-based) levels of care. Students also attend the tertiary academic centre for two weeks in order to gain a well-rounded perspective of common serious obstetric conditions. Practical experience is recorded in a logbook and includes at least 15 deliveries under supervision. Students are encouraged to develop professional behaviour; as well as to develop empathic and caring attitudes through compassion tutorials and a Health and Human Rights workshop. The programme is supplemented by a series of lectures, tutorials and skills training sessions that cover topics within the discipline, as well as contributions from other divisions in order to provide an integrated, multidisciplinary approach to common problems.

**DP requirements:** Full attendance and completion of all coursework by the due dates. Failure to adhere to these criteria may result in extra time or outright failure of the block. All requisite coursework/clinical work as well as completion of a logbook (including 15 deliveries) by the due date is mandatory.

**Assessment:** Students are examined at the end of the block, but not at the end of the year. Completion of the required number of practical procedures is mandatory and has to be signed off in the logbook. The end-of-block assessment includes an in-course assessment (15%), case presentations (15%), an OSCE (55%), and the presentation of research projects (15%). Students are required to pass each assessment mode before qualifying to pass the block as a whole, failing which they repeat the relevant assessments, the pass marks for which are 50%. The in-course assessment includes professionalism (punctuality, dress code, extent of involvement in course activities – including clinical activities, attitude towards patients, colleagues and required activities, team work, conscientiousness); and clinical knowledge & skills. Should the student score under 60% for this in-course assessment, he/she may be disqualified from writing the end-of-block exam, and/or given extra time. Students who fail the end-of-year examinations may be offered oral re-examinations before the final mark is submitted.

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**PTY4008S  MEDICINA FORENSIS**

*This course is offered by Division of Forensic Medicine in Department of Pathology. The maximum intake is 30 students.*

9 NQF credits at HEQSF level 5; 15 lectures.

**Convener:** Prof L J Martin

**Course entry requirements:** None

**Course outline:**

This course covers the South African legal system and statutory obligations of doctors and healthcare workers; introduction to human anatomy and physiology; introduction to medico-legal concepts of life and death; the changes which occur in the body after death; the mechanisms of
injury and death causation; identity and disputed parenthood; sexual offences and violence against women; choice of pregnancy termination; child abuse and other forensic aspects of paediatric medicine; iatrogenic disorders; intoxication and drunken driving; drug addiction and poisoning as cause of death; pathology of head injury; and anoxic mechanisms as cause of death.

**Lecture times:** Monday double lecture from 15h00 – 16h45

**DP requirements:** Full attendance and completion of all coursework commitments by the due date.

**Assessment:** One two-hour written examination in November (100%) and a 20-minute oral examination for pass/fail.

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**AAE4012W ANAESTHESIA PART I FOR EXTERNAL CREDIT**

*This course is taken by South African students who are studying toward the Doctor of Medicine degree from the University of Villa Clara, Faculties of Medicine in Cuba.*

0 NQF credits at HEQSF level 8

**Convener:** Dr R Haylett and Dr R Nieuwveld

**Course entry requirements:** Prior courses as required by the relevant Cuban medical training programme

**Course outline:**

Students follow a condensed course in Anaesthesia over a period of two weeks. Teaching consists of a series of tutorials with clinical teaching and practical training in the operating theatres.

Core learning outcomes: The student is expected to acquire the basic knowledge and skills required for safe clinical anaesthesia, including the ability to perform pre-operative assessments and render appropriate postoperative care. There is an emphasis on safe anaesthesia practice with a focus on professional behaviour appropriate to the role of the anaesthetist as a perioperative physician.

Core knowledge: Basic knowledge of anaesthesia techniques and equipment. Learning in the fourth year is based on developing an understanding of the academic basis for anaesthesia and of the related physiology and pharmacology.

**DP requirements:** a) Satisfactory attendance and completion of all requisite coursework and clinical work. b) A logbook of anaesthesia skills must be satisfactorily completed and submitted.

**Assessment:** An End-of-Block examination consisting of a written paper and/or a practical assessment (100%).

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**MDN4016W MEDICINE FOR EXTERNAL CREDIT**

*This course is taken by South African students studying towards a Cuban medical degree.*

32 NQF credits at HEQSF level 8

**Convener:** Dr B Hodkinson

**Course entry requirements:** Prior courses as required by the relevant Cuban medical training programme

**Course outline:**

The first two weeks of the rotation are dedicated to teaching and revising basic clinical interview and examination skills, basic life support and basic invasive procedures – blood cultures, venepuncture and catheterisation. During these two weeks, students also participate in patient-based tutorials emphasising correct clinical techniques and the principles of clinical reasoning. For the remaining six weeks of the rotation students are attached to a firm in one of the university-affiliated teaching hospitals where they are expected to become an integrated member of the clinical team participating in all the weekly clinical activities including intakes, ward rounds, x-ray meetings, clinical meetings and bedside tutorials. As part of their clinical training they are expected to clerk and manage at least two patients per week during their six-week clinical attachment. These 12 clinical cases are written up as patient cases in a portfolio of learning which forms part of the course assessment.

**DP requirements:** Attendance at all intakes and post-intake ward rounds as well as all bedside tutorials and departmental academic meetings, including x-ray meetings. Students are also required to complete a portfolio of learning for which they are required to collate at least 12 patient case records reflecting the in-hospital course and management they have provided.
Assessment: The final mark is made up of an end-of-block clinical examination based on four patient encounters (50%), an end-of-block oral examination (30%) based on the portfolio of cases managed during the clerkship and an in-course assessment (20%) of clinical competence, theoretical knowledge and professional behaviour.

AAE5001W ANAESTHESIA FOR EXTERNAL CREDIT
19 NQF credits at HEQSF level 8
Course entry requirements: Prior courses as required by the relevant Cuban medical training programme
Course outline:
Practical clinical instruction takes place in theatre during this course. Core content includes safe anaesthesia techniques, equipment and the pharmacology related to anaesthesia. Learning is centred round a series of anaesthetics which the student administers under supervision, also involving the pre-operative assessment of patients and their postoperative management. Students are required to perform a minimum of two such cases that they personally manage and this is assessed by the supervising anaesthetist. In addition, students are required to include an anaesthesia section in all surgical clinical case studies done during the General Surgery rotations; emphasising the pre-operative assessment and preparation, anaesthesia strategies and alternatives, and the postoperative intravenous fluid and pain management. Core learning outcomes include knowledge of clinical anaesthesia; skills in the pre-operative, intra-operative and post-operative care of patients necessary for safe anaesthetic practice; and professional behaviour appropriate to the pivotal role of the anaesthetist in the surgical setting.

DP requirements: 100% attendance and completion of all requisite coursework/clinical work in each year of study. A fifth year logbook of in-theatre discussion questions must be completed and signed off. Failure to complete these requirements or to perform the requisite amount of coursework and clinical work may prevent the student from writing the final examination. A penalty may be imposed for coursework handed in late.
Assessment: Students undergo formative and summative assessments using various methods both during the course as well as at the end-of-block and end-of-year. Formative assessments occur in each block by the specialist anaesthetists who supervise the student's administration of a series of anaesthetics. Summative assessment is based upon an End-of-Block examination in fourth year (AAE4012W) (30%); two fifth year clinical case assessments, group-work and end-of-block tests (5% each – 15%); and a fifth year end-of-year examination (55%).

PED5003W CARING FOR CHILDREN FOR EXTERNAL CREDIT
This course is taken by South African students who are studying toward the Doctor of Medicine degree from the University of Villa Clara, Faculties of Medicine in Cuba.
44 NQF credits at HEQSF level 8; N/A.
Convener: Dr H Buys, Dr S Cox and Dr A Spitaels
Course entry requirements: Prior courses as required by the relevant Cuban medical training programme
Co-requisites: SLL5007W
Objective: Build knowledge, skills and attributes needed for the holistic medical care of children and teenagers.
Course outline:
The course comprises an eight-week block divided into two four-week rotations. One rotation is integrated with paediatric surgery and focuses on ambulatory paediatrics; the other focuses on inpatient care and includes clinical languages teaching. Four weeks of the block are spent at the Red Cross Children’s Hospital, alternating with four weeks at New Somerset, Groote Schuur or Red Cross Children’s Hospital. Whole group seminars in aspects of the care of children run weekly. A section of MDS5003H Pharmacology and Applied Therapeutics runs separately on a weekly basis. Student who pass this course will have knowledge of common core paediatric medical and surgical diseases and conditions; skill at taking a paediatric history, examining neonates, children and adolescents; the ability to define an appropriate problem list and formulate an appropriate
management plan; awareness of basic procedures; professional behaviour and attitudes appropriate to handling children and their caregivers; and awareness of the rights of children and the doctor’s role as an advocate for child health. The curriculum is composed of core presentations, which students address in terms of history-taking, examination, assessment and management plans, as well as during bedside tutorials, and in assembling their portfolio, and core topics – divided into “must know” and “must recognise” categories.

**Lecture times:** Monday lecture/seminar program, with other seminars according to rotation

**DP requirements:** Minimum of 80% attendance (absence allowed only with permission) and completion of all requisite coursework/clinical work, including a written portfolio of 12 cases with associated tasks and five clinical methods templates; completion of online lessons and quizzes for paediatric surgery; and a signed logbook. If a student is absent with permission, the time missed will need to be made up or the student may be required to repeat the block.

**Assessment:** Summative assessment comprises an end-of-block clinical and portfolio assessment: 50%; end-of-block online assessment MCQ and Extended Matching Items: 50%. Coursework from PH4056W Health in Context in Year 4 is also assessed. Students are required to achieve 50% or more in (1) the clinical examination assessment, (2) portfolio assessment, (3) paediatric surgery component of the online assessment, and (4) the general care of children component of the online assessment, in order to pass the course. Any student not meeting the sub-minima in paediatric surgery is required to undergo a repeat online assessment and pass/fail oral examination (based on the portfolio) and may have to spend additional time in paediatric surgery followed by another assessment. Any student not meeting the sub-minima in general care of children is required to undergo a pass/fail oral examination (based on the portfolio) and/or a repeat clinical examination and may have to spend additional time in paediatrics followed by another assessment. Repeat assessments will be held during the mid-year vacation for blocks 1-3, and at the end of the academic year for blocks 4-5.

**MDN5004W**  
**PHARMACOLOGY AND THERAPEUTICS FOR EXTERNAL CREDIT**

This course is taken by South African students studying towards a Cuban medical degree.

20 NQF credits at HEQSF level 8

**Convener:** Dr K Cohen and Dr P Sinxadi

**Course entry requirements:** Prior courses as required by the relevant Cuban medical training programme.

**Course outline:**

The course focuses on applying understanding of pharmacodynamics and pharmacokinetics to the management of common conditions, using essential medicines in the primary healthcare context. It aims to equip students with skills for critically appraising evidence and judging the risk-benefit profiles of available treatment options to ensure optimal patient care.

**DP requirements:** 100% attendance of clinical case presentations.

**Assessment:** The final mark is made up of clinical case presentations (10%); written assignment/s (10%); end-of-paediatrics-block examination (40%); and an end-of-medical specialties-block examination (40%).

**CHM5006W**  
**SURGERY FOR EXTERNAL CREDIT**

[Note: This course is taken by South African students studying towards a Cuban medical degree.]

41 NQF credits at HEQSF level 8

**Convener:** Dr S Burmeister

**Course entry requirements:** Prior courses as required by the relevant Cuban medical training programme.

**Course outline:**

General surgery is taught over eight weeks at Groote Schuur Hospital within the hepatobiliary, vascular, colorectal, breast and endocrine units. Daily seminars present the core curriculum of important clinical presentations, the recognition and initial management of which are relevant to general practitioners in South Africa. Regular interactive patient-based tutorials enhance clinical
proficiency and diagnostic skills. Students produce a portfolio of six cases, each comprising a case report and a researched and referenced discussion of 1500 – 2000 words. Core curriculum topics are divided into “must know” and “must recognise”. Core outcomes include recognition of urgent and life-threatening clinical scenario and common surgical diseases, as well as less common but dangerous problems; ability to initiate primary or emergency care and initiate appropriate investigations; and ability to recognise conditions requiring referral to specialised services. Core learning outcomes in plastic surgery comprise knowledge of important conditions requiring treatment by a plastic surgeon, e.g. skin cover, grafts and flaps, trauma, cosmetic surgery, burns; and skills of examination, initiating treatment and in selecting patients for referral to a specialist centre. Students experience plastic surgery at the Red Cross Children's Hospital in the way of congenital anomalies such as tumours, cleft lip and palate, and hand abnormalities.

**DP requirements:** 100% attendance and completion of all requisite coursework and clinical work by the due dates. Students are expected to attend a minimum of 30 out of the 36 seminars. Tutorials are considered compulsory. In addition students must observe/perform a selected list of surgical procedures. Both tutorials and witnessed procedures will be signed off in a logbook. Review of the logbook is performed during the end-of-block assessment. Completion of the portfolio of cases is compulsory and late hand-in penalised with 5% per day post the deadline for submission.

**Assessment:**
- **Formative assessment:** students are provided with feedback from their tutors informally during their block. This is not recorded, and has no part in the final promotion mark.
- The final mark for surgery in fifth year is made up of an end of block written paper comprising 1 question from each of the 4 specialised surgical units (20%); an end of block clinically based MCQ (30%); an end of block oral assessment (10%); a portfolio assessment (10%) and an end-of-year MCQ (including trauma and plastic surgery 30%). The general surgery component of the course must be passed with 50%. A mark of 45-50% is required in order to qualify for a supplementary examination. Plastic surgery assessment is contained in the end-of-year MCQ examination in general surgery.

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**OBS6001W OBSTETRICS FOR EXTERNAL CREDIT**

*This course is taken by South African students studying towards a Cuban medical degree.*

20 NQF credits at HEQSF level 8

**Convener:** Dr K Brouard and Dr C J M Stewart

**Course entry requirements:** Prior courses as required by the relevant Cuban medical training programme

**Course outline:**
Students have four weeks to complete Obstetrics. Students attend the block at one of the designated hospitals and will attain competence in practical obstetric and gynaecological examination, including pap smears. They will also attain competence in minor procedures such as D&Cs, assisting in theatre and intrapartum management.

**DP requirements:** Students are expected to attend and participate in ward, clinic and labour ward duties; as per the programmes of the individual firms. Professionalism will be assessed, which includes punctuality, attendance, appropriate dress code and behaviour. These are monitored by the consultants and registrars in these firms, and form part of the in-course assessment. Failure to meet these criteria could result in extra time or outright failure of the block, at the discretion of the course convenors and Head of department. Should students not fulfil DP requirements they could be excluded from the end-of-block exam.

**Assessment:** There is an in-course assessment during both blocks and a record of clinical experience has to be submitted. Students need to display competence in clinical presentations, which is a prerequisite to sitting the end-of-block examination. They will be required to pass an end of block examination which is an OSCE/OSPE format. The pass mark is 50%. They will also be required to pass a skills station. In view of the limited time available, they will not be required to complete a portfolio and will not have clinical case presentations as part of their assessment. Students who fail to achieve satisfactory results in these examinations are required to sit the departmental examination at the end of the year. Students who fail the end-of year examinations may be offered oral
examinations, extra time or supplementary examinations, at the discretion of the departmental exam board and HOD.

PED6001W  PAEDIATRICS FOR EXTERNAL CREDIT
This course is taken by South African students who are studying toward the Doctor of Medicine degree from the University of Villa Clara, Faculties of Medicine in Cuba.
44 NQF credits at HEQSF level 8
Convener: Dr K Donald, Dr P Gajjar and Dr S Salie
Course entry requirements: Prior courses as required by the relevant Cuban medical training programme
Course outline:
In sixth year paediatrics, the student is an integral member of the paediatric team caring for children. Students spend four weeks in a general paediatric ward at Red Cross Children’s, Victoria, Groote Schuur or New Somerset Hospitals. Students take part in the day-to-day management of patients and participate in the academic/clinical activities of the ward including after hour cover. Core learning outcomes include demonstration of knowledge of common core paediatric diseases and conditions; and skills such as taking a paediatric history, ability to examine any child or adolescent, defining an appropriate problem list, drawing up an appropriate management plan (including emergency management and resuscitation); ability to perform basic procedures; professional behaviour; considering the rights of the child and being advocates for child health. Core knowledge focuses on common paediatric conditions, which students address by clerking admissions to the wards, including history-taking, examination, assessment, formulation of management plans and presentation of cases on ward rounds. These cases form the basis of the in-course assessment.

DP requirements: 100% attendance and completion of all requisite coursework/clinical work. If a student is absent the time must be made up; if absent for more than three weeks, the block must be repeated. Students are expected to perform, under supervision, all procedures relevant to the management of their patients. Students must attend resuscitation training and attain competency in a list of procedures (signed skills logbook of G1 procedures) as a minimum.

Assessment: Formative assessment is given during the clinical attachment. Summative assessment consists of an in-course assessment and work ethic (50%) and a clinical paediatric examination (50%). The short case/single system clinical examination is primarily aimed at assessing clinical skills and competency using a standardised assessment tool. It is based on examination of two short-case/single system cases whilst being observed and guided by a single examiner for each case. Students are required to attain a mark of 50% or more in both the in-course assessment and the clinical paediatric examination in order to pass the course.

MDN6003W  MEDICINE FOR EXTERNAL CREDIT
This course is taken by South African students studying towards a Cuban medical degree.
16 NQF credits at HEQSF level 9
Convener: Dr B Hodkinson
Course entry requirements: Prior courses as required by the relevant Cuban medical training programme
Course outline:
Students complete a four-week rotation in general medicine attached to an acute general medicine firm at one of the UCT-affiliated teaching hospitals. They are expected to become an integrated member of the clinical team participating in all the weekly clinical activities including intakes, ward rounds, x-ray meetings, clinical meetings and bedside tutorials. As part of their clinical training they are expected to clerk and manage at least three patients per week during their four-week clinical attachment. These 12 clinical cases are written up as patient cases in a portfolio of learning which forms part of the course assessment.

DP requirements: Attendance at all intakes and post-intake ward rounds as well as all bedside tutorials and departmental academic meetings, including x-ray meetings. These activities are monitored by completion of a logbook. Students are also required to complete a portfolio of
learning for which they are required to collate at least 12 patient case records reflecting the in-hospital course and management they have provided.

**Assessment:** The final mark is made up of an end-of-block clinical examination based on four patient encounters (40%), an end-of-block oral examination (40%) based on the portfolio of cases managed during the clerkship and an in-course assessment (20%) of clinical competence, theoretical knowledge and professional behaviour.

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**PTY6017W  FORENSIC MEDICINE**

10 NQF credits at HEQSF level 8; 16 lectures, 8 tutorials.

**Convener:** Prof L Martin

**Course outline:**
This course is 2 weeks in duration during a 4 week block with Anaesthetics. It comprises 16 large group seminars and four practical tutorials at the Salt River Forensic Pathology Laboratory of at least 2 hours’ duration each. Students are expected to complete 4 tasks during the attachment, attend tutorial sessions and deliver a presentation. There are four task feedback tutorials; the rest of the time is spent in self-directed learning. Core learning outcomes are based on the core knowledge and topics presented in the large group seminars, small group sessions and tutorials, as well as the four topics covered in the four tasks presented during the two-week block. The learning outcomes are categorised broadly into core knowledge, core skills and professional behaviour. The core curriculum has been designed to highlight the forensic pathology and clinical forensic medicine problems and topics that the practitioner will encounter as a generalist. Students are expected to be able to recognise, evaluate, appropriately assess and offer expert opinions on core subjects, in preparation for potential expert testimony in criminal court cases and inquest hearings for the Department of Justice. Students must be able to recognise medico-legal cases (clinical and pathological) that need referral to centres of expertise; to recognise what immediate steps should be taken to prevent loss of evidence before referral; and to ensure preservation of any pathology and evidence before referral.

**DP requirements:** Satisfactory attendance and completion of all requisite coursework/clinical work. 80% of plenary sessions must be attended. Students must achieve a subminimum of 50% in their examination and in their coursework. All practical sessions must be attended.

**Assessment:** Tutors provide students with feedback on their performance whenever an interaction occurs during the large group sessions or small group tutorials. The final mark is made up of in-course assessments (40%) and an end-of-year written paper.

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**CHM6020W  SURGERY FOR EXTERNAL CREDIT**

19 NQF credits at HEQSF level 8

**Convener:** Dr S Burmeister

**Course entry requirements:** Prior courses as required by the relevant Cuban medical training programme

**Course outline:**
General surgery in sixth year incorporates a hands-on practical four-week rotation during which student interns consolidate and refine clinical examination, diagnosis and management of the major symptom complexes in surgery. They spend two weeks each in two of the four specialised units at Groote Schuur Hospital (hepatobiliary, vascular, colorectal, breast and endocrine) and function as integrated members of the therapeutic team. They are involved in all aspects of their unit’s activities, in particular ward rounds, patient management and academic activities. They assist the intern and registrar on call with admissions to the firm. The differential diagnosis and basic and specialised investigations are emphasised in each clinical situation. They present their patients on the ward rounds, at firm meetings and the combined x-ray conferences. They accompany their patients to interventional procedures, e.g. endoscopy, ERCP, angiography or the operating theatre. They must present at least two cases per week to attending consultants and during the course of the rotation complete a portfolio of three cases, each case comprising a case report and a researched and referenced discussion of 1500 – 2000 words. Interactive tutorials and seminars are given each week.
by consultant staff to review core theoretical knowledge. A logbook is kept documenting presentation of cases to consultants and regular attendance of ward rounds. **DP requirements:** Full attendance and participation in unit activities as well as completion of all requisite coursework/clinical work including the requisite portfolio of cases. An incomplete logbook may preclude a student from partaking in the end of block assessment. Late hand in of the portfolio is penalisable by an amount of 5% per day post the deadline for submission. **Assessment:** The end-of-block assessment comprises a clinical scenario based oral examination (25%), a patient based oral examination (35%), a computerised clinically based MCQ (25%) and assessment of the case portfolio (15%). The logbook is reviewed. Students who obtain an average mark of less than 55% for their end-of-block assessment are re-examined in a subsequent examination, having repeated the four-week block. Should the student pass the November examination their original mark will stand, unless it was originally below 50%, when a final mark of 50% will be given – 50% is considered the pass mark for the course. Failure to pass the repeat examination will result in failure of the year.
## LIST OF DEPARTMENTS, DIVISIONS AND UNITS

<table>
<thead>
<tr>
<th>Department</th>
<th>Division/Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anaesthesia &amp; Perioperative Medicine</td>
<td>N/A</td>
</tr>
<tr>
<td>Health &amp; Rehabilitation Sciences</td>
<td>Communication Sciences &amp; Disorders</td>
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<tr>
<td></td>
<td>Disability Studies</td>
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<tr>
<td></td>
<td>Nursing &amp; Midwifery</td>
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<tr>
<td></td>
<td>Occupational Therapy</td>
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<td></td>
<td>Physiotherapy</td>
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<tr>
<td>Health Sciences Education</td>
<td>Clinical Skills Unit</td>
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<td>Intervention Programme Unit</td>
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<td></td>
<td>Education Development Unit</td>
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<tr>
<td>Human Biology</td>
<td>Biomedical Engineering</td>
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<td></td>
<td>Cell Biology</td>
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<td></td>
<td>Clinical Anatomy &amp; Biological Anthropology</td>
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<td>Exercise Science &amp; Sports Medicine</td>
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<td>Human Nutrition</td>
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<td>Physiological Sciences</td>
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<tr>
<td>Integrative Biomedical Sciences</td>
<td>Medical Biochemistry &amp; Structural Biology</td>
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<td></td>
<td>Chemical and Systems Biology</td>
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<td>Computational Biology</td>
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<tr>
<td>Medicine</td>
<td>Allergology &amp; Clinical Immunology</td>
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<td></td>
<td>Cardiology</td>
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<td>Clinical Haematology</td>
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<td>Clinical Pharmacology</td>
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<td>Critical Care Medicine</td>
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<td>Dermatology</td>
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<td>Endocrinology &amp; Diabetic Medicine</td>
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<td>General Internal Medicine</td>
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<td>Geriatric Medicine</td>
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<td>Hepatology</td>
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<td>Infectious Disease and HIV Medicine</td>
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<td>Lipidology</td>
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<td>Medical Gastroenterology</td>
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<td>Nephrology &amp; Hypertension</td>
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<td>Neurology</td>
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<td>Occupational Medicine</td>
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<td>Rheumatology</td>
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<td>Obstetrics &amp; Gynaecology</td>
<td>General Obstetrics &amp; Gynaecology</td>
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<td>Gynaecological Oncology</td>
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<td>Maternal-Fetal Medicine</td>
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<td>Reproductive Medicine</td>
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<td>Urology/Obstetrics</td>
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<td>Paediatrics &amp; Child Health</td>
<td>Allergology (Paediatric)</td>
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<td>Associated Paediatric Disciplines</td>
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<td>Child and Adolescent Psychiatry</td>
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<td>Child Nursing Practice</td>
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<td>Cardiology (Paediatric)</td>
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<td>Child Health Unit</td>
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<td>Critical Care (Paediatric)</td>
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<td>DEPARTMENTS IN THE FACULTY</td>
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<td>Dermatology (Paediatric)</td>
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<td><strong>Psychiatry &amp; Mental Health</strong></td>
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<td>Addiction Psychiatry/Psychology</td>
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<td>Consultation/Liaison Psychiatry</td>
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<td>Health Policy &amp; Systems</td>
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<td>Occupational Medicine</td>
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Paediatric Surgery
Plastic, Reconstructive & Maxillo-facial Surgery
Surgical Gastroenterology
Urology
ANAESTHESIA AND PERIOPERATIVE MEDICINE

D23, New Groote Schuur Hospital

Professor and Head:
J L C Swanevelder, MBChB, MMed Stell DA FCA FRCA SA

Professor:
R A Dyer, BSc(Hons) Stell MBChB PhD Cape Town FFA SA

Associate Professor:
J M Thomas, MBChB Cape Town FFA SA

Senior Lecturers Full-time:
K Bergh, MBChB Pret DA FCA SA
B Brennan, MBChB Cape Town DA FCA SA
K Bester, MBChB Stell DA FCA SA
M Casey, DA Dip PEC MBChB SA
E Cloete, MBChB Pret DA FCA SA
A De Vaal, MBChB Pret DA FCA SA
S Dwyer, MBChB Stell DA FCA SA
A Ernst, MBChB Cape Town DA FCA SA
F M Falanga, MBChB Cape Town DA FFA SA
R Gray, MBChB Cape Town DA FCA SA
M Hart, MBChB Cape Town DA FCA SA
R Haylett, MBChB Cape Town DA FCA SA
S A M Heijke, MBChB Cape Town FFA SA
I Joubert, MBChB Witwatersrand FCA SA FCA CritCare
K Kemp, MBChB Stell DA FCA SA
N Khan, MBChB Cape Town DA FCA SA
R L Llewellyn, MBChB Cape Town FFA SA
N Meyersfield, MBChB Witwatersrand DA FCA SA
M Miller, MBChB Stell FCA SA
L F Montoya-Pelaez, MBChB Zimbabwe FCA SA
A Myburgh, MBChB Cape Town DA FCA SA
R W Nieuwveld, BSc MBChB Witwatersrand FFA SA
M Nejthardt, BSc MBChB Stell DA FCA SA
D Nolte, MBChB Witwatersrand DA FCA SA
G Picken, MBChB Cape Town DA FCA SA
J Piercy, MB BS London BSc (Hons) FCA SA
O Porrill, MBChB Witwatersrand DA FCA SA
M Rademeyer, MBChB Cape Town DA FCA SA
A R Reed, MBChB Cape Town DA FRCA UK
F Roodt, MBChB Cape Town DA FCA SA
H K S Steinhaus, MBChB Cape Town DA FCA SA
K Timmerman, MBChB Cape Town DA FCA SA
D van Dyk, MBChB Cape Town DA FCA SA
J van Nugteren, MBChB UFS DA FCA SA
D Visu, MBChB Romania DA FCA SA
A Vorster, MBChB Stell DA FCA SA
G S Wilson, MBChB Cape Town FRCA SA

Lecturer Part-time:
D J B Batty, MBChB Cape Town FCA SA
HEALTH AND REHABILITATION SCIENCES

F45, Old Main Building, Groote Schuur Hospital

Associate Professor and Head:
S A Singh, B(SPHT) UDW MA PhD(SLP) NorthWestern

Communication Sciences and Disorders
F45, Old Main Building, Groote Schuur Hospital

Head of Division:
L Ramma, BA(CommSci&Dis) Fresno State MA(Audio) San Diego AuD Florida PGDip (Health Economics) Cape Town MPH Witwatersrand

Associate Professor:
H Kathard, B(SPHT) M(SpPath) DEd UDW

Senior Lecturers:
M Pascoe, BSc(Log) MSc(SpeechPath) Cape Town, PhD Sheffield
L Petersen, B(Spraak&AUDIO) Stell MSc(Audio) Cape Town
C Rogers, MSc(Audio) Cape Town

Lecturers Full-time:
M Harty, B(CommPath) MA(AAC) PhD Pret
V Norman, BSc(Log) Cape Town M(CommPath) Pret

Clinical Educators Part-time:
F Camroodien-Surve, BSc(SLP) Cape Town M(ECI) Pret
T Cloete, BSc MSc(Audio) Cape Town
C Edwardes, BSc(SLP) Cape Town
N Keeton, BSc(Audio) MSc(Audio) Cape Town
T Kuhn, BSc(Log) Cape Town
S Kuschke, B Com Path (STA) Pret
J le Roux, BSc(Log) Cape Town M(ECI) Pret
B Sebothoma, BSc(Audio) Cape Town
F Walters, B(SpLang&HearTh) Stell

Intervention Programme Co-ordinator and Lecturer:
B O Ige, BAHons Ilorin, Nigeria MA PhD UKZN PGDip Health Professional Education
A Brinkman, BSc(Audio) Cape Town

Disability Studies
Old Main Building, Groote Schuur Hospital

Associate Professor and Head:
T Lorenzo, BSc(OccTher) HDEdAd Witwatersrand MSc(CommDisStud) London PhD Cape Town

Lecturers:
B O Ige, BAHons Ilorin, Nigeria MA PhD UKZN PGDip Health Professional Education
H Kathard, B(SPHT) M(SpPath) Ded UDW
J McKenzie, BSc(Log) BA Cape Town MA York PGCE UNISA PhD Rhodes
C Ohajunwa, Special Education Ibadan, Nigeria MPhil Disability Studies Cape Town
DEPARTMENTS IN THE FACULTY

Guest Lecturers:
N Mayat, BA (Social Work) UDW BA(Hons) UNISA MPhil Disability Studies Cape Town
R Popplestone MA Cape Town
M van Zyl, BA(Hons) MPhil Cape Town Sociology
B Watermeyer, MA (Clin Psych) Cape Town DPhil Stell

Honorary Professor:
R McConkey, Ulster Professor of Developmental Disabilities, University of Ulster and Honorary Visiting Professor, Disability Studies Programme, Faculty of Health Sciences, University of Cape Town

Nursing and Midwifery
F45, Old Main Building, Groote Schuur Hospital

Head:
Vacant

Associate Professors:
S E Clow, MSc(Nurs) BSocSc(Nurs) UND AUDNEd Cape Town RN RM CHN
S E Duma, PhD Cape Town MCur UKZN BCur(NEdNAdmin) UNISA RN RM CHN RPychN
P M Mayers, DPhil Stell MSc(Phys) Cape Town BA(Nurs) BCur(CommNurs Nurs Ed) (Marr Guide & Couns) UNISA RN RM RPychN

Honorary Professors:
S Ersser, PhD Kings College University of London BSc (Hons) London South Bank University RGN Guys Hospital London CertHE Oxford Brookes University
N Abrahams, PhD MPhil Public Health UWC CHN PenTech RN RM

Senior Lecturers Full-time:
N Fouché, PhD (Ed) MSc(Nurs) AUDNEd Cape Town DipIntN RM RN
U Kyriacos, PhD MSc OphN Cape Town BCur(IetA NEduc NAdmin CHN UPE RGN&M Carinus Nursing College ICU Wentworth Hospital

Lecturers Full-time:
D Newman-Valentine, MCur BCur UWC RN RM RNE
D Ockhuis, MSc(Nurs) CapeTown BCur(NedCHN) UNISA Dip RN RM RPychN NAdmin

Clinical Facilitator:
M Abrahams, CHN RM RN (Completed Diploma in Nephrology Nursing, awaiting SANC registration)

Occupational Therapy
F45, Old Main Building, Groote Schuur Hospital

Associate Professor and Head:
R Galvaan, BSc(OccTher) MSc(OccTher) PhD Cape Town

Associate Professors:
E M Duncan, Dip(OccTher) Pret BArb UFS BA(Hons) UDW MSc(OccTher) Cape Town
PhD Stell
E Ramugondo, BSc(OccTher) MSc(OccTher) PhD Cape Town
**Senior Lecturer Full-time:**
H A Buchanan, BSc(OccTher) MSc(OccTher) PhD(OccTher) *Cape Town*

**Lecturers:**
E du Plooy, B(OccTher) M(OccTher) *Pret*
P Grentschel, B(OccTher) M(ECI) *Pret*
Z Hajwani, BSc(OccTher) *UWC* MSc(OccTher) *Cape Town*
Dr A Sonday, BSc(OccTher) *UWC* M(ECI) *Pret*

**Clinical Educators Part-time/Sessional:**
S Barker, BSc(OccTher) *Cape Town*
S Damonse, BSc(OccTher) *UWC*
H Flieringa, BArb *Stell* MSc(OccTher) *Cape Town*
F Gamieldien, BSc(OccTher) *Cape Town* DipBusManagement *Varsity College*
S Landman, BArb *Stell* MSc(OccTher) *Cape Town*
L Lewis, BSc(OccTher) *Cape Town*
T Mohomed, BSc(OccTher) *UWC*
M Motimele, BSc(OccTher) MSc(OccTher) *Cape Town*
L Peters, BSc(OccTher) MSc(OccTher) *Cape Town*
K Van Stormbroek, BSc(OccTher) *Cape Town*

**Lecturers Part-time (Intervention Programme/Senior Student Support):**
M Ramafikeng, BSc(OccTher) MSc(OccTher) *Cape Town*

**Physiotherapy**
*F45 and F46 Old Main Building, Groote Schuur Hospital*

**Head and Senior Lecturer:**
S Maart, BSc(Phys) MPH *UWC*

**Deputy Head and Senior Lecturer:**
R Parker, BSc(Phys) BSc(Med)(Hons) PhD *Cape Town* MSc(Pain) *Queen Margaret University, Edinburgh*

**Professors:**
S L Amosun, BSc(Phys) PhD *Ibadan* SRP UK PGDip(Health Professional Education)
J Jelsma, BSc(Phys) *Stell* DipTertEd *UNISA* DiplInternResEthics *Cape Town* MPhil *Zimbabwe* PhD *Leuven*

**Senior Lecturers:**
T Burgess, BSc(Phys) BSc(Med)(Hons) PhD *Cape Town* MHSc(Bioethics) *University of Toronto*
G Ferguson, BSc(Phys) MSc *Cape Town*

**Lecturers:**
C Hendricks, BSc(Phys) MSc *UWC*
S Manic, BSc(Phys) *UWC* MSc *Stell*
N Naidoo, BSc(Phys) *UDW* MMS ME *Natal*

**Assistant Director, Department of Physiotherapy, Groote Schuur Hospital:**
C Davids, BSc(Phys) *UWC*

**Senior Clinical Educators:**
H Talberg, BSc(Phys) MPhil(Ed) *Cape Town*
N Edries, BSc(Phys) MSc *Cape Town*
Clinical Educators:
I Croy, BSc(Phys) Cape Town
I Du Plessis, BSc(Phys) MSc Pret
F Harris, BSc(Phys) UWC
M Naidoo, BSc(Phys) MSc UWC
L Rustin, BSc(Phys) UWC
D Scott, BSc(Physio) Cape Town
HEALTH SCIENCES EDUCATION
Room 21, E52 Old Main Building, Groote Schuur Hospital

Professor and Head:
H Kathard, B(SPHT) M (SpPath) DEd UDW

Clinical Skills Unit
G13, New Groote Schuur Hospital

Senior Lecturer & Acting Director:
R Weiss, MBChB MPhil Cape Town

Lecturer/Clinical Educator
M Jansen, BTech (Emergency Medical Care) NDip (Emergency Medical Care) CPUT

Clinical Educators
N A Moller, RN RM RSCN DNE and BA
G Edelstein, RN RM Dip IntN Dip CHN DNE MPhil Cape Town
S Buthelezi, BCur (Nursing) Masters of Nursing (Nursing Education) UWC

Intervention Programme
Co-ordinator and Senior Lecturer: MBChB programme
E Badenhorst, BA(Hons) Stell

Coordinator and Lecturer Health and Rehabilitation programme
B O Ige, BA(Hons) Ilorin, Nigeria MA PhD UKZN PGDip Health Professional Education

Education Development Unit
Second Floor, Anatomy Building
(Tel: 021 406 6646)

Associate Professor and Director: Educational Development Unit
F Cilliers, MBChB BSc(Hons) MedSc MPhil(HED) Stell PhD Maastricht

Senior Lecturer
N Hartman, BA Stell BSocSc(Hons) MSocSc PhD Cape Town

Curriculum Development Officer:
M Alperstein, BSocSc (Nursing) UKZN Dip PHC (Ed) Witwatersrand MPhil (Adult Ed) Cape Town
L Pienaar, BSc (Physio) UWC MSc (Physio) Stell

IT Education Manager:
G Doyle, BSc (Hons) HDE Rhodes, MSc (IT) Cape Town
**HUMAN BIOLOGY**

*Room 5.1.4, Level 5, Anatomy Building, Health Sciences Campus and Sports Science Institute of South Africa Building, Newlands.* (This incorporates the disciplines of anatomy, biokinetics, biological anthropology, biomedical engineering, cell biology, exercise science, health technology and infrastructure management, physiology, and sport and exercise medicine).

**Professor and Head:**
M R Collins, BSc(Hons) Stell PhD Cape Town FECSS

**Honorary Professors:**
J L Jacobson, MA PhD Harvard  
W Van Mechellen, MD PhD FACSM

**Professors:**
E W Derman, MBChB *Pret* BSc(Med)(Hons) PhD Cape Town FACSM  
T S Douglas, BSc(Eng) MBA Cape Town MS Vanderbilt PhD Strathclyde  
S H Kidson, BSc(Hons) MSc PhD Witwatersrand HDE JCE  
E V Lambert, BA(PhysEd) MSc South Carolina PhD Cape Town  
M I Lambert, BSc(Agric) UKZN BA(PhysEd)(Hons) Rhodes MSc South Carolina PhD Cape Town  
G J Louw, BVSc D VS Pret  
M P Schwellnus, MBChB Witwatersrand MSc MD Cape Town FACSM FFIMS

**Emeritus Professors:**
L A Kellaway, BSc(Hons) MSc PhD Cape Town  
A G Morris, BSc(WLU) PhD Witwatersrand  
T D Noakes OMS, MBChB MD DSc(Med) Cape Town FACSM (Hon) FFSEM UK  
V A Russell, BSc(Hons) MSc Cape Town PhD Stell

**Associate Professors:**
A N Bosch, BSc UKZN BA(PhysEd)(Hons) MA Rhodes PhD Cape Town  
T Franz, PhD Bremen  
D M Lang, Dr rer nat Konstanz Germany  
E Ojuka, BSc(Ed) Makerere PhD Brigham Young  
S Prince, BSc(Hons) HDE PhD Cape Town

**Associate Professor and NRF/DST South African Research Chair in Brain Imaging:**
E Meintjes, BSc(Hons) MSc UKZN MS PhD Oregon State

**Honorary Associate Professor:**
J H Goedecke, BSc(Ed)Hons Nutrit&Dietetics PhD Cape Town RD(SA)

**Senior Lecturers:**
K Bugarith, BSc(Hons) UKZN PhD Washington State  
L Davids, BSc(Hons) MSc(Eng) UKZN PhD Cape Town  
G Gunston, MBChB Cape Town  
A Gwanyanya, MBChB DA SA MMSc(Anaesthetics) Zimbabwe PhD Leuven  
M Jankiewicz, PhD(Phys) Vanderbilt MSc(Phys) Copernicus  
L R John, BScEng UKZN PhD Cape Town  
V Naidoo, BSc UKZN BSc(Hons) Pret MMScSci UKZN PhD Michigan  
M A J Poluta, BSc(Eng) Witwatersrand  
D Shamley, BSc PhD Witwatersrand  
C P Slater, MBChB MPhil Cape Town FFRad(T) SA  
E L van der Merwe, BSc Med (Hons) MSc PhD Cape Town
C M R Warton, MBChB *Zimbabwe*

**Honorary Senior Lecturers:**
J de Beer, MBChB MMed(Orthop) *Pret*
J Gray, BSc (Physio) *Witwatersrand* BScMed(Hons) Exercise Science PhD *Cape Town*
T L Kolbe-Alexander, BA Western Cape BSc Med (Hons) MPH PhD *Cape Town*
R P Lamberts, BSc(Physiotherapy) MSc(Pedagogics/Human Movement Science) *Netherlands* PhD *Cape Town* FECSS
W Van der Merwe, MBChB *UFS* BScMed(Hons) Sport Science *Cape Town* FCS(Ortho)

**Lecturers:**
E Badenhorst, BA(Hons) *Stell*
R Ballo, MSc PhD *Cape Town*
J Friedling, MSc PhD *Cape Town*
S A Jimoh, BSc *Ilorin* MSc *Ibadan* PhD *Witwatersrand*
J Kroff, BSc(Human Movement Science) BHons(Biokinetics) MSc(Medical Physiology) PhD *Stell*
T Mutsvangwa, BScEng, MSc(Med), PhD(Biomed Eng) *Cape Town*
S Sivarasu, PhD(Biomed Eng) *VIT University India*

**Honorary Lecturers:**
D T Crombie, BA(Hons) (Industrial Relations) BA(Hons) (Industrial Psychology) PhD (Management theory) PhD (Exercise Science)
L K Micklesfield, BA(Human Movement Studies) *Rhodes* BSc(Med)(Hons)Biokinetics MSc(Med) PhD *Cape Town*
M K Patrick, MA *Cape Town*

**Senior Research Officers:**
Y Albertus-Kajee, BSc BSc(Med)(Hons) Exercise Science PhD *Cape Town*
C Draper, BScSc(Psych) BScSc(Hons)(Psych) MA(Psych) PhD *Cape Town*
T Kohn, BSc BSc(Hons)(Biochemistry) PhD *Stell*
M Posthumus, BSc BSc(Med)(Hons) Exercise Science PhD *Cape Town*
D Rae, BA(Human Movement Studies) AUS BSc(Med)(Hons) Exercise Science PhD *Cape Town*
A V September, BSc BSc(Med)(Hons)(Human Genetics) MSc(Medicine)(Human Genetics) PhD *Cape Town*
R Tucker, BSc(Physiology and Biochem) BSc(Med)(Hons) Exercise Science PhD *Cape Town*

**Research Officers:**
M Jankiewicz, MS *Copernicus* PhD *Vanderbilt*
M Nglazi, BSc (Microbiology) *Zambia* MPH *Cape Town*
L Rauch, BSc (Physiology) BSc(Med)(Hons) Exercise Science PhD *Cape Town*
J Smith, PhD *Cape Town*

**Honorary Research Associate:**
N J Bergman, MBChB *Cape Town* DCH *Sweden* MPH MD *Zimbabwe*
J Swart, MBChB MPhil (Sports Medicine) PhD *Cape Town*

**Principal Technical Officers:**
B R Dando, Dip(MedTech) *Zimbabwe*
C Harris, NTC(Tool, Jig and Die Making) *Athlone Tech Coll*

**Chief Technical and Scientific Officers:**
D A Bouwers, BSc (Hons) *Cape Town* MSc *Stell*
S Cooper, BSc BMedSc (Hons) BEd MMEdSc MBA
G de Bie, BSc *Rhodes* BSc(Hons) *UOFS* MPhil *Stell*
I Fakier, NDElectricEng CPUT
M Petersen, Dip(MedTech) BTech CPUT
S Rayise, MSc UWC
H Victor, Dip (Datametrics) UNISA

**Senior Technical and Scientific Officers:**
V Fourie
S Jordaan, MSc Stell

**Technical Officers:**
D Abrahams
M Cassar
N Kariem, BSc(Hons) Cape Town

**Clinical Research Sister:**
M Blackaller-Smal, BCur PGDNS (Clinical Nursing, Community) PGDNS (Nursing Management)

**Human Nutrition**
*Level 3, Anatomy Building*

**Associate Professor and Head:**
M Senekal, BSc(Hons) PGDip Diet MNutr PhD Stell RD (SA)

**Senior Lecturers:**
J Harbron, NNutr MSc NutrSc PhD Stell RD (SA)
NP Steyn, BSc(Hons) UKZN MSc Nutr PhD Stell MPH Cape Town RD (SA)

**Lecturer:**
S Booley, MSc(NutrManagement) UWC RD (SA)

**Lecturers/Clinical Educators Full-time/Part-time:**
L Cornelissen, BA HE(Hons) MA HE UWC
C Day, BSc Life Sc(Hons) Stell BSc(Med)(Hons) Nutr&Diet Cape Town
Z Ebrahim, MSc(Nutrition&Dietetics) Cape Town RD (SA)
F Herrmann, BSc(Dietetics) MSc(Nutrition) Cape Town RD (SA)
F Hoosen, BSc(Dietetics) UWC RD (SA)
K Manning, BSc PGDip Dietetics UKZN
B Najaar, MSc(Nutritional Sciences) Stell RD (SA)
K Sexton, BSc(Med)(Hons) Cape Town RD (SA)
M Theron, BDiet(Hons) Pretoria RD (SA)
INTEGRATIVE BIOMEDICAL SCIENCES

Professor and Head of Department
E D Sturrock, BSc(Med)(Hons) PhD Cape Town, FRSSAf, Fellow of UCT

Medical Biochemistry and Structural Biology
Level 6, Falmouth Building and Wernher and Beit Building North

Professor and Head:
V Leaner, BSc(Med)(Hons) PhD Cape Town

Emeritus Professor:
W Gevers, MBChB DSc(hc) ad eundem Cape Town MA DPhil Oxon DSc(hc) UPE CMSA Fellow of UCT

Professors:
A A Katz, PhD Weizmann Institute
R P Millar, PhD Liverpool FRCPath(Chem) FRSE Life Fellow of UCT (UCT Senior Scholar)
M I Parker, BSc(Hons) PhD MASSAf (International Centre for Genetic Engineering and Biotechnology – ICGEB Cape Town (South African Research Chair)
B T Sewell, MSc Witwatersrand PhD London
P N Meissner, BSc(Med)(Hons) PhD Cape Town Fellow of UCT

Honorary Professors:
C G P Mathew, BSc(Hons) UPE PhD London FRCPath Royal College of Pathologists
W-D Schubert, BSc(Hons) MSc UCT PhD Berlin
K R Acharya, BSc MSc PhD Bangalore

Emeritus Associate Professor:
L R Thilo, MSc Pret Dr rer Nat Heidelberg

Associate Professors:
D T Hendricks, BSc(Med)(Hons) PhD Cape Town
C N T Sikakana, BS Wesleyan PhD Madison Wisconsin

Honorary Lecturer:
K J Sales, BSc(Med)(Hons) MSc PhD Cape Town

Senior Researcher:
G Schäfer, PhD Humboldt Bonn

Lecturer/NRF career:
P van der Watt, PhD Cape Town
J Woodward, PhD Cape Town

Chief Scientific Officer:
S Schwager, MSc Cape Town
Chemical and Systems Biology
Level 3, Wernher and Beit Building North

Professor and Head:
J Blackburn, BSc(Hons) DPhil Oxon (South African Research Chair)

Professors:
S Barth, PhD Bonn DMSc Cologne
E D Sturrock, BSc(Med)(Hons) PhD Cape Town
M Mhlanga, PhD

Honorary Associate Professor:
L Zerbini, MSc PhD São Paulo, Brazil

Lecturer/Junior Research Fellow
N C Soares BSc(Hons) Westminster PhD Lisbon, Portugal

Computational Biology
Level 1, Wernher and Beit Building North, IDM

Professor and Head:
N J Mulder, BSc(Hons) PhD Cape Town

Associate Professor Full-time:
D Martin, PhD Cape Town

Lecturer Full-time:
N Wood, PhD Cape Town
MEDICINE

J47, Old Main Building, Groote Schuur Hospital

Professor and Head:
B M Mayosi, BMedSc MBChB UKZN DPhil Oxon FCP SA FRCP London FESC FACC MASSAf OMS

Professor of Clinical Medicine and Deputy Head:
V C Burch, MBChB Witwatersrand MMed Cape Town FCP SA FRCP London PhD Rotterdam

Emeritus Professors:
E D Bateman, MBChB MD Cape Town DCH FRCP UK
S R Benatar, MBChB DSc(Med) Cape Town FFA FRCP
P J Commerford, MBChB Cape Town FCP SA FACC
L H Opie, DPhil Oxon MD DSc(Med) Cape Town FRCP UK
S Saunders, MBChB MD Cape Town
J L Seggie, BSc(Hons) MBChB MD Birm FRCP London FCP SA
G Todd, BSc(Agric) UKZN MBChB PhD Cape Town FCDerm SA

Emeritus Associate Professors:
R W Eastman, MBChB Cape Town FRCP UK
G R Keeton, MBBChe Witwatersrand FRCP Glasgow FCP SA
S R Ress, MBChB Pret FCP SA
R Scott Millar, MBBChe Witwatersrand FCP SA
C R Swanepoel, MBChB Cape Town MRCP FRCP UK
R van Zyl Smit, MBChB Witwatersrand MD Cape Town FRCP

Honorary Professors:
M O Bachman, MBChB DOH MSc FFCH SA FFPH UK PhD
J P Bassand, MD, FESC, FACC
T Forrester, DM(Med) PhD MB BS West Indies MSc
B J Gersh, MBChB Cape Town DPhil Oxon FCP SA FRCP UK FACC
P Heering, MD FASN
M C Kew, MRCP UK MBBChe MD Witwatersrand PhD FCP SA FRCP London
C Masimirembwa, PhD Sweden DPhil BSc(Hons) Zimbabwe
G A Mensah, MD FACC FESC FAHA FACP FCP SA Hon
J B Nachega, MD Belgium MPH Baltimore MD USA DTM&H UK
M G N Pai, MD PhD
G Pillai, PhD (Pharmacology)
P J Schwartz, MD PhD
S Stewart, PhD Glasgow NFESC FAHA FCSANZ
R J Wilkinson, MBMBChe MA PhD DTM&H FRCP UK
D M Yellon, PhD FESC FRCP UK
MF Zwarenstein, MBChB Witwatersrand MSc PhD Sweden

Honorary Associate Professors:
R Dawson, MBChB Cape Town FCP SA CertPulm
L R Fairall, MBChB PhD Cape Town
T Gumbo, MD Zimbabwe
A P Kengne, MD PhD Sydney
S Lawn, BMedSci MB BS MD Nottingham MRCP UK DTM&H Dip HIV Med SA
R N van Zyl-Smit, MBChB MMed Cape Town FCP CertPulm DipHIVMan SA MRCP UK
K Wilkinson, MSc PhD
Honorary Research Associates:
L Acquah, MD MSc FACP USA
M Badri, BSc(Hons) MSc Statistics India MSc(Medicine) PhD Cape Town
A Binder, PhD(Biology) Germany
L Blauwet, MD Mayo Medical School
M Carrington, PhD
J R Hoffman, DPhil (Sociology) Oxon BA(Hons)
V Ives-Deliperi, PhD (Neuropsychology) Cape Town
M Khati, BSc BSc(Ed)(Hons) Cape Town MSc (Medicine) DIC DPhil UK
A Orren, MBChB Cape Town MD
L Semple, BSc(Hons) MSc PhD Cape Town
C Stek, MD Netherlands
H Struthers, MBA MSc BSc(Hons) BSc Witwatersrand
D Watkins, MD North Carolina
B Young-Gqamana, BSc PhD USA

Honorary Senior Lecturers:
B Allwood, MBChB Witwatersrand FCP SA
S M Andrews, MBChB Cape Town MCFP SA
C Arendse, MBChB FCP SA CertNephrol
T Boyles, BA MD MB BS MRCP DTM&H
R Burton, BSc PhD MB BS MRCOG FCP DipHIV CertID SA
J Butler, MBChB Pret FCP Neurology SA
E Danso, MBChB FCP SA
B Draper, MBChB Pret FCPHM SA
J M G du Toit, MBChB Cape Town FCP SA
D Epstein, MBChB Cape Town FCP SA CertGastro
N Finkelstein, Dip(Pharm) DCC Cape Town BSc(MedSci)(Hons)Pharm Stell PhD Rhodes
R J Freercks, MBChB FCP SA
T Gould, MBChB Witwatersrand FCP SA
L Geffen, MBChB Cape Town FCPF SA
M Gneccchi, MD PhD
A A Haripersad, MBChB FCP SA
C Kenyon, MBChB Cape Town FCP SA
J Kuehne, MBChB Cape Town MPhil (Applied Medical Ethics) Stell DipHIVMan SA
M A Latib, MBChB FCP CertCardiol SA
M H Letier, MBChB Cape Town FCP SA
S Mathee, MBChB Cape Town MMed (FamMed) Stell
A G Parrish, MBChB Cape Town FCP DA SA
M Pascoe, MBChB FCP SA
K Rebe, MBChB Cape Town FCP SA DTM&H
A Robins, MBChB Cape Town MD Witwatersrand DPM RCP London RCS England
G Smit, MBChB MMed (Med) Stell
A Tooke, MBChB Cape Town FCP SA
J Turner, MBChB Cape Town FCP SA
G Van Wyk, MBChB FCP SA
D Woolf, MBChB FCP SA

Visiting Professors:
G Cotter, MD FACC FESC Israel
K Steyn, MD MSc NED
L Thabane, PhD (Statistics) London MSc DipSci England BSc Lesotho
Clinical Research Fellow:
S Pandie, MBChB FCP CertCardiol SA

Senior Research Officers:
A Deffur, MBChB MMed (Int) DTG Pret CertID SA
J De Vries, DPhil Oxon BSc MSc Netherlands
ME Engel, BSc (Hons) MPH (Epid) PhD (Med) Cape Town
G Shaboodien, BSc (Hons) PhD Cape Town
G Theron, BSc(Hons) MSc PhD Cape Town

Research Officers:
M Setshed, MBChB UKZN FCP CertGastro SA MPH Cape Town PhD
M Van De Wall, BTech (ClinTech) Central Univ of Tech NatDipClinTech SA

Allergology and Clinical Immunology
Allergy Diagnostic and Clinical Research Unit, UCT Lung Institute, George Street, Mowbray E16 and Allergy Diagnostic and Clinical Research Unit, UCT Lung Institute

Professor and Head of Division:
P C Potter, MD Cape Town MBChB DCH FCP(Paed) SA BSc(Hons)(Immunology) FACAAI

Emeritus Professor:
E Weinberg, MBChB FCP SA FACAAI

Emeritus Associate Professor:
S R Ress, MBChB Pret FCP SA

Lecturer (Part-time):
R Leaver, MBChB FCP SA
J Holtzhausen, MBChB DipAllergy

Medical Officer:
D Hawarden, MBChB BSc DipMedTech

Research Medical Officers:
K Coovadia, MBChB DipAllergy
C Holmgren, MBChB
R Mistry, MB BS New Delhi DipAllergy DipHIVMan SA MBA Cape Town
A Le Roux, MBChB

Senior Research Officer:
D Berman, BA(Hons) DipMedTech(Lab)

Honorary Research Associate:
A Orren, MBChB MD Cape Town

Research Nurses:
S Baker, BSc Nursing MSc DipAsthma NAEP UK
G Poggenpoel, CNP BTech DipAsthma NAEP SA
D Van der Walt, CNP

Technical Staff:
B Fenemore
S Salie

**Cardiology**

*E17, New Groote Schuur Hospital*

**Helen and Morris Mauerberger Professor of Cardiology and Head:**
M Ntsekhe, BA MD *Columbia* FCP CertCardiol SA MPhil PhD *Cape Town* FACC

**Emeritus Professor:**
P J Commerford, MBChB *Cape Town* FCP SA FACC

**Emeritus Associate Professor:**
R N Scott Millar, MBBCh *Witwatersrand* FCP SA

**Clinical Research Fellow:**
S Pandie, MBChB FCP CertCardiol SA

**Honorary Professors:**
B Gersh, MBChB DPhil *Oxon* FCP SA FRCP UK
P J Schwartz, MD PhD

**Honorary Senior Lecturers:**
M J Abelson, MBChB *Witwatersrand* MRCP UK FCP SA
A M Latib, MBChB FCP CertCardiol SA

**Senior Lecturers Full-time:**
A Chin, MBChB FCP SA CertCardiol SA MPhil CEPS, CCDS *IBHRE*
B J Cupido, MBChB FCP CertCardiol SA

**Senior Lecturer Part-time:**
J E Stevens, MD FRCP UK

**Lecturer Part-time:**
M De Andrade, MBChB *Cape Town* MRCGP UK

**Senior Registrars:**
M Chhiba, MBChB FCP SA
K Moekeetsi, MBChB FCP SA
P Moses, MBChB FCP SA
N B A Ntusi, BSc(Hons) MBChB FCP SA MD *Cape Town* DPhil *Oxon*

**Clinical Haematology**

*Chris Barnard Building*

**Professor and Head:**
N Novitzky, PhD *Cape Town* FCP SA

**Senior Lecturers Full-time:**
C Du Toit, MBChB MMed (Int Med) *UOFS*
E Verburgh, MBChB MMed

**Senior Registrars:**
P De Witt, MBChB *Stell* MMed (CritCare) FCP SA
Chief Professional Nurses:
R Charles, RN Groote Schuur Hospital, Nico Malan College Cape Town
W Vries, RN Groote Schuur Hospital, Nico Malan College Cape Town

Clinical Trials Co-ordinator:
Helen Vermeulen RN

Haemophilia Nurse Co-ordinator Western Cape:
A L Cruickshank, RN Groote Schuur Hospital Cape Town

Medical Scientist:
S Mowla, PhD Cape Town

Chief Medical Technologist:
V Thomas, NDMT

Clinical Pharmacology
K Floor, Old Main Building, Groote Schuur Hospital

Professor and Head:
G Maartens, MBChB MMed Cape Town FCP SA DTM&H LSTMH UK

Professor:
K I Barnes, MBChB MMed Cape Town

Associate Professors:
M Blockman, MBChB BPharm MMed Cape Town
H McIleron, MBChB PhD Cape Town
P J Smith, BSc(Hons) PhD Cape Town

Honorary Professors:
C Masimirembwa, PhD Sweden BSc(Hons) DPhil Zimbabwe
J B Nachega, MD Louvain MPH Johns Hopkins MD USA DTM&H LSTMH UK PhD Cape Town
G Pillai, PhD (Pharm) MPharm BPharm

Senior Lecturers:
K Cohen, MBChB MSc (Epidemiol) MCFP DipHIVMan DipObst SA
L Weisner, PhD Cape Town

Senior Clinical Research Officer:
P Z Sinxadi, MBChB Cape Town, DA SA

Medicines Information Centre Pharmacists:
B S Chisholm, BPharm Rhodes
J Jones, BPharm Cape Town
A Swart, BSc (Pharm) Stell
A Uys, MSc (Pharm) BPharm PU for CHE

South African Medicines Formulary (SAMF) Pharmacist:
D Rossiter, DipPharm Pret MPharm PhD Medunsa

Principal Technical Officers:
A C Evans, NatDip(MedLabTech) CPUT
G A Gabriels, NatHighDip(AnalChem)(Hons) MSc Cape Town

Honorary Senior Lecturers:
N Finkelstein, Dip(Pharm) DCC Cape Town BSc(MedSci)(Hons) Pharm Stell PhD Rhodes
A Robins, MBChB Cape Town MD Witwatersrand DPM RCP London RCS Eng

Critical Care Medicine
New Groote Schuur Hospital

Head:
I A Joubert, MBBCh Witwatersrand DA FCA(CritCare) SA

Professor:
K Dheda, MBBCh Witwatersrand FCP SA FCCP PhD FRCP London

Associate Professor:
G M Ainslee, MBChB Cape Town FRCP UK

Emeritus Professors:
W L Michell, MBChB Cape Town DA FFA(CritCare) SA
P A Willcox, BSc(Hons) MBChB Birmingham FRCP UK

Associate Professors Part-time:
J Brink, MBChB Cape Town FCS(Cardiothoracic) SA
P L Semple, MBChB MMed PhD Cape Town FCS(Neurosurg) SA

Senior Lecturers Full-time:
G Calligaro, MBChB Cape Town BSc(Hons) Witwatersrand FCP SA
M Miller, MBChB Stell FCA SA CertCritCare (Anaes)
J Piercy, BSc(Hons) MB BS London FCA SA CertCritCare (Anaes)
R I Raine, MBChB FCP SA MMed Cape Town
G Symons, MBChB DipPEC Cape Town FCP (CertPulm) SA

Honorary Senior Lecturer Part-time:
R Dawson, MBChB Cape Town FCP SA CertPulm

Registrars in Pulmonology:
L Mottay, MBChB Natal FCP SA
Z Laher MBBCh Witwatersrand FCP SA

Senior Technology Staff:
G Strathie, BTech Durban
Y Wells, DipClinTech (Pulmonology/CriticalCare)

Dermatology
G23, New Groote Schuur Hospital

Associate Professor and Head:
N P Khumalo, MBChB UKZN FC Derm SA PhD Cape Town

Senior Lecturers Full-time:
C Hlela, MBChB MMed (Derm) UKZN FC Derm SA PhD Oxon
R Ngwanya, MBCh

**Senior Lecturers Part-time:**
I Browne, MBChB *UOFs* FC Derm *SA*
F Esmail, MD *Dar-es-Salaam* FCDerm *SA*
S J Jessop, MBChB *Cape Town* FCDerm *SA*
P Lawrence, MBChB MMed(Derm) *Cape Town*
R Lehloenyoa, BSc *Lesotho* MBChB Medunsa FCDerm *SA*
M P Moodley, MBChB *UKZN* (Summa cum laude) FCDerm *SA*
C Walker, MBChB FC Path Anat *Cape Town*

**Registrars Full-time:**
K Dladla, MBChB *Cape Town*
L Fick, MBChB *Stell*
T Isaacs, MBChB *Cape Town*

**Endocrinology and Diabetic Medicine**

*J47, Old Main Building, Groote Schuur Hospital*

**Professor and Head:**
N Levitt, MBChB MD *Cape Town*

**Associate Professor:**
I L Ross, MBChB *Stell* FCP CertEndocrinol&Metab *SA* PhD *Cape Town*

**Senior Lecturer Part-time:**
J A Dave, MBChB *Cape Town* FCP PhD CertEndocrinol&Metab *SA*
L Sandler, MBChB *Cape Town* MRCP *UK*

**Senior Registrar:**
B Peya, MBChB *Cape Town* FCP *SA*

**Clinical Research Fellow:**
B P R Mampane, MBChB Medunsa MMed Limpopo FCP *SA*

**Chief Research Officer Part-time:**
K Steyn, MD MBChB *Cape Town* MSc

**Research Officer Full-time:**
N Folb, MBChB *Cape Town* MRCGP

**Diabetic Nurse Educator:**
B C Majikela-Dlangamandla, DipGenNursing&Midwifery DipCommNursingScience BACur *UNISA*

**General Internal Medicine**

*G8, New Groote Schuur Hospital*

**Chief Specialist and Head:**
P Raubenheimer, MBChB FCP *SA*

**Senior Lecturers Full-time:**
T Credé, MBChB *Cape Town*
B Hodkinson, MBChB *Witwatersrand* FCP CertRheum S4 PhD
G Parolins, MBChB *Cape Town* FCP S4
M Sonderup, MBChB *Cape Town* FCP S4
G Symons, MBChB DipPEC *Cape Town* FCP CertPulm S4

**Senior Lecturers Part-time:**
A Aboo, MBChB *Cape Town* FCP S4
B Buchanan-Lee, BSc BA BChir MA MRCP
H Kajee, MBChB *Transkei* FCP S4
M Setshedi, MBChB *UKZN* FCP S4 MPhil MPH CertGastro PhD *Cape Town*

**Lecturer Part-time:**
W Latief, MBChB *Cape Town*

**Geriatric Medicine**
*L-51 Old Main Building, Groote Schuur Hospital*

The *Albertina and Walter Sisulu Institute of Ageing in Africa* conducts interdisciplinary research in Geriatric Medicine, Neurosciences, Neuropsychology, Old Age Psychiatry and Social Gerontology. Current research interests include physical, cognitive and social functioning in old age: quality of life; vascular risk factors and stroke; falls in older persons; quality of care; dementia and cognitive disorders; and social and economic well-being.

**William P Slater Chair of Geriatrics and Associate Professor:**
M I Combrinck, MBChB BSc(Med)(Hons) PhD *Cape Town* FCP S4 Neurology MRCP UK DTM&H *London*

**Senior Lecturer and Director of the Albertina and Walter Sisulu Institute of Ageing in Africa:**
S Z Kalula, BSc MBChB *Zambia* MMed MPhil PhD *Cape Town* FRCP UK

**Senior Lecturer Full-time:**
L de Villiers, MBChB *Cape Town* FCP S4

**Senior Lecturers Part-time:**
K Ross, MBChB *Stell FCP Cert Geriatrics S4*

**Honorary Associate Professors:**
J A Joska, MBChB MMed PhD *Cape Town* FC Psych S4
K G F Thomas, PhD (Clin Psych) *Arizona*

**Honorary Senior Lecturer:**
L Geffen, MBChB *Cape Town* FCFP S4

**Honorary Research Associate:**
J R Hoffman, DPhil(Sociology) *Oxon BA(Hons)*

**Hepatology**
*K-Floor, Old Main Building, Groote Schuur Hospital*

**Associate Professor and Head:**
C W N Spearman, MBChB MMed PhD *Cape Town* FCP S4

**Emeritus Professor:**
DEPARTMENTS IN THE FACULTY

S J Saunders, MBChB MD Cape Town FRCP UK FCP SA

Senior Lecturer Full-time:
M Sonderup, MBChB MMed Cape Town FCP SA

Honorary Research Professor:
M C Kew, MBChB PhD MD DSc Witwatersrand FCP FRS SA FRS London

Research Officer and Senior Lecturer Part-time:
M Setshedi, MBChB UKZN FCP SA MPhil MPH CertGastro PhD Cape Town

Infectious Diseases and HIV Medicine
G16 Floor, New Groote Schuur Hospital

Associate Professor and Head:
M Mendelson, BSc MB BS PhD Cantab FRCP London DTM&H

Professor Part-time:
G Maartens, MBChB MMed Cape Town FCP SA DTM&H

Associate Professors Part-time:
L-G Bekker, MBChB PhD Cape Town DCH DTM&H FCP SA
G Meintjes, MBChB FCP SA

Senior Lecturer Full-time:
S Dlamini, MBChB FCP CertID SA Phys

Honorary Professor Part-time:
R J Wilkinson, MA Cantab PhD BM BCh Oxon DTM&H FRCP London

Honorary Associate Professor Part-time:
S Lawn, BMedSci MB BS MRCP UK MD DTM&H DipHIV
K Wilkinson, MSc PhD

Honorary Senior Lecturers Part-time:
J Black, MBChB FCP Dip HIV Man SA
R Burton, BSc PhD MB BS MRCOG FCP DipHIV CertID SA
K Rebe, MBChB Cape Town FCP SA DTM&H

Medical Officers:
T Boyles, BA MD MB BS MRCP DTM&H Cert ID SA Phys
R Griesel, MBChB Pret

Senior Registrars:
P Ive, MBChB Witwatersrand FCP SA
S Wasserman, MBChB FCP SA MMed

Honorary Research Associate:
H Struthers, MBA BSc BSc(Hons) MSc Witwatersrand

Lipidology
Fifth Floor, Chris Barnard Building
Head:
D J Blom, MBChB MMed PhD Cape Town FCP SA

Medical Officers Part-time:
B C Brice, MBChB Cape Town
K H Wolmarans, MBChB Pret

Technical Officer:
Z Behardien, NatDipDiagRad SA

Trial Co-ordinator Part-time:
R Jooste, RN Carinus College, Victoria Hospital
R Taylor, RN Groote Schuur Hospital

Senior Secretary:
E Phillips

Departmental Assistant:
J Philander

Medical Gastroenterology
E23, New Groote Schuur Hospital

Professor and Head:
S R Thomson, ChM FRCS England & Edinburgh

Senior Lecturers Full-time:
S Hlatshwayo, BSc MBChB Cape Town HDipIntMed FCP CertGastro SA
D Levin, MBChB MBA FCP CertGastro SA
G Watermeyer, MBChB Cape Town FCP CertGastro SA

Senior Lecturers Part-time:
J E C Botha, MBChB Stell MPraxMed Pret
A K Cariem, MBChB Cape Town FCP SA
A H Girdwood, MBChB Witwatersrand FRCP Edinburgh
M N Rajabally, MBChB Witwatersrand FCP SA

Honorary Senior Lecturer:
D Epstein, MBChB Cape Town FCP CertGastro SA

Senior Registrars:
M S Gabriel, MBChB Cape Town FCP SA
R E Nel, MBChB Pret FCP SA

Research Fellow:
M Setshedi, MBChB UKZN FCP SA MPhil MPH CertGastro PhD Cape Town

Nephrology and Hypertension
E13, New Groote Schuur Hospital

Professor and Head:
B L Rayner, MBChB MMed Cape Town FCP SA
Emeritus Professor:
L H Opie, MD DPhil DSc(Med) FRCP DMed (Hon)

Emeritus Associate Professor:
C R Swanepoel, MBChB Cape Town MRCP FRCP UK

Honorary Professor:
P Heering, MD Fellow of the American Society of Nephrology

Honorary Senior Lecturers:
C Arendse, MBChB Cape Town FCP CertNeph SA
R Freercks, MBChB Phys MPhil Cape Town FCP CertNeph SA

Senior Lecturers Full-time:
Z Barday, MBChB FCP SA
I Okpechi, MB BS FWACP CertNephrol PhD
N Wearne, MBChB BMedSci(Hons) Sydney FCP SA CertNephrol PhD

Medical Officer Part-time:
Y Trinder (Research Co-ordinator), MBChB Birmingham

Senior Registrars:
B Davidson, Cape Town FCP SA
E Jones, MBBCh FCP PhD SA
J Naidoo, MBChB FCP SA

Control Technologist:
M Maree, NatDip Cape Town BTech CPUT

Social Worker:
L Hlakudi, BASocWork Fort Hare Pub Management (Hons) Stell

Neurology
E8, New Groote Schuur Hospital

Associate Professor and Head:
A Bryer, MBBCh Witwatersrand MMed PhD Cape Town FC Neurology FCP SA

Associate Professor:
J Heckman, MBChB Witwatersrand MMed PhD Cape Town FCP Neurology SA

Senior Lecturers Full-time:
K J Bateman, MBChB MRCP (UK) FC Neurology SA
E B Lee Pan, MBChB Cape Town MMed Neurol Stell
L M Tucker, MBChB Cape Town FCPNeurology SA MSc London PhD Cantab

Senior Lecturers Part-time:
C A de Jager, BSc(Hons) Natal PhD Cape Town
R W Eastman, MBChB Cape Town FRCP UK

Honorary Senior Lecturer:
J Butler, MBChB Pret FCP Neurology SA

Honorary Research Associate:
V Ives-Deliperi, PhD (Neuropsychology) Cape Town

**Senior Registrars:**
H Cross, MBChB Cape Town DipHIVMan SA MSc(Med)
A Stanley, MBChB Cape Town FCP SA

**Occupational Medicine**
*E16, Occupational Medicine Clinic, New Groote Schuur Hospital*

**Professor and Head:**
R I Ehrlich**, BBusSc MBChB PhD Cape Town DOH Witwatersrand FFCH FCPHM (OccMed) SA

**Professor:**
M F Jeebhay**, MBChB UKZN DOH MPhil Cape Town MPH (OccMed) PhD Michigan

[* Run jointly with Divisions of Pulmonology and Dermatology]
[** Jointly appointed with Department of Public Health and Family Medicine]

**Pulmonology**
*Respiratory Clinic, Ward E16, Groote Schuur Hospital and University of Cape Town Lung Institute*

**Professor and Head:**
K Dheda, MBChB Witwatersrand FCP SA PhD London FRCP UK

**Emeritus Professors:**
E D Bateman, MBChB MD Cape Town DCH FRCP UK
S R Benatar, MBChB DSc(Med) Cape Town FFA FRCP (Hon) FCP (Hon) SA

**Associate Professor:**
G M Ainslie, MBChB Cape Town FRCP UK

**Emeritus Associate Professor:**
P A Willcox, BSc(Hons) MBChB Birmingham FRCP UK

**Senior Lecturers:**
G Calligaro, MBChB Cape Town BSc(Hons) Witwatersrand FCP SA
R I Raine (Head: Respiratory Critical Care), MBChB MMed Cape Town FCP SA
G Symons, MBChB Dip PEC Cape Town FCP (CertPulm) SA (seconded to Pulmonology part-time)

**Honorary Senior Lecturers Full-time:**
R Dawson, MBChB Cape Town FCP (CertPulm) SA
L R Fairall, MBChB PhD Cape Town
R N van Zyl-Smit, MBChB MMed Cape Town FCP CertPulm DipHIVMan SA MRCP UK

**Lecturer Full-time:**
M E Bateman, MBChB Cape Town

**Honorary Research Associate:**
B Young-Gqamana, BSc PhD

**Senior Research Officer Full-time:**
G Theron, BSc(Hons) MSc PhD Cape Town
Senior Registrars:
Z Laher, MBChB Witwatersrand FCP SA
L Mottay, MBChB Natal FCP SA

Research Officers Full-time:
B Bam, DipClinTech(Pulm)
D Carter, DipNursing
R Cornick, MBChB MPhil Cape Town
B Draper, MBChB Pret MMed Cape Town FCPHM SA
J Etheridge, DipClinTech(Pulm/CritCare)
M Evreva, DipNursing
G Faris, AdvCertAdultEducation Cape Town General Nursing (Midwifery, Oncology, Psych)
D Georgeu, DipNursing
J Gershman, NDip(Pharmacy)
R Gillespie, BNursing (GenPsych) DipMidwifery DipIC BNursing(Hons)(Education and Community Health) MNursing
H J Golakai, BSc Zululand BSc(Hons) Cape Town MScMed Stell
B Green, DipNursing
J Holborn, DipNursing
S Hood, DipMedTech(Lab)
N James, B Tech Clinical Technology(Pulm)
L Kapa, DipClinTech(Pulm)
R Lehloenya, BSc MBChB FCDerm SA
L Lenders, BSc(Med)(Med) Cape Town
R Meldau, BSc(Med)(Hons) Cape Town
K Narunsky, MBChB Cape Town
M B Ngobese, DipClinTech(Pulm)
A Olkers, DipClinTech(Pulm)
J Philips, DipNursing
A Smith, DipNursing
N Tsutsu, DipClinTech (PulmCard)
V Timmermann, MSc Pret
K Uebel, BScMed MB BS Australia DCH DO MFamMed UOFS
Y Wells, DipClinTech (PulmCritCare)
C Wilson, DipNursing
C Whitelaw, NDip(Pharmacy)

Principal Scientific Officer:
L Semple, BSc(Hons) MSc PhD Cape Town

Research Officers Part-time:
B Allwood, MBChB Witwatersrand FCP SA
E Dommisse, MBChB Cape Town MRCGP DRCOG UK DCH SA
F Esmail, MD Dar-es-Salaam FCDerm SA
J Holtzhausen, MBChB Stell DCH SA BSc(Hons) Pharmacology

Rheumatology
J-Floor, Old Main Building, Groote Schuur Hospital

Professor and Head:
A A Kalla, MBChB MD Cape Town FCP SA

Senior Lecturers Full-time:
A Gcelu, MBChB Cape Town FCP SA
B Hodkinson, MBChB *Witwatersrand* FCP CertRheum SA

**Senior Lecturers Part-time:**
R Breeds, MBChB *Cape Town FCP SA*
S J Jessop, MBChB *Cape Town FCDerm SA*
I Joubert, MBChB *Stell*
B Sarembock, MBChB *Cape Town FCP SA*

**Senior Registrar:**
M N Abrahams, MBChB *Cape Town FCP SA*

**Staff in associated hospitals who teach undergraduate and postgraduate students**

**GEORGE HOSPITAL**
**Senior Lecturer and Head:**
T J Gould, MBChB MMed(IntMed) *Witwatersrand*

**KHAYELITSHA COMMUNITY CENTRE**
**Senior Lecturer Part-time:**
B Buchanan-Lee, BSc BA BChir MA MRCP UK

**Honorary Senior Lecturers Part-time:**
J Kuehne, MBChB *Cape Town* MPhil (Applied Medical Ethics) *Stell* DipHIVMan SA
S Mathee, MBChB *Cape Town* MMed (FamMed) *Stell*

**II MILITARY HOSPITAL**
**Senior Lecturer and Head:**
G Smit, MBChB MMed (Med) *Stell*

**Senior Lecturer Full-time:**
A Tooke, MBChB *Cape Town FCP SA*

**MITCHELL’S PLAIN HOSPITAL**
**Senior Lecturer and Head:**
G Van Wyk, MBChB FCP SA

**Senior Lecturer:**
A Parker, MBChB *Stell FCP SA*

**NEW SOMERSET HOSPITAL**
**Senior Lecturer and Head:**
Y Vallie, MBChB FCP SA

**Senior Lecturer Full-time:**
M S Moosa, MBChB *Natal FCP SA*

**Senior Lecturer Part-time:**
H Spilg, FCS SA
VICTORIA HOSPITAL

Senior Lecturer and Head:
N van der Schyff, MBChB *Cape Town* FCP *SA*

Senior Lecturers Full-time:
B Brink, (Head of Unit) FCS *SA*
C Cupido, MBChB *Cape Town* FCP *SA*

Senior Lecturers Part-time:
A Aboo, MBChB *Cape Town* FCP *SA*
H Allison, FCS *SA*
S Cullis, FCS *SA*
L de Villiers, MBChB *Cape Town* FCP *SA*
N Fuller, MBChB *Cape Town* FCP *SA*
K Goldberg, FCS *SA*
A Lachman, MBCh *Witwatersrand* FCP *SA*
K Michalowski, FCS *SA*
J Turner, MBChB *Cape Town* FCP *SA*
OBSTETRICS AND GYNAECOLOGY

H-Floor, Old Main Building, Groote Schuur Hospital

Professor and Head:
L A Denny, MBChB PhD Cape Town MMed FCOG SA

Professor and Deputy Head:
S J Dyer, MBChB Munich PhD Cape Town MMed FCOG SA

Professor Full-time:
S R Fawcus, MA (Hons) MB BS London MRCOG FRCOG UK

Emeritus Professors:
D A Davey, PhD London FRCOG
Z M van der Spuy, MBChB Stell PhD London FRCOG FCOG SA

Honorary Professors:
C A Matthews, MD Charlottesville
D J Ncayiyana, MD Groningen FACOG
R Parkar, MB BS Mysore MMed Nairobi
P Steer, MB BS London MRCS LRCP MD MRCOG FRCOG
W Utian, MBBCh Witwatersrand MD PhD DSc(Med) Cape Town

Honorary Associate Professor:
S W Lindow, MBChB Sheffield MMed MD FRCOG FCOG SA

Emeritus Associate Professors:
E J Coetzee, MBChB Cape Town FRCOG FCOG SA
A Kent, MBChB MPhil Cape Town FRCOG
H A van Coeverden de Groot, MBChB Cape Town FRCOG (Community Obstetrics)

Associate Professor Full-time:
J Anthony, MBChB Cape Town FCOG SA MPhil Stell

Chief Specialist Level Two Service and Head New Somerset Hospital:
G A Petro, MBChB Cape Town FCOG SA

Senior Lecturers Full-time:
T Adams, MBChB Cape Town FCOG SA Subspeciality Gynaecological Oncology
T A Horak, MBChB Stell FCOG SA MMed (O&G)
S Jeffreys, MBChB Stell FCOG SA Subspeciality Urogynaecology (RCOG)
L A Kenneth, MBChB UKZN FCOG SA MMed (O&G)
T Matinde, MBChB Zimbabwe DObst COG FCOG SA FRANZCOG FICS
M Matjila, BSc MBChB UKZN FCOG SA
N H Mbatani, MBChB Medunsa FCOG SA
M Patel, MBChB Cape Town FCOG SA MMed (O&G) Subspeciality Reproductive Medicine
V E M Perrott, MBChB Cape Town DFFP MRCGP
L Schoeman, MBChB Cape Town MMed FCOG SA
V Stefan, MedicDip PhD Bucharest
Senior Lecturers Part-time:
C M C Dehaeck, MBChB Stell FCOG SA
P R de Jong, MBChB Pret MMed Cape Town FCOG SA MRCOG
A S Lachmann, MBBCN Witwatersrand MD FCP SA
J O Olarogun, MB BS Ilorin DipObst FCOG SA MMed Cape Town
L J Rogers, MBChB Cape Town MMed FCOG SA Subspeciality Gynae-Oncology (RCOG)

Lecturers Full-time:
S Allie, MBChB Cape Town FCOG SA
K J Brouard, MBChB Cape Town FCOG SA
C Gordon, MBChB Cape Town D Kennedy, MBChB Stell FCOG SA MMed (O&G)
L Walmsley, MBChB Pret FCOG SA

Lecturers Part-time:
P G Barnard, MBChB Cape Town FCOG SA FRCOG
U Botha, MBChB Stell MMed Cape Town FCOG SA
G Breeds, MBChB Cape Town FCOG SA
M Cloete, MBChB UOFS FCOG SA MMed (O&G)
J P F Dalmeyer, MBChB Pret FCOG SA
A R Dhansay, BSc UDW MBChB UKZN FCOG SA
D Dumbrill, MBChB Cape Town FCOG MRCOG DA SA
G Groenewald, MBChB Stell FCOG SA
B R Howard, MBChB Cape Town FCOG SA
L Jansen, MBChB Cape Town FCOG SA
M Kleyne, MBChB Cape Town FCOG SA
C Nel, MBChB Cape Town FCOG SA
M S Puzey, MBChB MMed Cape Town FCOG SA
J R Robinson, MB BS Perth MRACOG FCOG SA MRCOG
J Rowlinson, MBBCN Witwatersrand
S W Sandler, MBChB Cape Town FRCOG MA Stell
S Shanahan, MBBCN Witwatersrand FCOG SA
R Sheldon, BA RN M Wasserman MSocSc UOFS DHS San Francisco
H Wright, MBChB Cape Town
C Zeelenberg, PN PGDN
P Zinn, MBBCN Witwatersrand MRCOG London MMed (O&G)

Fellows Full-time:
K Govender, MBChB UKZN FCOG SA
N Nakintu, MBChB Makerere MMed (O&G)
D G D Richards, MBChB Stell FCOG SA MMed
R Saidu, MB BS Nigeria FMCOG MPH

Fellow Part-time:
TG Deo, MBChB Medunsa FCOG SA

Honorary Senior Lecturers:
M Mbenge, (Dora Nginza Hospital) MBChB Pret MMed FCOG SA
C P Nel, MBChB Cape Town MRCOG, FRANZCOG FRCOG
E van Wyk, (HoD Wynberg Military Hospital) MBChB Cape Town FCOG SA
Honorary Lecturers:
F Abdurahman (Wynberg Military Hospital) MBChB Cape Town FCOG SA
S MacPherson (Wynberg Military Hospital) MBChB Cape Town FCOG SA

Medical Officers Full-time:
A Boutall, MBChB Stell A Ciesielski, MBChB Cape Town
S N Constantatos, MBChB Cape Town
L Dietrich, MBChB Cape Town
M F Hendricks, MBChB Stell
F Loggenberg, MBChB UOFS D Nage, MBChB Medunsa
B Schilder, MBChB Cape Town

Medical Officers Part-time:
R D Boa, MBBCh Witwatersrand
M De Souza, MBChB Cape Town
C Floweday, MBChB Cape Town
L S Matthews (Ultrasound), MBChB MD Cape Town
J McInroy, MBChB Cape Town
M E Moss (Family Planning) MBChB Manchester DCH (Head of Family Planning and Reproductive Health)
L Muller, MBChB PhD Stell
K Soeters, MD Leiden
M Stein, MBBCh Witwatersrand
PAEDIATRICS AND CHILD HEALTH

ICH Building, Red Cross War Memorial Children’s Hospital, Rondebosch

Professor and Head:
H J Zar, MBChB Witwatersrand FAAP BCPaed American University (Washington) BCPaedPulm
PhD Cape Town FCPaed SA

Professors:
A Argent, MBChB MMed (Paed) Witwatersrand MD (Paed) Cape Town DCH FCPaed
CertCritCare SA FRCPCH UK
J Wilmshurst, MB BS London MRCP UK FCPaed SA

Emeritus Professors:
D W Beatty, MBChB MD Cape Town FCP SA
F Bonnici, MBChB MMed Cape Town FCP SA ADE
M A Kibel, MBChB FRCP Edinburgh DCH RCP & S UK

Honorary Professors:
Sir D M B Hall, MB BS UK BSc (Pharm) MRCS LRCP MRCP UK FRCP FRCPH
S M Hall, MB BS BS(Pharm) MSc(SocMed) London MFPH FFPH FRCP ERCPCH
M Levin, MBChB Witwatersrand MRCP(Paed) FRCP UK PhD London Foundation Fellow
Medical Science
DSc Cape Town
N Silverman, MBChB DSc Witwatersrand MD UCSF
D Tibboel, MD PhD

Associate Professors:
M Coetzee, BScSci(Hons) Bloemfontein DipPaedNurs PhD Cape Town
A Davidon, MBChB Cape Town DCH FCP CertMedOnc (Paed) SA
B S Eley, BSc(Hons)(MedBiochem) MBChB Cape Town FCP SA
W Hanekom, MBChB Stell DCH FCP(Paed) SA
M Harrison, MBChB Cape Town MRCP FRCPCH UK
M Hendricks, MBChB Cape Town DipPEC DCH FCPPaed CMO (Paed) SA
A Horn, MBChB Cape Town FCPaed DCH CertNeon SA MRCP (Paed) UK
M N Levin, MBChB MMed Cape Town FCPaed DipAllerg SA PhD
M McCulloch, MBChB Witwatersrand DTM&H FRCPCH London DCH FCPaed SA
B Morrow, BSc (Physio) PhD Cape Town
A Westwood, MBChB MD MMed (Paed) Cape Town FCP SA MRCP UK

Emeritus Associate Professors:
M D Bowie, BSc UKZN MBChB MD Cape Town FRCP Edinburgh DCH RCP&S UK
V C Harrison, MBChB Cape Town MRCP FRCPCH UK
C D Karabus, MBChB MMed (Paed) Cape Town DCH RCP&S FRCP Edinburgh FRCP London
M Klein, MBChB PhD Cape Town, FCP SA
A F Malan, MBChB MMed (Paed) MD Cape Town Dip(O&G) SA
M Mann, MBChB PhD MMed (Paed) MMed (Nuclear Med) Cape Town
J Weggelinkhuizen, MBChB MMed (Paed) FCP SA
D L Woods, MBChB MD Cape Town FRCP DCH RCP&S UK
### Senior Lecturers Full-time:

<table>
<thead>
<tr>
<th>Name</th>
<th>Qualifications</th>
</tr>
</thead>
<tbody>
<tr>
<td>J Ahrens, MBChB</td>
<td>Cape Town DA DCH FCPaed CIC(Paed) SA</td>
</tr>
<tr>
<td>H A Buys, MBChB</td>
<td>Zimbabwe LRCP LRCS Edinburgh MRCP UK FCP SA</td>
</tr>
<tr>
<td>A Brink, MBChB</td>
<td>Pret MMed (Nuclear Med) Cape Town FCNP DCH SA</td>
</tr>
<tr>
<td>M Carrihill, MBChB</td>
<td>(Paed) MPhil Cape Town FCPaed CertEndo&amp;Metab SA (PaedEndo)</td>
</tr>
<tr>
<td>R De Decker, MBChB</td>
<td>DCH London FCPaed CertMedGenetics (Paed) SA</td>
</tr>
<tr>
<td>S V Delport, MBChB</td>
<td>MMed (Paed) BSc (Hons) Epidem Cape Town FCP DCH SA</td>
</tr>
<tr>
<td>K Donald, MBChB</td>
<td>Cape Town DCH FCPaed SA MRCPCH UK</td>
</tr>
<tr>
<td>R Dunkley, MBChB</td>
<td>Cape Town FCPaed SA</td>
</tr>
<tr>
<td>P Gajjar, MBChB</td>
<td>DCP CertPaedNephrol</td>
</tr>
<tr>
<td>M G Hendricks, MBChB</td>
<td>Cape Town DCH Dip PEC FCPaed CertMedOnc (Paed) SA</td>
</tr>
<tr>
<td>C Hlela, MBChB</td>
<td>FCDerm MSc GHS MMed (Derm) PhD Oxon</td>
</tr>
<tr>
<td>Y Joolay, MBChB</td>
<td>Stell FCPaed SA</td>
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<tr>
<td>S M Kroon, MBChB</td>
<td>Cape Town FCPaed SA DTM &amp; H London MRCP UK</td>
</tr>
<tr>
<td>R de Lacey, MBChB</td>
<td>MMed (Paed) Cape Town</td>
</tr>
<tr>
<td>L Linley, MBChB</td>
<td>Cape Town FCPaed SA</td>
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<tr>
<td>G H Moller, MBChB</td>
<td>Cape Town FCPaed DCH SA</td>
</tr>
<tr>
<td>R Muloija, MBChB</td>
<td>UKZN DCH FCPaed SA MSc LSHTM</td>
</tr>
<tr>
<td>A P Ndondo, MBChB</td>
<td>Medunsa FCPaed SA</td>
</tr>
<tr>
<td>P Nourse, MBChB</td>
<td>MMed Cape Town FCP SA CertPaedNephrol</td>
</tr>
<tr>
<td>J C Nuttal, MBChB</td>
<td>Cape Town DipObst DCH FCPaed SA DTM&amp;W Witwatersrand</td>
</tr>
<tr>
<td>R Petersen, MBChB</td>
<td>FCP (Paed) Cape Town DHC SA</td>
</tr>
<tr>
<td>S Raban, MBChB</td>
<td>Cape Town DCH DipHIVMan FCPaeds CertNeon SA</td>
</tr>
<tr>
<td>M T Richards, MBChB</td>
<td>CertDevPaed Cape Town DCH FCPaed SA</td>
</tr>
<tr>
<td>B Rossouw, MBChB</td>
<td>DipTropMed (Paed) MSc (Sports Medicine) Pret CertCritCare SA</td>
</tr>
<tr>
<td>P Roux, MBChB</td>
<td>MD Cape Town MPhil (Bioethics) FCP DCH SA</td>
</tr>
<tr>
<td>C Scott, MBChB</td>
<td>Cape Town FCPaed SA</td>
</tr>
<tr>
<td>J Shea, MPHE</td>
<td></td>
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<tr>
<td>A Spitaels, MBChB</td>
<td>Cape Town DCH FCPaed SA</td>
</tr>
<tr>
<td>L Tooko, MBChB</td>
<td>Cape Town FCPaed MMed (Paed) DipObst Dip(PEC) SA</td>
</tr>
<tr>
<td>A L van Eyssen, MBChB</td>
<td>Stell DCH FCPaed CertMedOnc (Paed) SA</td>
</tr>
<tr>
<td>A Vanker, MBChB</td>
<td>MMed Stell FCPaed CertPulmPaed SA</td>
</tr>
<tr>
<td>M Zampoli, MBChB</td>
<td>Witwatersrand FCPaed (Paed)</td>
</tr>
</tbody>
</table>

### Lecturers Full-time:

<table>
<thead>
<tr>
<th>Name</th>
<th>Qualifications</th>
</tr>
</thead>
<tbody>
<tr>
<td>H Mohamed, MBChB</td>
<td>MMed (Public Health) Cape Town</td>
</tr>
<tr>
<td>S Moyo, MBChB</td>
<td>MPH Cape Town</td>
</tr>
<tr>
<td>M Tameris, MBChB</td>
<td>Cape Town</td>
</tr>
<tr>
<td>P Wicomb, MBChB</td>
<td>Cape Town DCH FCPaed SA</td>
</tr>
</tbody>
</table>

### Senior Lecturers Part-time:

<table>
<thead>
<tr>
<th>Name</th>
<th>Qualifications</th>
</tr>
</thead>
<tbody>
<tr>
<td>E Goddard, MBChB</td>
<td>BSc(Med)(Hons) MMed (Paed) PhD Cape Town</td>
</tr>
<tr>
<td>J E Mostert, MBChB</td>
<td>Stell MMed (Paed) Pret</td>
</tr>
<tr>
<td>L Movsowitz, MBChB</td>
<td>Cape Town MFGP DCH FCP SA</td>
</tr>
<tr>
<td>G Riordan, MBChB</td>
<td>Cape Town DCH MMed (Paed) FCP SA</td>
</tr>
<tr>
<td>J H Vermeulen, MBChB</td>
<td>Stell DCH FCP SA</td>
</tr>
<tr>
<td>S Zieff, MBChB</td>
<td>MMed (Paed) Cape Town</td>
</tr>
</tbody>
</table>

### Lecturers Part-time:

<table>
<thead>
<tr>
<th>Name</th>
<th>Qualifications</th>
</tr>
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<tbody>
<tr>
<td>S N Furman, MBChB</td>
<td>Cape Town MFGP SA</td>
</tr>
<tr>
<td>W R Mathiassen, MBChB</td>
<td>Cape Town MRCP UK</td>
</tr>
<tr>
<td>C Rainier-Pope, MBChB</td>
<td>MMed Cape Town DCH RCP&amp;S London</td>
</tr>
<tr>
<td>J C Roberts, BA(Hons)</td>
<td>(Biochem) MBBCh BAO Dublin DCH Cape Town</td>
</tr>
</tbody>
</table>
DEPARTMENTS IN THE FACULTY

P J White, MBChB Cape Town FCP DCH SA

Honorary Senior Lecturers:
J Alt, MBChB Cape Town DCH SA ATLS APLS FCP
N J Bergman, MBChB Cape Town DCH Sweden MPH MD Zimbabwe
G Boon, MBChB Cape Town FCP SA
W Breytenbach, MBChB Stell FCP SA
R Dippenaar, MBChB Cape Town DCH MMed Stell CertNeon SA Adv Paed Life Support USA
F Goosen, MBChB Cape Town DCH FCP (Paed) SA
L Henley, BSocSci MSocSci PhD MPhil (Bioethics) AdvDipPsychSocWrk Cape Town
C Hugo-Hamman, MBChB Cape Town MA USA DCH FCP SA
L V Jedeikin, MBChB Cape Town FCP SA
M L Levy, MBChB Cape Town FCP SA
V Magasiner, MSc (Physio) Cape Town
P J Sinclair, MBChB Cape Town DCH FCP SA

Honorary Lecturers:
T Kerbelker, MBChB ATLS ACLS BLS PALS Cape Town DCH FCPaed SA DipHIVMan Griffiths Neuro DipAllergy CertPaedRheum Australia
M A Meiring, MBChB Pret FCPaed SA MMed (Paed) Witwatersrand
V Ramanjam, MBChB Cape Town DCH FCP SA
G Schermbrucker, MBChB Cape Town DCH FCP SA
D Van Der Merwe, MBChB Cape Town FCPaeds Griffiths Neuro CertEndocr ATLS ACLS APLS SA MMed (Paed) Stell APLS North Ireland
A L Watkins, MSc (Allergy) BSc(Hons) (Nutrition and Dietetics) MA Cantab (Social and Political Science) UK

Allergology (Paediatric)

Head:
M Levin MBChB Cape Town FC Paed MMed (Paed) DipAllergy SA PhD

Honorary Senior Lecturers:
C Gray, MBChB Cape Town MRCPCH London MSc Surrey DipAllergy Southampton DipPaedNutr
S Karabus, MBChB Cape Town DCH Dip in Allergology FC Paed SA MRCPCH UK

Associated Paediatric Disciplines

Head:
S Rahim, BSc (Physio) Cape Town

Physiotherapy Department:
S13 Ground Floor OPD, Red Cross Children’s Hospital, Rondebosch
(Sameer.rahim@uct.ac.za or Sameer.rahim@westerncape.gov.za) 021 658 5033/5130

Head:
S Rahim, BSc (Physio) Cape Town

Occupational Therapy Department:
S10 Ground Floor OPD, Red Cross Children’s Hospital, Rondebosch
(Mereille.pursad@westerncape.gov.za) 021 658 5038/5609
Head:
M Pursad, B(OccTher) Stell

Speech and Language Therapy Department:
S24 1st Floor OPD, Red Cross Children’s Hospital, Rondebosch
(Lezanne.leroux@westerncape.gov.za) 021 658 5264

Head:
L le Roux, B(Speech and Audiology) Stell

Nutrition and Dietetics Department:
S14 Ground Floor OPD, Red Cross Children’s Hospital, Rondebosch
(Shihaam.cader@westerncape.gov.za) 021 658 5471

Head:
S Cader, BSc(Med)(Hons) (Nutrition and Dietetics) Cape Town

Audiology Department:
S24 1st Floor OPD, Red Cross Children’s Hospital, Rondebosch
(colleen.cox@westerncape.gov.za ) 021 658 5406

Head:
C Cox, BSc (Audiology) Cape Town

Social Worker Department:
B8 B Floor Main Hospital, Red Cross Children’s Hospital, Rondebosch
(andre.pieters2@westerncape.gov.za) 021 658 5273

Head:
A Pieters, Diploma Social Work (4) UWC

Child and Adolescent Psychiatry
[See Department of Psychiatry and Mental Health.]

Child Nursing Practice

Associate Professor:
M Coetzee, BSoSc(Hons) UFS DipPaedNurs PhD Cape Town

Senior Lecturers Full-time:
H Barlow, DipNursAdmin MCur Stell AUDNE Cape Town RN RM CNN Groote Schuur Hospital

Lecturers Part-time:
C Davis, BNurs (Child) DipPICU England
I Hendry, BN RPaedN Cape Town ForensicNurs Bloemfontein

Practice Development and Research Staff:
C Bonaconsa, BNurs Stell RN
A Leonard, MSc (Nurs) Cape Town RN

Programme Facilitator:
J Vos, DipNurs RN
Cardiology (Paediatric)

Head:
J Lawrenson, MBBCh Witwatersrand MMed Cape Town FCP SA

Senior Lecturers Full-time:
G Comitis, MBChB Cape Town DCH DipAnaes FCPaed SA
R De Decker, MSc MBChB Cape Town DCH London CertMedGenet (Paed) FCPaed SA

Senior Lecturer Part-time:
H Pribut, MBChB Cape Town FCPaedSA

Honorary Senior Lecturer:
C Hugo-Hamman MA Oxon MBChB Cape Town DCH London FCPaed SA

Child Health Unit

Acting Head:
J Shea, MPHE

Emeritus Professor:
M A Kibel, MB BCh FRCP Edinburgh DCH RCP&S UK

Senior Lecturer:
J Shea, MPHE

Critical Care (Paediatric)

Professor and Head:
A Argent, MBBCh MMed (Paed) Witwatersrand MD (Paed) Cape Town DCH FCPaed CertCritCare SA FRCPCH UK

Associate Professor Full-time:
M McCulloch, MBChB Witwatersrand DCH FCPaed SA

Senior Lecturers Full-time:
J Ahrens, MBChB Cape Town DA DCH FCPaed CertCritCare SA
S Salie, MBChB Cape Town DCH London FCPaed CertCritCare SA

Dermatology (Paediatric)

Associate Professor and Head:
C Hlela, MBChB FCDerm MSc GHS MMed (Derm) PhD Oxon

Developmental Paediatrics

Head:
K Donald, MBChB MPhil (PaedNeurol) Cape Town DCH FCPaed CertPaedNeuro SA MRCPCH UK

Senior Lecturer Full-time:
R Petersen, MBChB Cape Town DCH FCPaed CertDevPaed SA
Senior Lecturers Part-time:
M Richards, MBChB Cape Town DCH FCPaed CertDevPaed SA
C Thompson, MBChB Cape Town MD SA
V Ramanjam, MBChB Cape Town DCH FCPaed CertDevPaed SA
S Ackermann, MBChB Pretoria FCPaed CertPaedNeurol) SA

Lecturers Part-time:
C Davies, MBChB Cape Town DCH FCPaed SA
S C van Bever Donker, ARTS Lieben DCH SA
W van der Meulen, MBChB
S Warner, MBChB Cape Town DCH SA

**Endocrinology (Paediatric)**

Head:
S V Delport, MBChB MMed (Paed) BSc(Hons) (Epidem) Cape Town FCP DCH SA

Senior Lecturers Full-time:
M Carrihill, MBChB (Paed) MPhil Cape Town FCPaed CertEndo&Metab SA (PaedEndo)
A Spitaels, MBChB Cape Town DCH FCPaed SA

**Gastroenterology (Paediatric)**

Head:
E Goddard, BSc(Hons) MSc (Med) MBChB PhD MMed (Paed) Cape Town FCPaed
CertPaedGastro SA

Senior Lecturer Full-time:
R de Lacy, MBChB Cape Town FCPaed CertPaedGastro SA

Senior Lecturer Part-time:
M Ledger, MBChB BSc (Physiology) BSc(Med)(Hons) Cape Town DCH FCPaed SA

Part-time Lecturer:
R A Brown, MBChB Cape Town MPhil (Ancient Cultures) Stell DCH FCS SA FRCS Edinburgh

**General Paediatrics**

Professor and Head:
H J Zar, MBBCh Witwatersrand FAAP BCPaed American University (Washington) BCPaedPulm
PhD Cape Town FCPaed SA

Associate Professors:
A Westwood, MBChB MD MMed (Paed) Cape Town FCP SA MRCP UK
M Hendricks, MBChB Cape Town DipPEC DCH FCPaed CMO (Paed) SA

Senior Lecturers Full-time:
H A Buys, MBChB Zimbabwe LRPC LRCS Edinburgh MRCP UK FCP SA
L Cooke MBChB, FCPaed
R Dunkley, MBChB Cape Town FCPaed SA
R Muloiwa, MBChB UKZN DCH FCPaed SA MSc LSHTM
M Richards, MBChB DCH FCPaed CertDevPaed SA
C Scott, MBChB Cape Town FCPaed SA

Head – Groote Schuur Hospital:
P Roux, MBChB MD Cape Town MPhil (Bioethics) FCP DCH SA

Honorary Lecturer:
G Schermbrucker, MBChB Cape Town DCH FCP SA

Haematology/Oncology (Paediatric)

Associate Professor and Head:
A Davidson, MBChB MPhil Cape Town DCH FCPaed CertMedOnc (Paeds) SA

Senior Lecturers Full-time:
M G Hendricks, MBChB Cape Town DCH Dip PEC FCPaed CertMedOnc (Paeds) SA
A L van Eyssen, MBChB Stell DCH FCPaed CertMedOnc (Paeds) SA

Infectious Diseases (Paediatric)

Associate Professor and Head:
B S Eley, BSc(Hons) (MedBiochem) MBChB Cape Town FCP SA

Senior Lecturer Full-time:
J C Nuttall, MBChB Cape Town DipObst DCH FCPaed SA DTM&H Witwatersrand

Medicine (Paediatric)

Professor and Head:
H J Zar, MBBCh Witwatersrand FAAP BCPaed American University (Washington) BCPaed Pulmonology PhD
Cape Town FCPaed SA

Neonatology

Head:
M C Harrison, MBChB Cape Town MRCP FRCPCH UK

Emeritus Associate Professors:
V C Harrison, MBChB Cape Town MRCP FRCPCH UK
A F Malan, MBChB MMed MD Cape Town DipO&G SA
D L Woods, MBChB MD Cape Town FRCP DCH RCP&S UK

Senior Lecturers Full-time:
A Horn, MBChB Cape Town FCPaed DCH Cert Neon SA MRCP(Paed) UK
Y Joolay, MBChB Stell FCPaed SA
S M Kroon, MBChB Cape Town FCPaed SA DTM&H London MRCP UK
L Linley, MBChB Cape Town FCPaed SA
G H Moller, MBChB Cape Town FCPaed DCH SA
L Tooke, MBChB Cape Town FCPaed MMed (Paed) Dip Obst DipPEC SA

Lecturers Full-time:
M T Ismail, MBChB Cape Town DCH DipHIV SA
A M van Niekerk, MBBCh Witwatersrand DCH FCPPaed CertPaedCardiol SA
Lecturers Part-time:
J C G Dyssell, MBChB Cape Town MMed (Paed) Witwatersrand DCH FCPaed SA
D H Greenfield, MBChB MPhil MCH Cape Town DCH DPH DTM&H Witwatersrand
M C Thompson, MBChB DCH SA MD Cape Town

Nephrology (Paediatric)

Head:
P Gajjar, MBChB DCH FCP CertPaedNephrol

Senior Lecturer Full-time:
P Nourse, MBChB MMed Cape Town FCP SA CertPaedNephrol

Neurology (Paediatric)

Professor and Head:
J Wilmshurst, MB BS London MRCP UK FCPaed SA MD Cape Town

Senior Lecturer Full-time:
A P Ndondo, MBChB Medunsa FCPaed CertPaedNeuro SA

Senior Lecturers Part-time:
V Kander, MTech (Neurophysiol) Bloemfontein
G Riordan, MBChB Cape Town DCH MMed (Paed) FCPaed SA
B Schlegel, MBChB Cape Town FCPaed SA
K Walker, MBChB Cape Town DCH SA

Neuropsychology (Paediatric)

Lecturers Part-time:
J Bean, DipPharm CPUT MA (ClinPsych) Stell

Pulmonology (Paediatric)

Head:
H J Zar, MBBCh Witwatersrand FAAP BCPaed American University (Washington) BCPaed Pulmonology PhD Cape Town FCPaed SA

Senior Lecturers Full-time:
A Vanker, MBChB MMed Stell FCPaed CertPulmPaed SA
M Zampoli, MBChB Cape Town DCH FCPPaed CertPulmPaed SA

Rheumatology (Paediatric)

Head:
C Scott, MBChB Cape Town FCPaed SA
PATHOLOGY

Anatomical Pathology
Level 4, Falmouth Building North/D7, Groote Schuur Hospital/1st Floor ICH Building, Red Cross Children’s Hospital

Werner & Beit Professor and Head:
D Govender, MBChB MMed (AnatPath) PhD UKZN FCPath (Anat) SA FCPath ECSA FRCPath London

Associate Professors Full-time:
R Naidoo, BSc(Hons) UDW MMedSc PhD UKZN
H C Wainwright, MBChB Cape Town FCPath (Anat) SA

Senior Lecturers Full-time:
M S Duffield, MBChB Rhodes LRCP&S Edinburgh & Glasgow MMed Cape Town MRCPath
M L Locketz, MBChB MMed Cape Town FCPath (Anat) SA
K Pillay, MBChB UKZN MMed Cape Town FCPath (Anat) SA FRCPath London

Honorary Senior Lecturer:
G M Learmonth, MBChB BAO Galway FCPath (Anat) SA MIAC

Lecturers Full-time:
M J Otto, MBChB UFS FCPath (Anat) SA
R Roberts, MBChB MMed Cape Town FCPath (Anat) SA
R Sookhayi, MBChB Witwatersrand FCPath (Anat) SA
H-T Wu, MBChB Witwatersrand MMed Cape Town FCPath (Anat) SA

Assistant Lecturers/Registrars:
D Chetty, MBChB Witwatersrand
J de Jager, MBChB Stell
J Egan, BSc (Pharm) MBChB Cape Town
B Kosi, MBChB Cape Town
S Likumbo, MB BS Malawi
S C Madlala, MBChB Limpopo
B Price, BSc(Hons), PhD UKZN, MBChB Witwatersrand
T N Rikhotso, MBChB Medunsa
G Skead, MBChB Pret
M Theuri, MBChB Nairobi
A Wessels, MBChB UFS
D Zgambo, MB BS Malawi

Chief Scientific Officer:
R Kriel, NatDip(MedTech) CPUT Dip(ProfPhotography) PostGradDip(BusManagement) UKZN

Laboratory Managers (NHLS):
C Bilobrk (Histopathology-Groote Schuur Hospital), NatDip(MedTech) CPUT
B Bollaert (Cytopathology-Groote Schuur Hospital), NatDip(MedTech) HigherDip(MedTech) CPUT
C Jackson (Histopathology-Red Cross Hospital), NatDip(MedTech) HigherDip(MedTech) CPUT
Chemical Pathology
Level 6, Entrance 4, Falmouth Building

Professor and Head:
AD Marais, MBChB Cape Town FCP SA

Emeritus Professor:
E H Harley, PhD MD London FRCPath UK

Senior Lecturers:
J A King (Principal Medical Scientist), BSc(Hons) MSc PhD Cape Town
H Vreede (Senior Specialist), MBChB MMed Cape Town

Lecturers Full-time:
P Fortgens, FCPath SA Chem Path PhD UKZN
F Leisegang (Senior Medical Scientist), BSc(Hons) UKZN
F Omar (Specialist), MBChB Stell MMed Cape Town FCPath SA
G F Van der Watt (Specialist), MBChB Pret MMed Cape Town FCPath SA

Honorary Professors and Lecturers:
I Jialal, MBChB UKZN MD FCPath SA DABCCM
T S Pillay, MBChB UKZN PhD Cambridge MRCPath UK
D B Sacks, MBChB Cape Town (American Board of Internal Medicine) (American Board of Pathology)

Lecturer:
D M Blackhurst, PhD Cape Town

Forensic Medicine
Level 1, Entrance 2, Falmouth Building

Professor and Head:
L J Martin, MBBCh Witwatersrand MMed Path (Foren) Cape Town DipForMed FCForPath SA

Honorary Associate Professors and Lecturers Part-time:
R Kaschula, MMed Path Cape Town FRC Path UK
R Hewlett, MBChB PhD Cape Town FRC Path (Neuropathology)

Senior Lecturers Full-time:
G M Kirk, MBBCh Witwatersrand DipForMed FCForPath SA
L Liebenberg, MBChB Stell MMed Path (Foren) Cape Town DipForMed SA
Y van der Heyde, BScMicro MBChB MMed Path (Foren) Cape Town DipForMed SA
M Heyns, BSc Hons (cum laude) MSc (cum laude) PhD Hons BBA (cum laude) MBA (cum laude) Stell
PGCHET QUB

Lecturers Full-time:
M Date-Chong, MBChB Cape Town DipForMed Path FCForPath SA
S Maistry, MBChB Medunsa BSc Witwatersrand BScHons DipForMed FCForPath SA
I J Molefe, MBChB Cape Town DipForMed Path FCForPath SA
S Mfolozi, MBChB Cape Town DipForMed Path FCForPath SA

Assistant Lecturer/Registrar:
I Alli, MB BS  
*Mysore* DipForMed Clin/Path  
SA Cert Medical Law  
*UNISA*

**Registrar:**
I Möller, MBChB  
Pret  
LLB  
*UNISA*  
DipForMed  
SA Path

**Medical Technologists:**
Y Davies, NDMedTech  
CPUT
M Perrins, NHDMedTech  
CPUT

**Haematology**

*Chris Barnard Building*

**Professor and Head:**
N Novitzky, PhD  
*Cape Town*  
FCP  
SA

**Senior Lecturers, Specialists and Haematologists:**
J Opie, MBChB  
FCP
L du Pisani, MBChB  
FFPath(Haem)

**Lecturers, Specialists and Haematologists:**
G Bellaires, MBChB
J Makan, MBChB
M Ntombogwana, MBChB  
FFPath(Haem)

**Medical Natural Scientist:**
K Shires, PhD  
*Cape Town*

**Research Officer:**
S Mowla, PhD

**Laboratory Manager:**
F Barton, NDMedTech(BloodTransfusion&Haem)

**Chief Technologist:**
J Blackbeard, NDMedTech(Haem)

**Human Genetics**

*Room 3.14, Level 3, Wernher and Beit North, IDM*

**Professor and Head:**
R S Ramesar, BSc(Hons) MSc  
*UKZN* PhD  
*Cape Town*

**Professor:**
L J H L Greenberg, BSc  
*Stell* PhD  
*Cape Town*

**Emeritus Professor:**
P H Beighton, MD  
*London* PhD  
*Witwatersrand* FRCP  
*UK* FRCPCH FRS  
SA

**Honorary Professors:**
M R Hayden, MBChB PhD  
*Cape Town* FRCPI FRSC  
*Canada*
W James, BA(Hons)  
*UWC* MSc PhD  
*Madison Wisconsin*
M J A Wood, MBChB  
*Cape Town* MA DPhil  
*Oxford*
Senior Specialist/Senior Lecturer:
K Fieggen, MBChB Cape Town FCPaeds CertMedGenet S.A

Associate Professor:
C Dandara, BSc(Hons) PhD Zimbabwe

Associate Professor/Senior Specialist:
A Wonkam, MBChB Cameroon MD Dip(MedGenet) Switzerland

Sessional Specialists and Honorary Senior Lecturers:
L V Jedeiken, MBChB Cape Town FCP S.A
S Zieff, MBChB MMed Cape Town FCP S.A

Laboratory Manager (Cytogenetics NHLS):
T Ruppelt, NDip BTech(BiomedicalTechnology) UPE

Immunology
Falmouth Building and Wernher and Beit Building South, IDM

Wernher & Beit Chair, Professor and Head:
C M Gray, BSc(Hons) University of Western England MSc PhD Witwatersrand

Honorary Professors:
G D Brown, PhD Cape Town
B Ryffel, PhD Switzerland

Professor:
F Brombacher, PhD Freiburg

Associate Professor:
M Jacobs, PhD Cape Town

Visiting Professors:
G Alber, PhD Germany
J Alexander, PhD Glasgow
G Ferrari, MD Genoa
T Huenig, PhD Wuerzburg
M Kopf, PhD ETH Zürich
S Magez, PhD Brussels

Senior Lecturer:
H Jaspan, BSc USA MD PhD Tulane FAAP PaedsID Washington

Lecturer:
W Hornsnell, PhD UK

Honorary Senior Lecturer:
J Dorfmann, PhD Berkeley

Research Scientists:
R Guler, PhD Switzerland
N-J Hsu, PhD Cape Town
F Kirstein, PhD Cape Town
Research Associates:
A Lopata, PhD Cape Town
B Ryffel, PhD Basel

NHLS Staff:
J Banks, DipMedTechnology
K Jonas, DipMedTechnology
E Kotze, MS BSc(Hons) North West
S Maart, DipMedTechnology
B Pillay, DipMedTechnology
G Sheba, DipMedTechnology
M Watkins, MS PhD Cape Town

Chief Medical Technologist:
L Fick, DipMedTechnology CPUT

Manager FACS Facility:
R Dreyer

Falmouth Laboratory Manager:
H Gamieldien

Medical Microbiology
Falmouth Building, Faculty of Health Sciences Campus

Professor and Head:
M P Nicol, MBCh MMed(MedMicro) Witwatersrand DTM&H FCPath(Microbiol) SA PhD Cape Town

Professor:
G Hussey, MBChB MMed Cape Town MSc ClinTropMed London DTM&H UK FFCH SA

Senior Lecturers Full-time:
C Bamford, MBChB MMed (MedMicro) MPhil Cape Town FCPath(Microbiol) DCH SA
N Beylis, MBCh Dip HIV Management Witwatersrand DTM&H FCPath(Microbiol) SA
PR Naicker, MBChB UKZN DTM&H Witwatersrand FCPath(Micro) SA

Lecturers:
L Ah Tow Edries, BSc(Hons) UWC PhD Cape Town
H Cox, BSc MPH PhD UM Australia
E du Toit, PhD Cape Town
M Kaba, MD MSc PhD AMU France
C Moodley, PhD Cape Town
L Robberts, BSc(Hons) Pret PHD Stell D(ABMM) USA FCCM Canada

Honorary Lecturers:
D A Lewis, FRCP UK PhD DipGUM DTM&H
J Simpson, MMedPath (Microbiol) Cape Town

Registrars:
C M Centner, MBChB MSc(Med) Cape Town
S Ntuli, MBChB Medunsa
H Tootla, MBChB Cape Town
Medical Virology

Werner and Beit Building South (IDM), Faculty of Health Sciences Campus

Professor and Head (UCT/NHLS joint staff):
C Williamson, BSc (Hons) PhD Cape Town

Professor and SARChI Chair in Vaccinology (NHLS/UCT joint staff):
A L Williamson, BSc (Hons) PhD Witwatersrand

Emeritus Professor:
K Dumbell, MBChB MD FRCPath UK DSc Cape Town

Associate Professors:
D R Hardie, MBChB MMedPath (MedVirol) Cape Town
J A Passmore, PhD Cape Town

Senior Lecturers/Clinical Virologists (NHLS/UCT joint staff):
M Hsiao, MBChB DTM&H Witwatersrand MMedPath Cape Town FCPath (Virol) SA
S Korsman, MBChB Pret MMed(VirolPath) Stell FCPath (Virol) SA

Registrars:
A Enoch, MBChB UKZN
N Nkosi, MBChB UKZN

Senior Lecturers/Scientists (UCT/NHLS joint staff):
H Smuts, PhD Cape Town

Medical Scientists/Lecturers (UCT/NHLS joint staff):
Z Mbulawa, PhD Cape Town
Z Valley-Omar, PhD Cape Town

Honorary Senior Lecturers:
T J Tucker, MBChB PhD Cape Town FCPath (Virol) SA
E Andersen-Nissen, PhD USA

Senior Researcher:
W Burgers, PhD Cantab UK
G Chege, PhD Cape Town

Research Officers:
R Chapman, PhD Cape Town
N Douglass, PhD Cape Town

Project Managers:
D Stewart, MSc Zimbabwe

Senior Scientific Officers:
M R Abrahams, MSc Cape Town
C Adams, MSc Cape Town
C Rademeyer, MSc Cape Town

Scientific Officers:
A Kiravi, MSc Cape Town
J C Marais MSc Cape Town
N Ndabambi, MSc Cape Town
D Sheward, MSc Cape Town
R Thebus, NatDip (MedTech) CPUT

Senior Technical Officers:
D Bowers, BSc Cape Town MSc Stell
S Galant, NatDip (ClinPath) NatDip (Microbiology II) CPUT
H Gamaldien, Nat Dip (MedTech) CPUT MSc Cape Town

Senior Medical Technologists:
B Allan, DipMedTech MSc Cape Town
T Muller, NatDip (BiomedTech) BTech CPUT MSc Cape Town

Project Administrator:
K Norman

Paediatric Pathology
Red Cross War Memorial Children’s Hospital

Senior Lecturer Full-time and Acting Head:
M H G Shuttleworth, BSc (Hons) MBChB MMed Cape Town

Senior Lecturers Full-time:
K Pillay, MBChB FC Path(AnatPath) SA FRC Path UK MMed Cape Town
G van der Watt, MBChB FCPath(ChemPath) DA SA

Medical Technologists (Chemical Pathology):
B Bergstedt, NatDip(ClinPath) NatDip(ChemPath) BTech
R Brown, BSc(Microbiol) NatDip(ChemPath)
P Joseph, NatDip(ClinPath)
I Kamaar, NatDip(ClinPath)
S Kear, NatDip(ClinPath)
P Mangala, NatDip(ClinPath)
R Manuel, NatDip(ClinPath)
C Seaton, NatDip(ClinPath) NatDip(Haem) Higher NatDip
L Ungerer, NatDip(ChemPath)
J van Helden, NatDip(ChemPath)
V West, NatDip(ChemPath)

Medical Technologists (Haematology):
Z Abrahams, NatDip(ClinPath) BTech Cape Tech
K Benjamin, NatDip(Haem) BTech Cape Tech
A Bertscher, NatDip(BloodTransfus) NatDip(Haem) Joburg Tech
C Booysen, NatDip(ClinPath) Cape Tech
S Brink, NatDip(ClinPath) BTech Cape Tech
L de Wet, NatDip(ClinPath) CPUT
H Hendricks, NatDip(ClinPath) Pen Tech
M Pickard, NatDip(Haem) Cape Tech
M Prins, NatDip(ClinPath) BTech Cape Tech
G Tappan, NatDip(BloodTransfus) NatDip(Haem) Cape Tech
E van der Heyde, BSc(Microbiol) NatDip(Haem) NatDip(ClinPath) Cape Tech
T Zbodulja, NatDip(Haem) Cape Tech
Medical Technologists (Histopathology):
E Dollie, NatDip(HistopathTechniques) BTech
S Ford, NatDip(HistopathTechniques)
C Jackson, NatDip(Microbiol) NatDip(HistopathTechniques) Higher NatDip
PSYCHIATRY AND MENTAL HEALTH

J-Block, E36A, Groote Schuur Hospital

Professor and Head:
D J Stein, BSc (Med) MBChB Cape Town FRCPC PhD DPhil Stell

Professor:
J van Honk, PhD Utrecht

Sue Struengmann Professor of Child & Adolescent Psychiatry:
P J de Vries, MBChB Stell MRCPsych London PhD Cantab

Vera Grover Professor of Intellectual Disability:
C M Adnams, BSc UKZN BSc(Med)(Hons) MBChB Cape Town FCPaed SA

Emeritus Professors:
L S Gillis, MD DPM Witwatersrand FRC (Psych) UK
C D Molteno, MBChB MMed (Paed) MD Cape Town BA(Hons) (Sociology) PhD UNISA DCH RCP UK
B A Robertson, MD Cape Town DipPsych McGill FCPsych SA
D A White, MBChB MMed (Psych) Cape Town FCPsych SA
T Zabow, MBChB DPM Cape Town FCPsych SA MRCPsych UK

Professors:
J van Honk, PhD Utrecht

Associate Professors:
A Berg, MBChB Pret MPhil (Child Adol Psych) Cape Town FCPsych SA
J Joska, MBChB MMed (Psych) PhD Cape Town FCPsych SA
S Z Kaliski, BA MBBCh Witwatersrand MMed (Psych) PhD Cape Town FCPsych SA
C A Lund, MSocSci (ClinPsych) Rhodes MA PhD Cape Town

Lecturers:
L Abrahams, MPsych UWC
R R Allen, BSc (CompScience Maths Stats) MBChB MBA Cape Town FCPsych SA
S E Baumann, MBChB BA Cape Town FCPsych SA MRCPsych UK
E Benjamin, MA (ClinPsych) Cape Town
J J Benson-Martin, MBChB Cape Town FCPsych SA
O Coetzee, MA (ClinPsych) PU
Q Cossie, MBChB Cape Town FCPsych DMH SA
J J Dawson-Squibb, MA (ClinPsych) Cape Town
C De Clercq, MBChB Pret FCPsych SA
W De Jager, MA (ClinPsych) UPE
C Dean, M Psych UWC MBA Milpark/Oxford Brookes
G Douglas, MSc Nursing Witwatersrand MA (ClinPsych) Cape Town
A L Fourie, MA (ClinPsych) UPE
L Frenkel, MA (ClinPsych) Witwatersrand
K Ganasen, MBChB Cape Town FCPsych SA
P Gasela, MBChB Cape Town FCPsych Cert in Child and Adolescent Psych SA
<table>
<thead>
<tr>
<th>Name</th>
<th>Qualifications</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>J Hoare, MBChB MPhil (Neuropsychiatry)</td>
<td>Cape Town MRCPsych FCpsych S4</td>
<td>Cape Town</td>
</tr>
<tr>
<td>A J Hooper, MBChB</td>
<td>Cape Town FCpsych S4</td>
<td>Cape Town</td>
</tr>
<tr>
<td>I Hoosen, MbChB</td>
<td>Cape Town MRCPsych Royal College of Psychiatrists London DipOcc Health</td>
<td>SA</td>
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<tr>
<td>N R Horn, MBChB</td>
<td>Cape Town PGDipCogTher Manchester MRCPsych UK</td>
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<td>M Karjiker, MBChB</td>
<td>Witwatersrand FCpsych S4</td>
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<tr>
<td>S Kleintjes, MA (ClinPsych) MPhil (ChildAdolPsych)</td>
<td>Cape Town</td>
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<td>N Lalkhen, MA (ClinPsych)</td>
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<td>S J Lay, MA (ClinPsych)</td>
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<tr>
<td>I Lewis, BSc MBChB</td>
<td>MMed (Psych) Cape Town FCPsych S4</td>
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<td>K Louw, MBChB</td>
<td>Cape Town FCPsych S4 MMED Cape Town</td>
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<tr>
<td>A Marais, PhD</td>
<td>Cape Town MA (ClinPsych) Stell</td>
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<td>S Mkabile, MA (ClinPsych)</td>
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<td>N Matross, MBChB</td>
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<td>P Milligan, MBChB</td>
<td>Cape Town FCPsych S4</td>
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<td>J S Parker, MBChB</td>
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<td>Z Parker, MA</td>
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<td>S Pasche, BBusSc BSoSc (Hons)</td>
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<td>M Saptouw, MA (ClinPsych)</td>
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<td>NG SibeKo, MBChB</td>
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<td>N Siegfried, MBChB</td>
<td>Cape Town MPH (Hons) Sydney DPhil Oxford</td>
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<td>P Smith, MBChB</td>
<td>Cape Town FCPsych S4</td>
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<tr>
<td>T Swart, BSc (Biochem)</td>
<td>Cape Town MSc (ClinPsych) UKZN</td>
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<tr>
<td>H Temmingh, MBChB</td>
<td>MMed (Psych) Stell FCPsych SA MPH Cape Town</td>
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<tr>
<td>H Thornton, MA (ClinPsych)</td>
<td>Rhodes PhD Stall</td>
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<td>T Timmermans, MBChB</td>
<td>Cape Town FCPsych S4</td>
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<tr>
<td>Z Vally MA (ClinPsych)</td>
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<tr>
<td>W Vogel, MBChB</td>
<td>MMed (Psych) Witwatersrand FF Psych S4</td>
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<td>B Vythilingum, MBChB</td>
<td>UKZN MMed Stell FCPsych SA</td>
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<tr>
<td>M F Williams, MBChB</td>
<td>Cape Town FCPsych S4</td>
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<td>P F Williams-Ashman, MBChB</td>
<td>Witwatersrand FCPsych S4</td>
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<td>D A B Wilson, BSc MBChB</td>
<td>Cape Town FCPsych S4</td>
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<tr>
<td>J Yako, MA (ClinPsych)</td>
<td>Cape Town</td>
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**Honorary Professors/Associate Professors:**

C Allgulander, MD PhD Karolinska Institutet
D Baldwin, DM Southampton FRCPsych MRCPsych MB BS London
D Castle, MBChB MD Cape Town MRCPsych FRCPsych MSc (Epi) London DLSHTM FRANZCP GCUt Melbourne
D Edwards, Psych (Hons) Oxford Univ MA (ClinPsych) PhD Rhodes
S W Jacobson, MA Brandeis MA PhD Harvard
J L Jacobson, MA PhD Harvard
J Leff, MB.BS University College London MRCP UK MD Kings College London FRCPsych UK
I Marks, MBChB MD Cape Town DPM MRCPsych FRCPsych London
C Mathews, BA Natal MSc (Med) PhD Cape Town
S Mkabile
B Myers, MSocSc (cum laude) Natal PhD Cape Town
M Robertson, MBChB MD DSc (Med) Cape Town DPM FRCPsych FRCP FRCPCH MRCPsych London
O Shisana, BA Univ of the North MA (ClinPsych) Loyola College PhD Univ of South Florida ScD Johns Hopkins School of Hygiene and Public Health
L Simbayi, BSc Zambia MSc Utah DPhil Sussex
M Tomlinson, BA Rhodes BA(Hons) Witwatersrand MA (ClinPsych) Cape Town PhD Reading
D Williams, BTh(Hons) University of the Southern Caribbean MDiv (cum laude) Andrews
University PhD (Sociology) Michigan  
C Zlotnik, MA Witwatersrand, PhD Rhode Island University

Honorary Lecturers:
T Amos, MA UWC PhD Cape Town  
L Cluver, DPhil Oxford  
B Dickman, PhD (Psych) Cape Town  
A Gevers, BA (Psych) Grinnell College MA (ClinPsych) Missouri St. Louis PhD Cape Town  
V Ives-Deliperi, BA Unisa PhD Cape Town  
C Kuo, BA University of Virginia DPhil Oxford  
A Mason-Jones, BA(Hons) Univ of Lancaster MA (Public Health) PhD Univ of Nottingham  
I McCallum, BA BSocSc MBCh Cape Town FCPsych SA  
U Meys, MBChB MPhil (Child and Adolescent Psychiatry) Cape Town FCPsych SA  
A Muller, BCur NMMU MCur (Psych) UJ  
A Robins, MBChB Cape Town MD Witwatersrand DRM England MRC Psych London  
C F Ziervogel, MBChB Cape Town FCPsych SA

Research Officers:
N J Bikwana, BPA Stell BA(Hons) UWC HDE Cape Town  
S D Cooper, BA(Hons) MPH Cape Town  
B L Evans, MA (ClinPsych) UNISA  
S Field, BA Hons Rhodes MA Southampton  
S Honikmann, MBChB MPhil (MCH) Cape Town DCh DObstet SA  
A Kleinmans, HDE UWC MSc Open  
R J Paulsen, MA UWC

HEADS OF DISCIPLINES

Addiction Psychiatry  
D A B Wilson, BSc MBChB Cape Town FCPsych SA

Child and Adolescent Psychiatry  
W Vogel, MBChB MMed (Psych) MSc Witwatersrand FF Psych SA

Consultation-Liaison Psychiatry  
L Frenkel, MA (ClinPsych) Witwatersrand  
J Hoare, MBChB MPhil (Neuropsychiatry) Cape Town MRCPsych FCPsych SA  
K Louw, MBChB Cape Town FCPsych SA MMed Cape Town

Forensic Psychiatry  
S Z Kaliski, BA MBChB Witwatersrand MMed (Psych) PhD Cape Town FCPsych SA

General Psychiatry/Psychiatric Intensive Care  
R R Allen, BSc (CompScience Maths Stats) MBChB MBA Cape Town FCPsych SA  
P Milligan, MBChB Cape Town FCPsych SA

Intellectual Disability Psychiatry  
C M Adnams, BSc UKZN BSc (Med)(Hons) MBChB Cape Town FCP SA

Neuropsychiatry  
J Joska, MBChB MMed (Psych) PhD Cape Town FCPsych SA

Psychopharmacology  
D J Stein, BSc(Med) MBChB Cape Town FRCPC PhD DPhil Stell
Psychotherapy
L Abrahams, MPsych *UWC*
S Kleintjes, MA(ClinPsych) MPhil (ChildAdolPsych) *Cape Town*

Public Mental Health
C A Lund, BA(Hons) (Psych) MA MSocSci (ClinPsych) PhD *Cape Town*
J S Parker, MBChB *Cape Town* FCPsych *SA*
PUBLIC HEALTH AND FAMILY MEDICINE

Level 4, Falmouth Building South

Professor and Head/Director:
M F Jeebhay, MBChB UKZN DOH MPhil (Epi) Cape Town MPH (OccMed) PhD Michigan

Environmental Health

Level 4, Falmouth Building South

Associate Professor and Head:
H-A Rother, BA MA PhD Michigan

Associate Professor:
A Dalvie, BSc BSc(De)(Hons) MSc(Med) PhD Cape Town

Honorary Senior Lecturer:
G Manuweera, BSc MPhil Peradeniya PhD Missouri

Epidemiology and Biostatistics

Level 5, Falmouth Building South

Associate Professor and Head:
L Myer, BA Brown MA MBChB Cape Town MPhil PhD Columbia

Senior Lecturer:
H Carrara, BSc Witwatersrand MPH Sweden

Lecturers:
D Constant, BSc (Physio) BSc(Hons) MScMed MPH Cape Town
A Grimsrud, BSc Alberta MPH Cape Town
J Ramjith, BSc MSc UKZN
E Smith, BCom Cape Town

Senior Research Scholar:
R Sayed, MSc Karachi

Honorary Professors:
C Lombard, BSc MSc PhD UOFS
J McIntyre, MBChB Zimbabwe FRCOG

Visiting Professors:
M Egger, MD Bern FFPH MSc London DTM&H Basel
T Rehle, MD Munich MPH London PhD Antwerp

Family Medicine

Level 2, Falmouth Building South

Associate Professor and Head:
D Hellenberg, MBChB Cape Town MFamMed Stell FCFP SA Certificate in Policy, Planning and Management for Health Sector Reform (COPHE) UWC ACLS
Senior Lecturers Full-time:
G Bresick, MBChB MPH Cape Town DCH SA
A de Sa, MBChB Cape Town MCFP SA
E de Vries, MBChB Stell MFamMed Medunsa FCFP SA
A Isaacs, MBChB Cape Town MFamMed Stell
R Krause, MBChB MFamMed UOFPS MPhil (Palliative Medicine) Cape Town
L Morales Perez, MBChB MMed Family Medicine Stell
T Motshoi, MBChB MFamMed DipFamMed Cape Town
M Namane, MBChB MPhil (FamMed and PHC) Cape Town BSc (LabSciences) MSc (Immunology)
UNIN CertCommRheum Pret MSc (MedSci) (ClinEpi) Stell
B Schweitzer, MBChB Witwatersrand DA MFGP SA MPraxMed Medunsa

Senior Lecturer Part-time:
E Gwyther, MBChB MFGP Cape Town DipPallMed MSc (PallMed) Wales

Lecturers Full-time:
N Beckett, BSc MBChB Stell DipFamMed Cape Town
L Ganca, BASocSc(Hons) (Social Work) MPhil (PallMed) Cape Town DipSecEd Transkei
N Parker, MBChB Cape Town

Lecturers Part-time:
A J Barnard, MBChB Dip Anaes MFGP MPhil (PallMed) Cape Town
F Begg, MBChB Cape Town
C Bruce, MBChB LMCC Dip Pall Med (CMSA) MPhil Pall Med Cape Town
C Chouler, MBChB Cape Town FCFP SA
L Farrant, MBChB Witwatersrand Dip HIV Management
A Marian, MBChB Cape Town
M Meiring, MBChB Pret FCpaeds CMSA MMed(Paeds) Witwatersrand
M Navsa, MBChB MPhil (FamMed and PHC) Cape Town
M S Saban, MBChB Cape Town MFamMed Stell FCFP SA

Honorary Adjunct Associate Professor:
A W Barday, MBChB Cape Town FCFP SA DPT&M Witwatersrand

Honorary Professor:
R Harding, PhD Public Health Kings College London

Honorary Lecturers:
A Awe, MB BS Lagos Vocational Training FM SAAF and Stell
S Craven, MBChB Oxon LRCP
F De Jager, MBChB Stell
B Grevler, MBChB Cape Town
J Dhansay, MBChB MFGP SA DPT&M Witwatersrand
G Petros, PhD CertAdEd NatDip (Public Health) MPH Cape Town

Facilitators:
N Allie, MBChB Cape Town
I Bell, MBChB Cape Town
O Brey, MBChB PGDipFamMed Cape Town
L K Gresak, MBChB Cape Town
G Jacobs, MBChB Cape Town
M A Jardine, MBChB Cape Town
R Loghdey, MBChB Cape Town MFamMed Stell
S A Moola, MBCh Bournewald
S L Naidoo, MBChB Natal MBA Cape Town
V Patel, MBChB Cape Town MFamMed Stell
A Pillay, MBChB Cape Town
A Smith, MBChB PGDipFamMed Cape Town
S Sonday MBChB Cape Town MRCGP UK MMed Warwick
R Tayob, MBChB Witswatersrand
F Yasin, MBChB Cape Town

Research Co-ordinator:
N Manga, PhD Cape Town

Registrars:
M Abbas
T Aronsun
W Bedeker
I Eshun-Wilsonva
D Huang
A Marx
L McCrindle
J Porter
A Razack
B Sonuga
H Ugwu
R Yusuf

Health Economics
Falmouth Annex

Senior Lecturer and Head:
E Sinanovic, BSc (Econ) Zagreb DipFinMgt Maastricht MCom (HealthEcon) Cape Town
PhD (Health Econ) London

Professor:
D McIntyre, BCom(Hons) (Econ) MA (Econ) PhD Cape Town

Associate Professor:
S Cleary, BA Grahamstown BA(Hons) (Econ) MA (Econ) PhD Cape Town

Senior Lecturers:
J E Ataguba, BSc (Econ) Nigeria MPH (HealthEcon) PhD (Economics) Cape Town
A Honda, BA (Sociology) MSc (IntHealth) Tokyo PhD (HealthEcon) London

Lecturer:
V Govender, MCom (HealthEcon) Cape Town MPH (InternatHealth) Boston

Research Officer:
O A Alaba, BSc (Econ) MSc (Econ) PhD (Econ) Ibadan

Health Policy and Systems
Falmouth Annex and Level 1 Falmouth Building South
Professor and Head:
L Gilson, BA(Hons) Oxford MA East Anglia PhD London

Senior Lecturer:
M Shung King, MBChB Westville DPhil (SocPolicy) Oxford

Senior Lecturer and Research Coordinator:
J Olivier, PhD Cape Town

Post-Doctoral Research Fellow:
Gina Teddy, PhD Leeds

Honorary Research Associate:
R English, MBChB Cape Town

Honorary Research Associate Emeritus:
J Cochrane, BSc (Chemistry) PhD Cape Town MDivinity Chicago

Visiting Professors:
T Cutts, PhD Mississippi
G Gunderson, PhD USA
U Lehmann, PhD Germany
H Schneider, MBChB Cape Town DCH DTMH MMed (Public Health) Witwatersrand

**Occupational Medicine**

*Level 4, Falmouth Building South*

Professor and Head:
R Ehrlich, BBusSc MBChB PhD Cape Town DOH Witwatersrand FFCH FCPHM (OccMed) SA

Professor:
M F Jeebhay, MBChB UKZN DOH MPhil (Epi) Cape Town MPH (OccMed) PhD Michigan

Lecturers Part-Time:
ADH Burdzik, MBChB MMed Cape Town DipOccMed UK FCPHM (Occ Med) SA
G Kew, MBChB DOH Cape Town

Honorary Professor:
G J Churchyard, MBChB MMed (IntlMed) PhD Witwatersrand FCPSA

Honorary Senior Lecturers:
S Adams, MBChB DOH Cape Town MFamMed Stell FCPHM (OccMed) SA
S Manjra, MBChB Natal MMedSc (OccHealth) Birm BSc(Med)(Hons) DOH Cape Town
J te WaterNaude, MBChB MPhil Cape Town FCPHM SA

Honorary Lecturers:
D Knight, MBChB MMed Cape Town
A Thompson, MBChB DOH Cape Town AMP Manchester
A van der Walt, DipMidw CMSA DOH MPhil Cape Town
J van Zyl, MBChB MMed DipMed DipOccHealth Stell FAADEP CIME USA FCPHM SA
H Williams, MBChB DOH MMed Cape Town FCPHM (OccMed) SA

Emeritus Professor:
G Todd, BSc(Agric) UKZN MBChB PhD Cape Town FCDerm SA
Registrars:
B Cloete
H Mwanga
D Ngajilo
N van de Water
*Joint appointment with Department of Medicine

Public Health Medicine
Levels 2 and 4, Falmouth Building South

Professor and Head:
L London, MBChB MMed MD Cape Town BSc(Med)(Hons) Stell DOH Witwatersrand FCPHM SA

Associate Professors:
A Boulle, MBChB PhD Cape Town MSc London FCPHM SA
D Coetzee, BA Cape Town MBChB DPH DTM&H DOH Witwatersrand FFCH SA MSc (Epi) Columbia

Associate Professor Part-time:
G Perez, BDentistry Algiers DHSM MDent (CommDentistry) Witwatersrand (Deputy Dean; Joint Faculty Department appointment)

Senior Lecturers Full-time:
J Irlam, BSc(Med)(Hons) MPhil Cape Town (Joint School-Directorate of Primary Healthcare appointment)
L Olckers, MPhil (Ed) (Higher Education Studies) BSocSc (SocWrk)(Hons) Cape Town
T Oni, BSc London MB BS UCL MPH Cape Town MD Imperial MRCP DFPH UK
V Zweigenthal, BSc DTM&H DPH Witwatersrand BSocSc(Hons) MBChB Cape Town FCPHM SA

Lecturers Full-time:
F Amien, BChD MChD (CommDentistry) Cape Town
J Keikelame, MPhil (Edu Support) Cape Town BSocSc(Hons)(Psych) UNIBO (Joint School-Directorate of Primary Healthcare appointment)

Lecturer Part-time:
R Morar, MBChB Natal DHMEF MMed (CommH) Cape Town FCPHM SA (Deputy Dean; Joint Faculty-Department appointment)

Medical Natural Scientist:
N Zinyakatira, BSc(Hons) Statistics Zimbabwe MPhil (Demog) CertProjMgt Cape Town

Honorary Associate Professor:
L Bourne, BSc(Dietetics) UKZN BSc(CommD)(Hons) MSc (Med) PhD MPH Cape Town
N Morojele, PhD University of Kent UK
W Pick, MBChB MMed Cape Town DPH DTM&H Witwatersrand FFCH SA

Honorary Senior Lecturers:
E Goemare, MSc MD DTMH Belgium DSc h.c. Cape Town
T Hawkridge, MBChB FCPHM Cape Town DTM&H MSc (Med) Witwatersrand
T Naledi, MBChB Cape Town FCPHM
D Pienaar, MBChB MMed Cape Town
N Siegfried, MBChB Cape Town MPH(Hons) Sydney DPhil Oxford
M Stuttaford, PHD UK
Honorary Lecturers:
G Denicker, MSc Oxford BChD UWC
C Jacobs, MPH Pret PGDip(Public Health) UWC BSc(Hons) BSc Stell
M Moodley, MBChB Natal MBA Cape Town

Honorary Research Associates:
T Alfaro-Velcamp, PhD MA Georgetown University MSc London School of Economics BA Caltech

Visiting Professors:
L Baldwin-Ragaven, AB USA MDCM CCFP FCFP Quebec
F Coomans, PhD Maastricht MA (Human Rights) Italy
S Whittaker, MBChB MMed PhD Cape Town FFCH SA

Facilitators:
D Aldera, BSocSci Cape Town
R Banoobhai, BA (Hons) Natal
M Botsis, BA Rhodes Dip(HE) Stell
M Chinaka, BSocSci(Hons) Cape Town
T Chuma, BA LLB LLM Cape Town
G Cook, BScHons (Psychol) UK
S Cotton, MA (Res Psychol) Cape Town
L De Paulo, MA (Psychol) Cape Town
L Dlamini, BSocSci (Hons) (SocWrk) Cape Town
N Philander, MA (ClinPsych) Cape Town
E Stern, MPH Cape Town

Registrars:
V Appiah-Baiden
N Jacob
S Mabunda
Z McConney
K Rees
G Silgram
A Von Delft
G Ward

Social and Behavioural Sciences
Level 3, Falmouth Building South

Senior Research Officer and Head:
C Colvin, BA Virginia Tech MA PhD Virginia MPH Cape Town

Associate Professors:
D Cooper, BSocSci BA(Hons) PhD Cape Town
J Harries, BA(Hons) MPhil MPH PhD Cape Town

Lecturer:
A Swartz, BSocSci BA(Hons) MPH Cape Town

Honorary Associate Professors:
A Harrison, BA Penn MA MPH Johns Hopkins PhD LSHTM
M Lurie, PhD John Hopkins MA Florida BA Boston
C Mathews, BA UKZN BSocSc(Hons) MSc (ComHealth) PhD Cape Town
Honorary Senior Lecturer:
C Morroni, MPhil MBChB Cape Town PhD (Epi) Columbia DTM&H LSHTM DFSRH
D Peacock, BA(Hons) California MA (SocWrk) San Francisco

Honorary Lecturer:
T Shand, MA(Hons) Glasgow MSc (MPH) London School of Hygiene and Tropical Medicine

Visiting Professor:
S Guttmacher, MPhil PhD Columbia

Facilitator:
E Stern, MPH PhD Cape Town

Health and Human Rights
Levels 1 and 3, Falmouth Building South

Senior Research Officer:
T Boulli, BSc(OccTher) MPH UWC

Research Officers:
N Fick, BA(Hons) (Psychol) Stell
N Haricharan, MA(SocAnthrop) Cape Town MJournalism Canada
M Heap, PhD Cape Town

Honorary Research Associates:
M Richter, LLM BA(Hons) BA Witwatersrand MA (International Peace) USA
J McLoughlin, MBChB MPH (Epi) Cape Town
RADIATION MEDICINE
L-Block, Groote Schuur Hospital

Professor and Head:
R Abratt, MBChB Pret MMed Cape Town FCRadOnc SA

Medical Physics
L-Block, Groote Schuur Hospital

Head:
H Burger, BSc(Hons) MSc (MedPhys) Pret

Lecturers:
T C Kotze, PhD Stell
H Mac Gregor, BSc(Hons) Stell
C Trauernicht, BSc(Hons) MSc (Med) Cape Town
N Willemse (Joubert), BMedSc(Hons) MMedSc (MedPhys) UFS

Nuclear Medicine
C4/C3, New Groote Schuur Hospital

Head of Division and Senior Lecturer Full-time:
T Kotze, MBChB Witwatersrand FCNP SA

Consultants:
A Brink, MBChB Pret DCH FCNP SA MMed (NucMed) Cape Town
R Steyn, MBChB UFS FCNP SA

Paediatric Radiology
B3, Red Cross Children’s Hospital

Senior Lecturers Full-time:
T N Kilborn, MBChB Cape Town FCR R UK
N A Wieselthaler, MBChB Cape Town FCRadDiag SA

Lecturer Full-time:
E Banderker, MBChB Cape Town FCRadDiag SA

Radiation Oncology
L-Block, Groote Schuur Hospital

Professor and Head:
R Abratt, MBChB Pret MMed Cape Town FCRadOnc SA

Senior Lecturers Full-time:
A J Hunter, BSc(Med)(Hons) PhD Cape Town
Z Mohamed, MBChB Stell MMed Cape Town
J Parkes, MBChB Cape Town FCRadOnc SA
A L van Wijk, MBChB Cape Town FCRadOnc SA
H Simonds, MBChB PGDip (HealthEcon) Cape Town MRCP FCR R UK
H Burger, MBChB Cape Town FCRadOnc SA
Lecturers Full-time:
S Dalvie, MBChB Cape Town FCRadOnc SA MMedRadOnc UFS
A S Hendrikse, BSc(Hons) PhD Cape Town
B Robertson, MBChB Cape Town FCRadOnc SA
J Wetter, MBChB Cape Town FCRadOnc SA MMedRadOnc UFS

Radiology
C16, New Groote Schuur Hospital

Professor and Head:
S J Beningfield, MBChB Cape Town FFRadDiag SA

Senior Lecturers Full-time:
N Ahmed, MBChB Cape Town FCRadDiag SA
S E Candy, BSc HDE MBChB Cape Town FFRadDiag SA
R M Seggie, MBChB Cape Town FFRadDiag SA

Senior Lecturer Part-time:
H T Goodman, MBChB Cape Town MPraxMed Pret MFGP FFRadDiag SA FRCR UK

Lecturers Full-time:
N Abdurahman MBChB Cape Town FCRad(Diag) SA
D Chhiba, MBChB Cape Town FCRadDiag SA
T Hartley MBChB Cape Town FCRad(Diag) SA
Q Said-Hartley MBChB Cape Town FCRad(Diag) SA
G Sudwarts, MBChB Cape Town FCRad(Diag) SA
Surgery

J Floor, Old Main Building, Groote Schuur Hospital

Professor and Head:
D Kahn, MBChB Birmingham ChM Cape Town FCS SA

Emeritus Professors:
P C Bornman, MMedSurg FRCS Ed FCS SA FRCS Glasgow
D M Dent, MBChB ChM Cape Town FCS SA FRCS UK FRCPS Glasgow (Hon)
J E J Krige, MBChB MSc Cape Town FRCS Edinburgh FCS SA
J Terblanche, MBChB ChM Cape Town FCS SA FRCS UK FRCPS Glasgow FACS (Hon)
  FACP(Hon) FRCS UK (Hon) FRCSC (Hon) FRCS Edinburgh FMC SA FRC SI (Hon)

Cardiothoracic Surgery (Chris Barnard Division of Cardiothoracic Surgery)

Groote Schuur Hospital, Red Cross Children’s Hospital; Cape Heart Centre Medical School

The Division of Cardiothoracic Surgery provides clinical cardiac and thoracic surgery services for
the community of Cape Town and the Western Cape region at both Groote Schuur Hospital and Red
Cross Children’s Hospital. In addition, this Division is the only academic unit that provides cardiac
transplantation in South Africa. This Division also has an active laboratory research programme
centering on the development of an ‘easy to implant’ synthetic heart valve for developing countries;
myocardial regeneration, restenosis and angiogenesis in tissue engineering.

Chris Barnard Chair of Cardiothoracic Surgery and Head:
P Zilla, MD Vienna DMed Zurich PhD Cape Town PD Vienna FCS SA

Associate Professors Full-time:
D Bezuidenhout, PhD
J G Brink, MBChB Cape Town FCS SA
J Hewitson, MBChB Cape Town FCS SA

Associate Professor Part-time:
A Linegar, MBChB Cape Town PhD UFS FCS SA

Senior Lecturers Full-time:
A Brooks, MBChB Stell FCS SA
N Davies, PhD
P Human, PhD Cape Town
J Scherman, MBChB Cape Town FCS SA

Senior Lecturers Part-time:
W Lichtenberg, MBChB MMed Cape Town
L Moodley, MBChB Natal FCS SA
J Rossouw, MBChB PhD FCS SA

Emergency Medicine

Metro EMS, Karl Bremer Hospital

Professor and Head:
L Wallis, MBChB FRCS (A&E) Edinburgh MD DIMCRCS DipSportMed Glasgow FCEM UK
  FCEM SA FIFEM
Senior Lecturer:

Lecturers (Joint Staff):
K Cohen, MBChB MMEd (EM) Cape Town
D Fredericks, MBChB Cape Town FCEM SA
H Geduld, MBChB MMEd (EM) Cape Town DipPEC FCEM SA
AM Kropman, MBChB Cape Town FCEM SA

Honorary Senior Lecturer:
H Lamprecht, MBChB Stell DAaes London FCEM SA FCEM UK
W Smith, MBChB Cape Town EMDM

Honorary Lecturers:
S R Bruijns, MBChB Pret DipPEC SA
B Cheema, MB BS BSc (Psychology) MRCPCH London DTM&H Liverpool
S de Vries, MBChB MPhil(EM) Cape Town DipPEC SA
J du Toit, BSc BSc(Hons) MSc PhD Witwatersrand MHRP SA BPP
S Lahri, MBChB Witwatersrand FCEM SA
J Malan, MBChB Pret DipPEC FCEM SA
I Maconochie, MB BS FRCPCH PhD London FCEM UK FRCPI Ireland
S Le Roux, BSc MBChB Cape Town
M Stander, MB BCh UJ MMEd(EM) Cape Town
K Vallabh, MBChB Witwatersrand FCEM SA
N van Hoving, MBChB UFS DipPEC SA MMEd(EM) MSc(Med)(ClinEpi) Stell

General Surgery
J-Floor, Old Main Building, Groote Schuur Hospital

Professor and Head:
D Kahn, MBChB Birm ChM Cape Town FCS SA

Professors:
A Mall, BSc(Med)(Hons) MSc Cape Town PhD Newcastle-upon-Tyne
A J Nicol (Head: Trauma Unit) MBChB Cape Town FCS SA

Emeritus Professors:
P C Bornman, MMEdSurg FRCS Ed FCS SA FRCS Glasgow
D M Dent, MBChB ChM Cape Town FCS SA FRCS UK FRCPS Glasgow (Hon)
J E J Krieger, MBChB MSc Cape Town FRCS Edinburgh FCS SA
J Terblanche, MBChB ChM Cape Town FCS SA FRCS UK FRCPS Glasgow FACS (Hon) FACP (Hon) FRCS UK (Hon) FRCSC (Hon) FRCS Edinburgh FMC SA FRCSI (Hon)

Associate Professors:
P A Goldberg (Head: Colorectal Unit), MBChB MMEd Cape Town FCS SA
P Navsaria, MBChB MMEd Cape Town FCS SA
E Panieri (Head: Oncology, Endocrinology) MBChB MMEd Cape Town FCS SA

Senior Lecturers Full-time:
M Bernon, MBChB Witwatersrand FCS SA CertGastro
A B T Boutall, MBBCch Stell FCS SA CertGastro
S Burmeister, MBChB Cape Town FCS SA CertGastro
L Cairncross, MBChB Cape Town FCS SA
G Chinnery, MBChB Witwatersrand MMed FCS SA CertGastro
S Edu, Dip in Medicine Romania FCS SA
J H Klopper, MBChB Pret MMed (Surg) UFS Cum laude
J C Kloppers, MBChB Stell DipPEC FCS SA MRCS FRCS (GenSurg) Edinburgh
E Muller, MBChB Pret MMed Cape Town MRCs FCS SA
N G Naidoo (Head: Vascular Unit), MBChB UKZn FCS SA
D A Thomson, MBChB UKZn FCS SA MMed Cape Town
C Warden, MBChB Cape Town MMed FCS SA

Adjunct Professor:
R J Baigrie, BSc MD Cape Town FRCS UK

Senior Lecturers Part-time:
H F Allison, MBChB Cape Town FRCS Edinburgh FCS SA
D Anderson, MBChB Cape Town FCS SA
S N R Cullis, MBChB Cape Town FCS SA FRCS Edinburgh
C Dreyer, MBChB Pret FCS SA
K J Goldberg, MBChB Cape Town FCS SA
M Hewat, MBChB Cape Town FCS SA
M V Madden, MBChB Cape Town FCS SA FRCS UK FRCS Edinburgh
P J Matley, MBChB Cape Town FCS SA
K Michalowski, MD Poland FCS SA
A J Ndhluni, MBChB Zimbabwe FCS SA
H Spilg, ChM Cape Town FCS SA
J A Tunnicliffe, MBChB Cape Town FCS SA
H I Yakoob, MBChB Cape Town FCS SA

Neurosurgery
H53, Old Main Building, Groote Schuur Hospital

Helen & Morris Mauerberger Professor and Head:
A G Fieggen, BSc(Med) MBChB MD Cape Town MSc London FCS SA

Emeritus Professors:
J C Peter, MBChB Cape Town FRCS Edinburgh
J C de Villiers, MD Cape Town MD Stell DSc UWC FRCS UK FRCS Edinburgh

Professors:
A A Figaji, MBChB MMed PhD Cape Town FCNeurosurg SA
P L Semple, MBChB MMed PhD Cape Town FCS SA

Honorary Professors:
P Siesjö, MD PhD Lund
M J A Wood, MBChB Cape Town DPhil Oxon

Associate Professors:
D E J Le Feuvre, MBChB MMed Cape Town MSc Paris/Mahidol FCS SA
A G Taylor, MBBBCh Witwatersrand MMed Cape Town MSc Paris/Mahidol FCS SA

Senior Lecturers:
L C Padayachy, MBChB Pret FCNeuroSurg SA MMed Cape Town
S J Røthemeyer, MBBBCh Witwatersrand FCNeuroSurg SA
Senior Lecturers Part-time:
N D Fisher-Jeffes, MBChB *Stell FCS SA*
C F Kieck, MBChB *Stell MD Cape Town FCS SA*
R L Melvill, MBChB *Cape Town FCS SA*
S A Parker, MBChB *Cape Town FCS SA*
D G Welsh, MBChB *Cape Town FRCS London FCS SA*
G A White, MBChB *Cape Town FCS SA*

Lecturer:
C Thompson, MBChB MMed *Cape Town FCNeuroSurg SA*

Senior Research Officer:
N G Langerak, BSc (Physio) MSc (HumMovSci) PhD (BiomedEng)

Postdoctoral Fellow:
U Rohlwink Neuroscience Postdoctoral Research Fellow, Division of Neurosurgery

**Ophthalmology**  
*H52, Old Main Building, Groote Schuur Hospital*

Morris Mauerberger Professor of Ophthalmology and Head:
C Cook, MBChB MPH *Cape Town FCS(Ophth) SA FRCOphth*

Emeritus Professor:
A Murray, MBChB *Witwatersrand FRCS Edinburgh FRCOphth*

Senior Lecturers Full-time:
N du Toit, MBChB *Cape Town DipOphth FCSOphth SA*
K Lecuona, MBChB *Cape Town FCSOphth SA*
T Pollock, MBChB *Cape Town FCSOphth SA*
J Rice, MBChB *Witwatersrand FCSOphth SA*
J Steffen, MBChB *Stell FCSOphth SA*
C Tinley, MBChB *Cape Town FCSOphth*

Director: Community Eye Health Programme
D Minnies, NHDMT(Haematology) SA MPH *Cape Town*

Senior Lecturers Part-time:
E Albrecht, MBChB *Stell FCSOphth SA*
M Attenborough, MBChB *Witwatersrand FRCOphth*
N Cockburn, MBChB *Cape Town FCSOphth SA*
J de Villiers, MBChB *Cape Town FCSOphth SA*
R Grötte, MB BS *Newcastle FRCS Edinburgh DO RCP London RCS UK*
D Harrison, MBChB *Cape Town FCSOphth SA*
F J Kupper, MBChB MMed *Cape Town DO RCP London RCS UK*
A Perrott, MBChB *Cape Town FCSOphth SA*
P Steven, MBChB *Cape Town DOMS RCP London RCS UK*
K Suttle, MBChB *Cape Town FCSOphth SA*
H van Velden, MBChB *Stell FCSOphth SA*
Orthopaedic Surgery
H49 Old Main Building, Groote Schuur Hospital

Pieter Moll & Nuffield Professor of Orthopaedic Surgery and Head:
R Dunn, MBChB MMed Cape Town FCSOrth SA

Emeritus Professor:
J Walters, MBChB Cape Town FCSOrth SA

Emeritus Associate Professor:
E B Hoffman, MBChB Stell FCSOrth SA

Senior Lecturers Full-time:
S Dix-Peek, MBBCh Witwatersrand FCSOrth SA MMed Cape Town
I Koller, MBChB Pret FC Orth SA MMed (Orth) Cape Town
N Kruger, MBChB Cape Town FCSOrth SA
S Maqungo, MBChB Natal FCSOrth SA
G McCollum, MBChB MMed Cape Town DIP PEC FCSOrth SA
S Mears, MBChB Stell FCSOrth SA
S Roche, MBChB Cape Town LMCC Canada FCSOrth SA
P Rowe, MBBCh Witwatersrand FCSOrth SA
M Solomons, MBChB Cape Town FCSOrth SA

Senior Lecturer Five-eighths:
G Grobler, MBChB MMed Cape Town FRCS Edinburgh FCS (Orth) SA

Senior Lecturers Part-time:
S Carter, MBChB Cape Town FCSOrth SA
B Dower, MBChB Cape Town FCSOrth SA
P Ehlers, MBChB Stell FCOOrth SA
H Hobbs, MBChB Cape Town DipPEC FCOOrth MMed (Orth) SA
K V Hosking, MBChB Cape Town FCSOrth SA
P Makan, BSc(Med) MBChB MMed Cape Town FCSOrth SA
D McGuire, MBChB Witwatersrand MMed Cape Town FCOOrth SA
P Polley, MBChB Cape Town FCOOrth SA
L T Sparks, MBChB Cape Town FRCS UK
R Von Bormann, MBChB Cape Town FCOOrth DA SA
C White, MBChB UOFS MRCS FCOOrth SA MMed (Orth) Cape Town

Honorary Senior Lecturers:
B Bernstein, MBBCh Witwatersrand FCSOrth SA
D Engela, MBChB Pret FCSOrth SA
B C Vrettos, MBChB Zimbabwe FRCS England MMed Cape Town FCSOrth SA

Honorary Lecturers:
R K Marks, MBChB Cape Town FRCS (Ed) FCSOrth SA CIME
Martin, MBChB Cape Town FCOOrth SA
W M van der Merwe, MBChB UOFS Social Studies Oxon BMedSci(Hons) (Sport) Cape Town

FCSOrth SA

Otorhinolaryngology
H53, Old Main Building, and Ward F8, Groote Schuur Hospital, Red Cross War Memorial Children’s Hospital and New Somerset Hospital
Leon Goldman Professor of Otorhinolaryngology and Head:
J J Fagan, MBChB MMed Cape Town FCS SA

Emeritus Professor:
SL Sellars, FRCS FCS SA

Senior Lecturers Full-time:
G J Copley, MBChB Cape Town FCSOtol SA
O Edkins, MBChB Witwatersrand FCSOtol SA
T Harris, MBChB Cape Town FCSOtol SA
D E Lubbe, MBChB Stell FCSOtol SA

Lecturer Five-eighths:
E Meyer, MBChB Pret FCSOtol SA

Lecturers Part-time:
M D Broodryk, MBBCh Stell FCSOtol SA
P J de Waal, MBChB Cape Town FCSOtol SA
L Nel, MBChB Pret FCS SA
P S Traub, MBChB Witwatersrand FCSOtol SA
M J R R Vanlierde, MBChB Cape Town FCSOtol SA
A van Lierop, MBChB Stell FCSOtol SA

Paediatric Surgery
Institute of Child Health, Red Cross Children’s Hospital, Rondebosch

Charles F M Saint Professor of Paediatric Surgery and Head:
A Numanoglu, MBChB Turkey FCS SA

Professors:
A A Figaji, MBChB MMed PhD Cape Town FCNeurosurg SA
A B van As, MBChB Netherlands FCS SA PhD Cape Town MBA SA

Adjunct Professor:
R A Brown, MBChB Cape Town MPhil (Ancient Cultures) Stell DCH SA FRCS Edinburgh FCSSurg SA

Emeritus Professors:
M R Q Davies, MBChB Pret MMed (Surg) FCS SA FRCS UK & Edinburgh
A J W Millar, MBChB Cape Town FRCS UK FRCS Edinburgh FRACS DCH (RCP&Seng)
    FCS SA
H Rode, MBChB Pret MMed (Surg) FRCS Edinburgh FCS SA

Associate Professor:
J Lazarus, MBChB Cape Town FCS (Urol) SA

Senior Lecturers:
S Adams, MBChB Cape Town FC(Plast&ReconSurg) SA
A Alexander, MBBCh Witwatersrand FCS SA CertPaedSurg SA
G Copley, MBChB Cape Town FCSOtol SA
S G Cox, MBChB Cape Town FCS SA CertPaedSurg SA
S Dix-Peek, MBChB Cape Town FCSOrth SA
L C Padayachy, MBChB Pret FCSNeurosurg SA MMed Cape Town
T Pollock, MBChB Cape Town FCSOphth
C Tinley, MBChB Stell FRCOphth

**Research Social Worker:**
R Albertyn, BSoSc(MW) UFS BA(Hons)(GMW) Stell PhD Cape Town

**Child Accident Prevention Foundation of Southern Africa (Childsafe):**
P Nyakaza, BA (SocWrk) UWC

**Senior Medical Technologist:**
J Raad, DipMedTech(Microbiol)(Haem) UJ

**Plastic, Reconstructive and Maxillo-facial Surgery**
*F16, New Groote Schuur Hospital*

**Associate Professor and Head:**
D A Hudson, MBChB MMed Cape Town FCS SA FRCS

**Consultants Full-time:**
K G Adams, MBChB Cape Town FC Plast(Plast&ReconSurg) SA
S Adams, MBChB Cape Town FC Plast(Plast&ReconSurg) SA

**Senior Lecturers Part-time:**
D B Fernandes, MBChB FRCS Edinburgh
S Geldenhuys, MBChB FCS SA
A Landau, MBChB Cape Town FCS SA
D Lazaru, MBChB Cape Town FCS SA
R Lechtae-Grüter, MD MMed Cape Town
S Meintjes, MBChB MMed Cape Town
C Pienaar, MBChB UOFS FCS SA
P J Skoll, MBChB Cape Town FCRS FCS SA
L B van Oudenhove, MBChB Cape Town FCS SA
J E van Zyl, MBChB Stell FCS SA
M van der Velde, MBChB FCS SA

**Part-time Dental Surgeon and Acting Head of Oral and Dental Surgery:**
G Kariem, BChD UWC MChD MFOS Stell

**Maxillo-facial and Oral Surgery: Part-time Consultants:**
G J Hein, BChD MChD UWC
G Kariem, BChD UWC MChD MFOS Stell

**Maxillo-facial Prostheticist:**
R Goolam, BDChD MChD

**Dentists:**
S Aniruth, BChD UWC
A Kassan, BDS RAU
S Singh, BChD UWC BSc UKZN

**Maxillo-facial Prosthetics Technologist:**
R Wallis, DipDentTech SA CertAdvOrthod&MaxilloFacialTech
**Surgical Gastroenterology**

_E23, New Main Building, Groote Schuur Hospital_

**Professor and Head:**
J E J Krige, MBChB MSc (Med) Cape Town FCS SA FACS FRCS

**Associate Professor and Head Colorectal Clinic:**
P A Goldberg, MBChB Cape Town FCS SA

**Senior Lecturers:**
M Bernon, MBChB Witwatersrand FCS SA Cert Gastroenterology
A B T Boutall, MBChB Stell FCS SA Cert Gastroenterology
S Burmeister, MBChB Cape Town FCS SA Cert Gastroenterology
G Chinnery, MBChB Witwatersrand MMed FCS SA Cert Gastroenterology

**Urology**

_E26, New Groote Schuur Hospital_

**Head:**
J M Lazarus, MBChB Cape Town FCSUrol SA

**Emeritus Associate Professor:** (subject to approval at time of print).
R D Barnes, MBChB Cape Town FCSUrol SA

**Senior Lecturers Part-time:**
L A Aldera, MBChB Cape Town FCSUrol SA
T M Borchers, MBChB Cape Town FCSUrol SA
K S Jehle, MBChB UFS MRCS (Eng) FCSUrol SA

**Senior Lecturers Full-time:**
L Kaestner, MBChB Stell FCSUrol SA MMed Cape Town
J M Lazarus, MBChB Cape Town FCSUrol SA
S Sinha, MB BS Ranchi, HDipSurg FCSUrol SA FRCS Glasgow
S G Smit, MBChB Stell FCSUrol SA
Adolescent Health Research Unit (AHRU)
46 Sawkins Road, Rondebosch

Adolescents face a wide range of health problems due to a combination of biological, social and psychological factors. There is therefore a clear need for a research facility that focuses specifically on the health needs of adolescents. The AHRU was established in 2003 by Prof Alan Flisher as an interdisciplinary facility to co-ordinate, promote and facilitate research on all aspects of adolescent health. The specific aims of the Unit are to: facilitate cutting edge interdisciplinary research that addresses key national public adolescent-health priorities; promote networking among adolescent-health researchers, practitioners and policy makers; increase the profile of the Faculty of Health Sciences, UCT, with regard to world-class adolescent-health research; provide policy consultation at local, provincial, national and international levels; and increase and improve educational offerings in adolescent health at undergraduate and postgraduate levels.

P J de Vries, MBChB Stell MRC Psych London PhD Cantab
C Mathews, BA Natal MSc (Med) PhD Cape Town

Alan Flisher Centre for Public Mental Health
Department of Psychiatry and Mental Health, University of Cape Town, and Department of Psychology, University of Stellenbosch

Mental health is increasingly acknowledged as a major public health and development issue. Currently mental disorders account for five of the 10 leading causes of health disability, and by the year 2020 it is estimated that unipolar depression will be the second leading cause of health disability in the world. In South Africa, neuro-psychiatric disorders are ranked third after HIV/AIDS and other infectious diseases in their contribution to the total burden of disease. Mental distress and disorder are higher among poor, marginalised and disrupted communities; and among those with the least agency and power within these communities, such as children, women, the elderly, refugees and those with disabilities. The economic and social burden of mental disorders affects not only individuals, but also their families and communities. In spite of these overwhelming needs, many low and middle income countries, particularly those in Africa, are poorly equipped to address mental health. In Africa, 70% of countries spend less than 1% of their meagre health budgets on mental health. A crucial gap is the overall policy, service and legislative frameworks that enable governments to deliver these intersectoral interventions and address mental health systematically as a public health and development issue.

C Lund, BA (Hons)(Psych) MA MSocSci (ClinPsych) PhD Cape Town

Brain and Behaviour Initiative (BBI)
J-Block, Groote Schuur Hospital

The Brain-and Behaviour Initiative is a University of Cape Town signature theme; a cross-Faculty effort aimed at facilitating innovative multidisciplinary research. The Brain and Behaviour Initiative aims to contribute to issues that are particularly relevant to the South African and African contexts, such as psychological trauma, substance use, and neuroHIV. Members of the Initiative employ a range of methods in this work, including phenotyping, cognotyping, genotyping, brain imaging and characterizing molecular signature. A number of NRF Chairs are associated with the Initiative, and the Initiative has established BBI postdoctoral fellowships and contributed to new degrees (such as the MMedSci Neuroscience degree) that foster transdisciplinary research.
CANSAs Colorectal Cancer Research Consortium
Room N3.18, Level 3, Wernher and Beit North, IDM

This research consortium involves a team of geneticists, surgical gastroenterologists and anatomical pathologists, whose efforts are aimed at unravelling the biology underlying familial cancers. The work involves extensive field operations, ranging from distant rural environments in the Northern Cape to the urban environment in the Western Cape. While offering the very positive immediate translation to the clinical environment in presymptomatic testing and targeted clinical surveillance in those at highest risk, molecular genetics is used to understand the biology of the familial forms of disease, and as a clue to understanding the greater burden of sporadic cancers.

Professor and Director:
R S Ramesar, BSc(Hons) MSc UKZN PhD Cape Town

Cardiovascular Research Unit
Third Floor, Chris Barnard Building, Faculty of Health Sciences

The Cardiovascular Research Unit is an integral part of the Division of Cardiotoracic Surgery. As such, it provides postgraduate training in the disciplines of Biomaterials, Cardiothoracic Surgery and Computational Biomechanics. Both MSc(Medicine) and PhD degrees by dissertation are offered in these disciplines.

Laboratory-based research is carried out in the fields of biomaterials, myocardial regeneration, cardiovascular biomechanics, regenerative vascular grafts and tissue engineering.

Professor and Director:
P Zilla, MD PD Vienna DMed Zurich PhD Cape Town

Deputy Director:
P Human, PhD Cape Town

Associate Professor:
T Franz, PhD Bremen

Associate Professor Part-time:
A Linegar, MBChB PhD FCS SA

Senior Lecturers:
D Bezuidenhout, PhD Stell
N H Davies, PhD Cape Town

Laboratory Assistant:
R Michaels

Centre for Environmental and Occupational Health Research (CEOHR)
Level 4, Falmouth Building South

The Centre, a WHO collaborating centre in occupational health since 2005, was upgraded in 2009, following its initial establishment as a research unit in 1993. The core objectives of the Centre are:

- To be a principal centre of occupational and environmental health research, teaching and training occupational medical clinical services, policy advisor, technical consultant
services, advocacy and a source of supportive outreach activities in South Africa, in the
Southern and Eastern regions of Africa, in Africa more generally, and internationally;

To conduct multidisciplinary research, teaching and service provision integrating
laboratory, clinical, epidemiological and policy skills in relation to occupational-health
problems that have high priority in Southern Africa in order to facilitate identification and
improved characterisation of these and other problems and to better understand the
determinants of these problems and their solutions;

To explore and develop means of maintaining the health of individuals and the
environment, especially the work environment, and of preventing the development of
health problems in those exposed to injurious environments at work or more generally;

To conduct public policy research into issues ranging from toxic or injurious exposures
through to health surveillance and the functioning of relevant health services including
promotive, preventive, curative and rehabilitative/compensation aspects;

To foster inter-institutional research, teaching and service (including outreach)
collaboration with United Nations and other agencies;

To foster local and global networks for environmental and occupational health promotion
through collaboration with United Nations and other agencies; and

To implement the results of research in teaching, training, policy, service provision and
outreach.

Associate Professor and Director:
MA Dalvie, BSc BSc(Med)(Hons) MSc (Med) PhD Cape Town

Associate Professor and Deputy Director:
H-A Rother, BA MA PhD Michigan

Professors:
R Ehrlich, BBusSc MBChB PhD Cape Town DOH Witwatersrand FFCH FCPHM (OccMed) SA
M F Jeebhay, MBChB UKZN DOH MPhil (Epi) Cape Town MPH (OccMed) PhD Michigan
L London, MBChB MMed MD Cape Town BScMed(Hons) DOH Witwatersrand

Professor Part-time:
M L Thompson, BSc(Hons) Natal PhD Gottingen

Emeritus Professor:
J E Myers, BSc MBChB MD Cape Town DTM&H MFOM UK

Research Officer:
Z Holtman, MA (ResPsychology) PhD Cape Town

Research Co-ordinator:
R Baatjies, BTech MTech CPUT MPH Witwatersrand PhD Cape Town

Honorary Research Associates:
R Matzopoulos, BBusSci MPhil (Epi) PhD Cape Town
A Saban, BSc (Zoo & Psych) BSc(Hons)(Psych) MA (ResPsych) PhD Cape Town
H Williams, MBChB DOH MMed Cape Town FCPHM (OccMed) SA

Other Staff:
M A De Souza, MBChB MMed (PubHMed) Cape Town FCPHM (OccMed) SA
The Centre for Infectious Disease Epidemiology and Research conducts multidisciplinary research on priority infectious diseases in Southern Africa, in order to improve disease prevention and management. The Centre has strong links to service providers at provincial and national level, and a long track record of conducting operations research around service delivery challenges. Staff includes epidemiologists, biostatisticians, mathematical modellers, social scientists and public health specialists.

Areas of research include:

- **Observational epidemiology:** CIDER is an internationally recognized centre for observational research on HIV care and treatment in both adults and children. As part of this the Centre hosts a global project for cohort research on paediatric HIV treatment, houses a regional data centre for collaborative HIV cohort research in Southern Africa, and provides support not only to provincial and national HIV treatment initiatives but also to a range of individual projects. The Centre is also involved in a range of prospective HIV prevention studies, focused primarily on the prevention of mother-to-child transmission (PMTCT) of HIV and other aspects of maternal and child health.

- **Health systems research:** CIDER is involved in a number of projects that seek to identify novel service delivery approaches to strengthen services relating to antiretroviral therapy (ART), PMTCT, tuberculosis (TB), sexually transmitted infections (STI) and other services for priority conditions in this setting.

- **Health information systems:** The Centre plays a central role in the development and evaluation of health information systems appropriate to the region, with particular emphasis on informatics to support ART, TB and PMTCT services.

- **Mathematical modelling:** CIDER personnel lead the development and application of mathematical modelling to help address key questions in the prevention and treatment of infectious diseases of interest, including HIV and STI.

**Associate Professor and Director:**
L Myer, BA Brown MA MBChB Cape Town MPhil PhD Columbia

**Senior Clinical Research Officer and Deputy Director:**
M Davies, MBChB MMed Cape Town FCPHM S.A

**Associate Professors Full-time:**
A Boulle, MBChB PhD Cape Town MSc London PCPHM S.A
D Coetzee, BA Cape Town MBCh BPH DTM&H DOH Witwatersrand FCPHM S.A MSc (Epi) Columbia

**Senior Clinical Research Officer Full-time:**
E Kalk, MBChB Witwatersrand PhD Birmingham MRCP London DipHIVMan S.A

**Senior Research Officers Full-time:**
C Colvin, BA MA PhD Virginia MPH Cape Town
K Stinson, MMus MPH PhD Cape Town

**Clinical Research Officer Part-time:**
R de Waal, MBChB Cape Town DipPharmMed UK

**Research Officers Full-time:**
M Cornell, MPH Cape Town
L Johnson, BBusSc PGDipActSc PhD Cape Town
M Osler, BS Colorado MPH Cape Town

Research Officer Part-time:
K Hilderbrand, BSc Sussex MSc London

Honorary Professor:
J McIntyre, MBChB Zimbabwe FRCOG

Honorary Senior Lecturer:
D Pienaar, MBChB MMed Cape Town FCPHM SA
E Goemare, MSc MD DTMH Belgium DSc h.c. Cape Town

Honorary Research Associates:
N Ford, BSc Warwick DHA Liverpool MPH Cape Town PhD Simon Fraser
G van Cutsem, BSc FNDP Namur MD UCL Brussels DTM ITM Antwerp MPH Cape Town

Visiting Professors:
T Rehle, MD Munich MPH London PhD Antwerp
M Egger, MD Bern FFPH MSc London DTM&H Basel

Community Eye Health Institute
H53, Old Main Building

The Community Eye Health Institute provides postgraduate training in community eye health. Both a PGDip and an MPH (community eye health) track are offered. Support for programme planning and programme evaluation is provided for blindness prevention programmes in a number of African countries.

Director: D Minnies MPH

Desmond Tutu HIV/AIDS Research Centre
IDM, Wernher & Beit Building North

Professor and Head:
R Wood, MBChB Cape Town DCH DTM&H FCP SA

Professor:
L-G Bekker, MBChB PhD Cape Town DCH DTM&H FCP SA

Associate Professors:
S Lawn, BMedSci MB BS MRCP UK MD DRM&H DipHIVMed
C Morrow, PhD Cape Town

Medical Researchers:
R J Kaplan, Arts Diploma (MD) Netherlands
J Middelkoop, MBChB PhD Cape Town
C Orrell, MBChB Cape Town MSc DCH SA

Research Officers:
N Killa, BPharm
M Vogt, NatDip(MedTech) SA
Research Co-ordinators:
J Aploon, BA
E Fielder, SPN
C Heiberg, BSc Dietetics MTechBiomedicalTechnology
M Rattley, SPN
S Roux, MBChB MPH
M Wallace, PhD

Gender, Health and Justice Research Unit
Room 101, Entrance 1, Falmouth Building
e-mail: mrd-gender@uct.ac.za

The Gender, Health and Justice Research Unit is an interdisciplinary research unit at the University of Cape Town, officially launched in August 2004. The mission of the Unit is to improve service provision to victims of violence against women in South Africa through research, advocacy and education. It draws together researchers from various disciplines, including law, criminology, forensic sciences, gynaecology and psychology. The Unit aims to fulfil its mission by focusing on five core areas:

§ Research – Conducting rigorous, evidence-based research into experiences of and responses to violence against women, particularly exploring the intersections between health and criminology, forensic sciences, gynaecology and psychology.
§ Advocacy – Developing well-informed, evidence-based advocacy positions to support legal and policy reform in South Africa and similarly situated countries.
§ Education – Development of university-based courses that allow law and medical students to understand the intersections between these two disciplines in their response to violence against women.
§ Training – Development and implementation of innovative training programmes to build the capacity of criminal justice and health personnel.
§ Consultancy services – Providing technical assistance to a wide range of government departments, non-governmental organisations and community-based organisations.

Director and Principal Researcher:
L M Artz, BA (Hons) SFU MA Cape Town PhD Queens University Belfast

Senior Researcher:
K Moult, BSoSc (Hons) Cape Town MA George Washington University PhD American University (Washington)

Researchers:
K G Aschman, BSoSc(Hons) Cape Town MSc Oxon
K Corral, Licenciatura (Psychol) MA (Clinical Psych) PhD University of Duesto
T Meer, BA (Hons) UKZN MA Dalhousie University Halifax
J Mthembu, BA(Hons) MA UWC

Research Affiliates:
H Combrinck UWC
B Iur LLB BA (Hons) Northwest LLM Cape Town PhD UWC
J Flavin (Fordham University), BA Kansas MA PhD American University (Washington)

Geriatric Medicine and the Albertina and Walter Sisulu Institute of Ageing in Africa
The Albertina and Walter Sisulu Institute of Ageing in Africa conducts interdisciplinary research in Geriatric Medicine, Neurosciences, Neuropsychology, Old Age Psychiatry and Social Gerontology. Current research interests include physical, cognitive and social functioning in old age: quality of life; vascular risk factors and stroke; falls in older persons; quality of care; dementia and cognitive disorders; and social and economic well-being.

**William P Slater Chair of Geriatrics and Associate Professor:**  
M I Combrinck, MBChB BSc(Med)(Hons) PhD Cape Town FCP SA Neurology MRCP UK  
DTM&H London

**Associate Professor:**  
J A Joska, MBChB MMed PhD Cape Town FC Psych SA

**Senior Lecturers:**  
L de Villiers, MBChB Cape Town FCP SA  
S Z Kalula, BSc MBChB Zambia MMed MPhil PhD Cape Town FRCP UK

**Senior Lecturers Part-time:**  
K Ross, MBChB Stell FCP Cert Geriatrics SA  
K G F Thomas, PhD (Clin Psych) Arizona

**Honorary Senior Lecturer:**  
L Geflen, MBChB Cape Town MCFP SA

**Honorary Research Associate:**  
J R Hoffman, DPhil(Sociology) Oxon BA(Hons)

**Hatter Institute for Cardiovascular Research in Africa**  
*Fourth Floor, Chris Barnard Building*

**Director and Professor:**  
K Sliwa, MD Germany PhD DTM&H Witwatersrand FESC FACC

**Visiting Professor:**  
S Stewart, PhD Glasgow NFESC FAHA FCSANZ

**Honorary Professors:**  
P J Schwartz, MD PhD Pavia  
D M Yellon, PhD FESC FRCP UK

**Associate Professor:**  
S Lecour, PharmD PhD Dijon

**Visiting Professor:**  
G Cotter, MD FACC FESC Israel

**Health Economics Unit**  
*Falmouth Annex*
The Health Economics Unit (HEU) works to improve the performance of health systems through informing health policy and enhancing technical and managerial capacity in Sub-Saharan Africa. Its foundation is academic excellence in research in health economics and related health systems issues. The four core objectives of the HEU are:

- To conduct high-quality research in health economics, health policy and health systems;
- To train at the postgraduate level to improve technical research and health systems capacity;
- To develop capacity in health economics and related health systems research in Africa; and
- To provide technical support to facilitate the translation of health policies into practical programmes.

Senior Lecturer and Director:
E Sinanovic, BSc (Econ) Zagreb DipFinMg) Maastricht MCom (HealthEcon) Cape Town
   PhD (Health Econ) London

Professor:
D McIntyre, BCom(Hons) (Econ) MA (Econ) PhD Cape Town

Associate Professor:
S Cleary, BA Grahamstown BA(Hons)(Econ) MA (Econ) PhD Cape Town

Senior Lecturers:
J E Ataguba, BSc (Econ) Nigeria MPH (HealthEcon) PhD (Econ) Cape Town
A Honda, BA (Sociol) MSc (IntHealth) Tokyo PhD (HealthEcon) London

Lecturer:
V Govender, MCom (HealthEcon) Cape Town MPH (InternatHealth) Boston

Research Officers:
O A Alaba, BSc (Econ) MSc (Econ) PhD (Econ) Ibadan
M Orgill, BAdmin (Econ&PubAdmin) BAdmin(Hons)(Econ) MPhil (PubPolicy) Cape Town

Post-doctoral Fellow:
F Meheus, MSc (ApplEcon) Antwerp MSc (HealthEcon) Rotterdam PhD Nijmegen

Junior Research Fellows:
N Foster, BPharm Port Elizabeth MPH (HealthEcon) Cape Town
L Cunnama, BSc (Physio) MPH (HealthEcon) Cape Town

**HIV Mental Health Unit**

J-Block, Groote Schuur Hospital

The HIV Mental Health Research Unit is involved in neurobehavioral (specifically adherence and psycho-therapeutic interventions) and neuro-biological (specifically brain imaging, genetic, neurocognitive aspects, as well as drug interventions) research in HIV-associated neuropsychiatric disorders. The Unit is funded by the NIMH, MRC and NRF, as well as the University. It is collaborating with senior investigators from leading international and local groups.

J Joska, MBChB MMed (Psych) PhD Cape Town FCPsych SA
J Hoare, MBChB MPhil (Neuropsychiatry) Cape Town MRCPsych FCPsych S.A

**Institute of Infectious Diseases and Molecular Medicine**
Wolfson Pavilion, IDM Building

The Institute of Infectious Disease and Molecular Medicine (IDM) is a trans-faculty, multidisciplinary postgraduate research enterprise that operates in the fields of infectious disease and molecular medicine research. It is situated on the health sciences campus of the University of Cape Town (UCT) in a 7 100 m² state-of-the-art facility.

The IDM is distinguished by the ability to drive world-class research at the laboratory-clinic-community interface by engaging a wide range of scientific and clinical disciplines.

These include medical biochemistry; chemical biology; genetics; clinical and experimental immunology; paediatrics; microbiology; molecular and cell biology; virology; infectious diseases; vaccinology; epidemiology; medicinal chemistry; pre-clinical pharmacology; structural biology; bioinformatics and computational biology.

Established in 2004, the IDM has become the largest research entity at UCT and a national leader in research and human capital development in the field of health sciences.

Web address:  http://web.uct.ac.za/depts/idm

Professor and Director:
V Mizrahi, BSc(Hons) PhD Cape Town MSc AfTWAS MASSAf FRSSAfOMS

Full Members and Professors:
L-G Bekker, MBChB DCH DTM&H FCP PhD SA
J Blackburn, BA(Chem) MA(Chem) DPhil(Chem) Oxon
F Brombacher, PhD Freiburg
K Chibale, BSc(Ed) Zamb PhD Cantab FRSSAF
C M Gray, BSc(Hons) Western England MSc PhD Witwatersrand
W A Hanekom, MBChB Stell DCH FCP(Paed)
G Hussey, MBChB MMed Cape Town MScClinTropMed London DTM&H UK FFCH SA
A A Katz, PhD Weizmann Institute
S Kidson, BSc(Hons) MSc PhD Witwatersrand H Dip Ed JCE
P N Meissner, BSc(Med)(Hons) PhD Cape Town (Fellow of UCT)
R Millar, BSc(Hons) MSc London PhD Liverpool MRCP FRCP
MP Nicol, MBChB MMed (MedMicro) Witwatersrand DTM&H FCPPath(MicroBiol) SA PhD Cape Town
R S Ramesar, BSc(Hons) MSc UKZN PhD Cape Town
E P Rybicki, BScHons MSc PhD Cape Town MASSAf FRSSAf (Fellow of UCT)
B T Sewell, MSc Witwatersrand PhD London
E D Sturrock, BSc(Med)(Hons) PhD Cape Town FRSSAf (Fellow of UCT)
A L Williamson, BSc(Hons) PhD Witwatersrand MASSAf FRSSAf (Fellow of UCT)
C Williamson, BSc(Hons) PhD Cape Town MASSAf FRSSAf (Fellow of UCT)
R Wood, BSc(Hons) BMBCh Oxon MMed DSc(Med) FCP SA (Fellow of UCT)

Full Members and Associate Professors:
M Hatherill, MBChB DCH MMed MRCP FCPaed MD Cape Town
M Jacobs, BSc(Med)(Hons) PhD Cape Town
G Meintjes, MBChB PhD CapeTown MRCP UK FCP DipHIVMan SA MPH Johns Hopkins University
N Mulder, BSc(Hons) PhD Cape Town
J Passmore, BSc (Hons) UKZN PhD Cape Town

Full Member and Honorary Professor:
RESEARCH STRUCTURES

R Wilkinson, MA Cantab PhD DTM&H FRCP MRC Programme Leader National Institute for Medical Research London MBBCh Oxon (Wellcome Trust Senior Fellow in Clinical Science and Professor of Infectious Diseases Imperial College London)

Full Member and Senior Lecturer:
D P Martin, BSc(Hons) MSc UKZN PhD Cape Town

Affiliate Members and Professors:
K Dheda, MBBCh Witwatersrand FCP SA FCCP PhD FRCP London
J Greenberg, BSc (Physiol&Chem) Stell PhD Cape Town
G Maartens, MBChB MMed FCP SA DTM&H
B M Mayosi, BMedSc MBChB UKZN FCP SA DPhil Oxon FESC FACC FRCP MASSAf
M I Parker, BSc(Hons) PhD Cape Town MASSAf FIAS rTWAS
K Sliwa-Hahnle, MD PhD FESC FACC
D J Stein, BSc(Med) MBChB Cape Town FRCP PhD Stell DPhil
H J Zar, MBChB Witwatersrand FAAP BCPaed BCPaed Pulmonology USA PhD FCPaed SA

Affiliate Members and Associate Professors:
A Boulle, MBChB PhD Cape Town MSc London FCPHM SA
D Coetzee, BA Cape Town MBBCh DPH DTM&H DOH Witwatersrand FCPHM SA MS Columbia
B S Eley, MBChB FCP(Paed) SA BSc(Med)(Hons) Cape Town
H McDilleron, MBChB PhD Cape Town
L Myer, BA Brown MA MBChB Cape Town MPhil PhD Columbia

Associate Members and Associate Professors:
V Leaner, PhD Cape Town
T Scriba, BSc(Hons) MSc Stell DPhil Oxford

Associate Member and Honorary Associate Professor:
K A Wilkinson, MSc (Chem) PhD (Chem&PetideImmunol) Budapest MRC Senior Investigator Scientist, National Institute for Medical Research London

Associate Members and Researchers:
W Burgers, BSc(Hons) MSc Cape Town PhD Cantab
H Cox, BSc(Hons) MPH PhD UniMelb
W Horsnell, BSc(Hons) Leeds PhD London
H Jaspan, BSc USA MD PhD Tulane FAAP PaedsID Washington
D F Warner, BCom BSc(Hons) PhD Witwatersrand

Lung Infection and Immunity Unit
H46.41 Old Main Building, Groote Schuur Hospital

Holder of the SARChI Research Chair in “Lung Infection and Immunity in Poverty-related Diseases” and head:
K Dheda, MBChB Witwatersrand FCP SA PhD

Senior and Post-doctoral Scientists:
L Semple, MSc PhD Cape Town
G Theron, BSc(Med)(Hons) MSc PhD Cape Town
B Young-Gqamana, BSc PhD

Senior Lecturer and Pulmonologist:
R Van Zyl-Smit, MBChB MMed PhD Cape Town MRCP UK FCP DipHIVMan CertPulm SA
Medical Officer and Clinical Trial Co-ordinator:
M Pascoe, MBChB Cape Town

Laboratory Technologists:
B Jennings, MSc(Med)
R Meldau, BSc(Med)(Hons) Cape Town
V Woodburne, Lab Technician

Medical Research Council (MRC) Unit on Anxiety & Stress Disorders
Department of Psychiatry & Mental Health, University of Cape Town, and Department of Psychiatry, University of Stellenbosch.

The Medical Research Council (MRC) Unit on Anxiety and Stress Disorders was founded with the mandate of: 1) establishing a unit that focused specifically on research on the anxiety disorders; 2) fostering a multidisciplinary approach to these conditions, incorporating a bio-psycho-social focus; 3) promoting increased awareness of these conditions in the community; and 4) building capacity. The anxiety disorders are the most prevalent of the psychiatric disorders, and amongst the most disabling of all medical disorders. At the same time, given advances in basic and clinical neuroscience methodologies, there are now unique opportunities to advance our understanding and management of these conditions.

D J Stein, BSc(Med) MBChB Cape Town FRCPC PhD DPhil Stell

MRC/NHLS/UCT Molecular Mycobacteriology Research Unit

Professor and Director:
V Mizrahi, BSc(Hons) PhD Cape Town AfTWAS MASSAf FRSSAfOMS

The MRC/NHLS/UCT Molecular Mycobacteriology Research Unit (MMRU) is based in the Institute of Infectious Diseases and Molecular Medicine (IDM) and forms the UCT node of the DST/NRF Centre of Excellence for Biomedical TB Research (CBTBR). Research in the MMRU is focused on aspects of mycobacterial physiology and metabolism that are of relevance to drug discovery and drug resistance, and the Unit is best known for its work on mechanisms of DNA metabolism, resuscitation and culturability, respiration and cofactor biosynthesis in mycobacteria. In pursuing this focus, the MMRU has developed specific expertise in mycobacterial molecular genetics and applied these skills in the construction of approximately 150 single and multiple mutant strains of M. tuberculosis H37Rv and several hundred targeted mutants of M. smegmatis. The recipient of two major grants from the South African government, the Unit makes research capacity development a key focus of laboratory work. The Unit, which currently comprises senior scientists, post-doctoral fellows, and both PhD and MSc students, also participates in several major TB drug discovery consortia funded by grants from the Bill & Melinda Gates Foundation under the TB Drug Accelerator programme (HIT-TB), the Seventh Framework Programme of the European Union (MM4TB), and the Technology Innovation Agency of South Africa (SATRII).

Senior Research Officer:
D F Warner, BCom BSc(Hons) PhD Witwatersrand

MRC/UCT Drug Discovery and Development Research (DDD) Unit
Institute of Infectious Disease and Molecular Medicine (IDM), Wernher & Beit Building North
The MRC/UCT Drug Discovery and Development Research (DDD) Unit, amongst other things, focuses on:

- Becoming a principal Drug Discovery and Development Research (DDD) Unit in South Africa, in Africa and internationally;
- Establishment of a scientific infrastructure as well as capacity for drug discovery and development of natural products in the broad sense using general biodiversity, including traditional medicines;
- Development of infrastructural and operational systems for new drug discovery and development, with special reference to natural product-guided medicinal chemistry as well as biological screening platforms against infectious and other diseases;
- Performing customised synthesis of compounds with important biological activities;
- Attracting young South African scientists, and scientists from elsewhere on the African continent, and in doing so to make a concerted effort at transformation and capacity building;
- Providing career development opportunities for mid-career researchers;
- The introduction of modern innovative drug-discovery tools including novel accessible screening;
- Enhancing the value of the identified therapeutics, by strengthening pre-clinical development capacity including the introduction of predictive (in silico and in vitro) drug metabolism and pharmacokinetic (DMPK) studies as reflected in the processes of Absorption, Distribution, Metabolism and Excretion (ADME).

Professor and Director:
K Chibale, BScEd Zambia PhD Cantab FRSSAF

Associate Professor:
P J Smith, BSc BSc(Hons) PhD Cape Town

Other Staff:
N Chigorimbo-Tsikiwa, BSc Rhodes BSc(Med)(Hons) MSc PhD Cape Town
N Dambuza, BSc BSc(Hons) MSc NMMU
K Dhansay, BSc MSc Cape Town
K Govender, BSc BSCharm(Hons) Cape Town
T Kellerman, BSc BSc(Hons) Stell MSc Witwatersrand PhD Cape Town
C Lategan, PhD Cape Town
S Louw, BSc MSc PhD Stell
P Melariri, PhD Cape Town
S Meredith, BSc BSc(Med)(Hons) PhD Cape Town
N Mwaura, BSc BSCharm MSc Nairobi
M Njoroge, BSc BSCharm MSc Nairobi
J Norman, Quality Assurance Manager
S Salie, Technical Officer
D Taylor, BSc BSc(Med)(Hons) Cape Town

MRC/UCT Human Genetics Research Unit
Room 3.14, Level 3, Wernher and Beit North, IDM

The UCT/MRC Human Genetics Research Unit benefits from the strong history of excellent research within UCT's Division of Human Genetics, and focuses its efforts on the genome research/clinic interface, building capacity as one of its major outcomes.

The envisaged expansion of the unit is focused in the areas of:

- developing a high throughput genetic analysis facility for the purpose of disease-genomic research;
- training researchers to map and identify genes which are of interest in and to our
understanding the biology of such genetic elements by drawing on the expertise within the Institute of Infectious Diseases and Molecular Medicine on the Faculty of Health Sciences campus, and within other relevant institutions in the country.

The core expertise and resident functions in the Unit will ultimately include:

- Genetic study co-ordination which helps with the development and co-ordination of patient, family and population-based studies, and the design of such investigations;
- assistance with the development of diagnostic criteria and screening for specific research programmes;
- subject contact and collection of biological material;
- a high-throughput genetic analysis capability to carry out large-scale genotyping and sequencing to identify disease-predisposing elements in our populations.

Professor and Director:
R S Ramesar, BSc(Hons) MSc UKZN PhD Cape Town

**MRC/UCT Immunology of Infectious Diseases Research Unit**

Room S1.27, Werner and Beit Building South

The control and eradication of infectious diseases, leading cause of childhood and adult morbidity and mortality, is a high priority area for South Africa and the African continent. The unit investigates the underlying cellular and molecular immunological mechanisms for host protection or failure thereof in experimental murine models for human diseases like:

- Tuberculosis
- Leishmaniasis
- Helminthic diseases (bilharziosis)
- African trypanosomiasis (sleeping sickness)
- Allergy
- Ulcerative colitis

The Unit’s mission is to be relevant as an excellent multidisciplinary and international team, embracing both basic and applied research, in order to improve capacity, teaching and training in Immunology.

Professor and Director:
F Brombacher, PhD Freiburg

**MRC/UCT Medical Imaging Research Unit**

Room 514, Anatomy Building

The late Allan Cormack, who won the Nobel Prize for Medicine in 1979 for his pioneering work on the computed tomography (CT) scanner, was the inspiration that led to the creation of MIRU. Professor Cormack was an alumnus of UCT who performed his research at Groote Schuur Hospital in the mid-1950s. The mission of the Unit is to conduct world-class research in medical imaging that specifically addresses the healthcare needs of Africa. The Unit has a multidisciplinary focus, attracting talented physicists, engineers, computer scientists and clinicians. Research in the Unit focuses on the role of medical imaging in addressing healthcare problems such as trauma, cancer, tuberculosis, cardiovascular disease, neuromuscular disorders, brain disorders and the effects of alcohol abuse.

Professor and Director: T Douglas, BScEng MBA Cape Town MS Vanderbilt PhD Strathclyde

**MRC/UCT Research Group for Receptor Biology**
Wernher and Beit Building North

The mission of the group is to study the structure and function of G protein-coupled receptors and to apply the research to understanding and treating diseases that have major effects on the social and economic welfare of South Africa. The Group focuses on the gonadotropin-releasing hormone receptors and on the kisspeptin receptor, which are central regulators of reproductive function, on the prostaglandin receptors and their role in cervical cancer and on the CCR5 chemokine receptor and its role in HIV entry and infection.

Co-Directors:
C A Flanagan, BSc(Hons) PhD Cape Town
A A Katz, PhD Weizmann Institute
R P Millar, BSc(Hons) MSc London PhD Liverpool

UCT Leukaemia Unit
Room 6.06, Chris Barnard Building

Director:
N Novitzky, PhD Cape Town FCP SA

Researchers:
L du Pisani, MBChB FPath(Haem)
C du Toit, MBChB MMed(Int Med) UOFS
R Mohamed, NDmedTech
S Mowla, PhD Cape Town
M Ntombogwana, MBChB FPath(Haem)
J Opie, MBChB FCP SA
K Shires, PhD Cape Town
W van Schalkwyk, MBChB FCPath(Haem) MMed(Haem)

Women’s Health Research Unit
Level 3, Falmouth Building South

The Women’s Health Research Unit (WHRU) was established in the Faculty of Health Sciences at the University of Cape Town (UCT) in 1996. The Unit is involved in research, teaching and technical health service support in the area of women’s health and gender and health. It is made up of a multidisciplinary team of researchers with expertise in public health, epidemiology, sociology and anthropology. The overall aim of the Unit is to improve the health of women through research that informs policy and practice.

Objectives

·  Act as a centre for women’s health research in South Africa
·  Conduct multidisciplinary and translational research in high priority areas
·  Conduct health systems research aimed at influencing policy
·  Support the public health sector
·  Develop capacity in the field of women’s health, and gender and health
·  Be involved in advocacy efforts
·  Network and collaborate nationally and internationally

The research focus can be summarized in terms of the following four thematic areas:
1) Socio-behavioural research
2) Health services operational research
3) Quantitative/epidemiological research
The Unit has established a model of work that is consultative and socially responsive and at the same time scientifically rigorous. Its strong links with government departments, communities and non-governmental organisations (NGOs), enables the voices of diverse stakeholders to be heard in both describing the issues and shaping solutions. The focus on women’s health is aligned with national and international concerns in addressing the health needs of women.

Associate Professor and Director:
J Harries, BA(Hons) MPhil MPH PhD Cape Town

Associate Professors:
D Cooper, BSocSc BA(Hons) PhD Cape Town
C Mathews, BA(Hons) MSc (Med) PhD Cape Town
J Moodley, MBChB Natal MMed PhD Cape Town

Emeritus Associate Professor:
M Hoffman, BScMed (Hons) MBChB DCM Cape Town

Senior Researcher:
D Constant, BSc (Physio) BSc(Hons) MSc (Med) MPH Cape Town
## ADDITIONAL INFORMATION

### FORMULAE FOR UNDERGRADUATE DEGREES WITH HONOURS AND DISTINCTION

*Subject to review and approval at time of print*

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<th>POINTS TOWARD HONOURS AND DISTINCTION</th>
<th>FIRST 75%+</th>
<th>UPPER 2ND 70-74%</th>
<th>LOWER 2ND 60-69%</th>
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### FIRST YEAR

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<td>PPH1001F</td>
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<td>PPH1002S</td>
<td>Becoming a Health Professional</td>
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<td>Integrated Health Sciences Part II</td>
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| Maximum points for first year examinations | 32 |

### SECOND YEAR

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| Maximum points for second year examinations | 40 |

### THIRD YEAR

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| Maximum points for third year examinations | 38 |

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<td>PPH4013W</td>
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| Maximum points for fourth year examinations | 38 |

### FIFTH YEAR

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<td>LAB5008H</td>
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<td>Pharmacology &amp; Applied Therapeutics</td>
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**Maximum points for fifth year examinations**  52

**SIXTH YEAR**

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<td>OBS6000W</td>
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<td>PED6000W</td>
<td>Paediatrics and Child Health</td>
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<td>CHM6000W</td>
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<td>PPH6000W</td>
<td>Family Medicine and Palliative Medicine</td>
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</table>

**Maximum points for sixth year examinations**  52

Maximum points for clinical examinations (years 1 to 3)  110

Maximum points for clinical examinations (years 4 to 6)  142

Maximum overall points (years 1 to 6)  252

<table>
<thead>
<tr>
<th>Award</th>
<th>Criteria</th>
<th>Minimum Point Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Distinction in the basic sciences</td>
<td>Student must score at least 80% of the maximum points for the preclinical examinations</td>
<td>88 out of 110</td>
</tr>
<tr>
<td>Distinction in the clinical sciences</td>
<td>Student must score at least 75% of the maximum points for the clinical examinations</td>
<td>106 out of 142</td>
</tr>
<tr>
<td>Award of degree with honours</td>
<td>Student must achieve an overall point score of at least 75% of the maximum overall points</td>
<td>189 out of 252</td>
</tr>
<tr>
<td>Award of degree with first class honours</td>
<td>Student must achieve an overall point score of at least 85% of the maximum overall points</td>
<td>214 out of 252</td>
</tr>
</tbody>
</table>

For students who transfer from other universities/faculties, an average will be allocated for their previous courses, based on achievement at UCT. “Repeat” results do not count.

**Health and Rehabilitation Sciences:**

**BSc Audiology and BSc Speech-Pathology:**
Degree with distinction calculation is based on the average of the marks obtained for all courses from the first to the fourth year of study. Distinction is awarded for an average of 75% - 100%.

**BSc Occupational Therapy:**
Degree with distinction calculation is based on the average of the marks obtained for all courses from the first to the fourth year of study. Distinction is awarded for an average of 75% - 100%.

**BSc Physiotherapy:**
Degree with distinction calculation is based on the average of the marks obtained for all courses from the first to the fourth year of study. Distinction is awarded for an average of 75% - 100%.
CLASS MEDALS, DEAN’S MERIT LIST AND PRIZES

[Note: Any student taking a course for a second time is ineligible for a prize or class medal.]

GENERAL NAMED PRIZES

BARNARD FULLER PRIZE For the best student qualifying for MBChB with first class honours.

FORMAN PRIZE For the undergraduate student who has made a special contribution to student affairs.

THE DEAN’S PRIZE For the top final year MBChB student.

PROFESSOR MARY ROBERTSON PRIZE FOR EXCELLENCE For the top female MBChB graduate.

PROFESSOR MARY ROBERTSON PROGRESS PRIZE For the graduating female MBChB student from a disadvantaged background who made the most progress over the six years of study.

STANLEY PHILIP NEUMANN MEMORIAL AWARD Awarded to the overall outstanding student completing the courses prescribed for semesters 3 to 5 of the MBChB programme.

ZALMEN ATLAS MEMORIAL PRIZE For the best student in the first year of the MBChB programme.

ZWARENSTEIN PRIZE For the best student in the first year of the MBChB programme.

NAMED PRIZES BY DEPARTMENT

DEPARTMENT OF ANAESTHESIA

PRISMAN PRIZE For two final year MBChB students submitting the best portfolios in Anaesthesia. This submission is voluntary. It will entail a detailed and comprehensive essay on all aspects of the peri-operative Anaesthetic management and issues of one of their surgical clinical case studies already included in their sixth year MBChB Surgery portfolio. A monetary prize will be awarded to the two best portfolios. The Department of Anaesthesia reserves the right to withhold the prize if the standard of the essays is deemed to be inadequate.

SA SOCIETY OF ANAESTHETISTS’ MEDAL For the best fifth year MBChB student in Anaesthesia.

DEPARTMENT (SCHOOL) OF CHILD & ADOLESCENT HEALTH

DOWIE DUNN MEMORIAL PRIZE Awarded to the best sixth year MBChB student in Paediatrics.
DR I MIRVISH PRIZE
Awarded to the top student in fifth year MBChB Paediatrics.

DR KATHY CHUBB MEMORIAL PRIZE
For the final year MBChB student (preferably female) who has shown excellent overall performance in the fields of Paediatrics and Surgery, and recognised dedication to the practice of Medicine.

NESTLÉ PRIZE
For the best final year MBChB student in Paediatrics oral and clinical examinations.

DEPARTMENT OF CLINICAL LABORATORY SCIENCES

General
LAFRAS STEYN CLINICAL LABORATORY SCIENCES PRIZE
Awarded at the bi-annual research day for the best student oral presentation of the day.

Anatomical Pathology
B J RYRIE BOOK PRIZE
For meritorious work in Anatomical Pathology in third year MBChB.

R O C KASHULA PRIZE
For the best Anatomical Pathology essay in semester five MBChB.

Chemical Pathology
RAYMOND ZETLER BOOK PRIZE
For the MBChB student with the best examination results in third year Chemical Pathology.

Forensic Pathology
DIVISIONAL PRIZE
For the top student in LAB5008H Forensic Pathology

Haematology
H S EBRAHIM MEMORIAL MEDAL
Awarded on the results of the third, fourth and sixth year MBChB examinations on haematology, with the final result being decided by an oral examination.

Medical Biochemistry
MARK HORWITZ PRIZE
For the best MBChB student in Molecular Medicine (LAB3020W).

SANTILAL PARBHOO PRIZE
For the best Special Study module in Molecular Medicine.

Medical Microbiology
THE ARDERNE FORDER BOOK PRIZE
Awarded to the MBChB student who has shown the most improvement in Medical Microbiology (semesters 3 to 5)

Virology
GOLDA SELZER PRIZE
For achievement in Virology in second and third year MBChB Integrated Health Systems Parts IA, IB and II (HUB2017H, LAB2000S and LAB3009H).

DEPARTMENT (SCHOOL) OF HEALTH & REHABILITATION SCIENCES
Communication Sciences and Disorders (Audiology and Speech-Language Pathology)

A B CLEMONS AWARD
Awarded by the South African Speech-Language-Hearing Association for the student who obtains the highest mark for the research report submitted in the final year of study, provided that a minimum of 75% is obtained.

P DE V PIENAAR PRIZE
Awarded by the South African Speech-Language-Hearing Association to the student who maintained the highest academic standard over four years, with a minimum average of 75% throughout the programme.

SA ASSOCIATION OF AUDIOLOGISTS PRIZE
For the best clinical performance in Audiology.

SUSAN SWART PRIZE
To the best Audiology student who has maintained the highest academic standard over four years, provided a minimum average of 75% has been obtained throughout the programme.

THE SOUTH AFRICAN SPEECH-LANGUAGE-HEARING ASSOCIATION PRIZE
Awarded to the best final year student in Audiology: Clinical, provided an average of at least 75% has been obtained.

THE SOUTH AFRICAN SPEECH-LANGUAGE-HEARING ASSOCIATION PRIZE
Awarded to the best final year student in Speech-Language Pathology: Clinical, provided an average of at least 75% has been obtained.

Occupational Therapy

OCCUPATIONAL THERAPY ASSOCIATION OF SOUTH AFRICA (OTASA)
For the BSc Occupational Therapy student/s who presented the best final year research project.

PRACTICE LEARNING MERIT AWARD
For the best final year BSc Occupational Therapy student/s in fieldwork.

MARIÉ DU TOIT ANNUAL AWARD
For the BSc Occupational Therapy students who presented the best final year research project nationally, in the previous year.

Physiotherapy

JOHANNES KARL WILHELM BINNEWALD TROPHY
For the best final year student in clinical Physiotherapy.

MARILYN AND TIM NOAKES AWARD
For the BSc Physiotherapy student with the overall highest marks during second and third year clinical practical courses.

PAGET PHYSIOTHERAPY SHIELD
For the student achieving the highest academic standard during the four years of BSc Physiotherapy study.

PHYSIOTHERAPY THIRD YEAR SHIELD
For the best overall student in third year BSc Physiotherapy.
SOUTH AFRICAN SOCIETY FOR PHYSIOTHERAPY TROPHY
For the best overall student in final year BSc Physiotherapy.

DEPARTMENT OF HUMAN BIOLOGY

AW SLOAN PRIZE
For the best performance in Integrated Health Sciences Parts 1 and 2 (HUB1006F and HUB1007S).

IONE SELLARS MEMORIAL PRIZE
For the best student in Anatomy & Physiology II for Health & Rehabilitation Sciences (HUB2015W).

KURT GILLIS PRIZE
For the best performance in Fundamentals of Integrated Health Sciences Parts 2 (HUB1011F).

MR DRENNAN MEMORIAL PRIZE
For the best student in HUB2017F and LAB2000S Integrated Health Systems Parts IA and Part IB in second year MBChB.

RICHARD WILLIAM SPENCER CHEETHAM PRIZE
For the highest mark in the neuroscience component of LAB3009H Integrated Health Systems Part II.

UCT SURGICAL SOCIETY PRIZE
For the second year MBChB student with the highest score in the Anatomy sections of OSPE and SAQ examinations throughout the year.

W A AND GORDON JOLLY PRIZES
For the best practical performance in each of the following:
- HUB2021S Integrated Anatomical and Physiological Sciences 2.
- HUB3006F General and Applied Physiology.
- HUB3007S Human Neurosciences.

DEPARTMENT OF MEDICINE

DR FRANCOIS MAJOOS MEDAL
For the top MBChB student in the fourth year Medicine.

DR HELEN BROWN PRIZE
For the second best final year student in Clinical Medicine.

JIM MacGREGOR PRIZE
For the medical undergraduate student who performs best in the Neurology course CHM5007W.

PROFESSOR NORMAN SAPEIKA AWARD
For the best fifth year MBChB Pharmacology student.

SIDNEY STEIN DERMATOLOGY PRIZE
For the sixth year MBChB student with the best overall results in Dermatology.

WILL-FRID EXNER BAUMANN MEMORIAL PRIZE
For the best results in final year Medicine in MBChB.
DEPARTMENT OF OBSTETRICS AND GYNAECOLOGY

CUTHBERT CRICHTON

OBSTETRICS PRIZE

For the best student in Obstetrics in fourth year MBChB (OBS4003W).

CUTHBERT CRICHTON PRIZE

For the best student in Obstetrics and Gynaecology in the final MBChB examinations.

JAMES T LOUW PRIZE

For the best student in Gynaecology at the end of fifth year MBChB.

DEPARTMENT OF PSYCHIATRY AND MENTAL HEALTH

SA SOCIETY OF PSYCHIATRISTS’ AWARD

For the most distinguished final year MBChB student in Psychiatry (PRY6000W).

DEPARTMENT (SCHOOL) OF PUBLIC HEALTH AND FAMILY MEDICINE

FAMILY PRACTICE/PRIMARY CARE PRIZE

For the best student in final year MBChB Primary Healthcare.

SOUTH AFRICAN ACADEMY OF FAMILY PRACTICE

For the top student in final year MBChB Family Medicine.

ISADORE JACOB WALT PRIZE

For the best student in Primary Healthcare in fourth year MBChB (PPH4043W).

JOHN FLEMING BROCK PRIZE

For the best fourth year Public Health MBChB student. (PPH4013W).

DEPARTMENT OF SURGERY

General Surgery

BERK-SILBER PRIZE

For the best student in the final written Surgery examination – fifth year MBChB.

DR KATHY CHUBB MEMORIAL PRIZE (also listed under School of Child & Adolescent Health)

For the final year MBChB student (preferably female) who has shown excellent overall performance in the fields of Paediatrics and Surgery, and recognised dedication to the practice of Medicine.

FACULTY OF HEALTH SCIENCES SURGERY PRIZE

For the final year MBChB student who has shown the greatest promise in surgery in the final MBChB examination (the student with the second highest mark).

J H LOUW PRIZE IN SURGERY

For the most distinguished student in the final MBChB surgical examination (the student with the highest mark).

MOFFATT MEMORIAL PRIZE

For a fifth year MBChB student who has demonstrated excellence in Surgery and an interest in the Humanities.
Neurosurgery
KAY DE VILLIERS PRIZE For the best performance in Neurosurgery in CHM5007W

Ophthalmology
J S DU TOIT MEMORIAL PRIZE For the winner of a competition in Ophthalmology open to fifth year MBChB students.
WELCH ALLYN S.A. For the top student in Ophthalmology fifth year MBChB.

Orthopaedic Surgery
SMITH & NEPHEW For the best overall fifth year MBChB student in Orthopaedic Surgery.
SYNTHESES PRIZES For the best fifth year MBChB Orthopaedic Surgery student in the final clinical examination.

Otorhinolaryngology
WELCH ALLYN S.A. For the student obtaining the highest marks in the final ENT examination in fifth year MBChB.

Paediatric Surgery
J H LOUW PRIZE IN PAEDIATRIC SURGERY For the best student in Paediatric Surgery in the final examination – fifth year MBChB.
SIDNEY CYWES PRIZE For the best achievement in Paediatric Surgery in the final year of the MBChB programme.

Urology
DONAL BARNES PRIZE For the best performance in an end-of-block viva examination and the Urology case report.

MEDALS

MBChB
Class medal for best overall performance in
PPH1001F Becoming a Professional, and
PPH1002S Becoming a Health Professional

Class medal for best overall performance in
HUB1006F Introduction to Integrated Health Sciences Part I, and
HUB1007S Introduction to Integrated Health Sciences Part II

Class medal for best overall performance in
HUB2017H Integrated Health Systems Part IA, and
LAB2000S Integrated Health Systems Part IB, and
LAB3009H Integrated Health Systems Part II

Class medal for best overall performance in Pathology components in
HUB2017H Integrated Health Systems Part IA, and
LAB2000S Integrated Health Systems Part IB, and
LAB3009H Integrated Health Systems Part II
Class medal for best overall performance in
PPH2000W Becoming a Doctor Part IA, and
SLL2002H Becoming a Doctor Part IB, and
PPH3000H Becoming a Doctor Part IIA, and
SLL3002H Becoming a Doctor Part IIB

Final year class medal for best overall performance in
PRY6000W Psychiatry

Final year class medal for best overall performance in
OBS6000W Obstetrics and Gynaecology

Final year class medal for best overall performance in
MDN6000W Medicine (including Allied Disciplines)

Final year class medal for best overall performance in
CHM6000W Surgery

Final year class medal for best overall performance in
PED6000W Paediatrics and Child Health

Final year class medal for best overall performance in
PPH6000W Family Medicine and Palliative Medicine

Gold medal for overall top performance throughout the MBChB programme

**HEALTH & REHABILITATION SCIENCES**

**BSc Occupational Therapy:**

(a) (i) A class medal to be awarded for best performance in each year of study (provided an average of 75% or above is obtained);

(ii) A class medal to be awarded for top performance in the following clusters:
- AHS3113W Foundation Theory for OT Practice I and AHS4119W Occupational Therapy Research & Practice Management.
- AHS3113W Foundation Theory for OT Practice I and AHS4120W Foundation Theory for OT Practice II.
- AHS3107W OT Theory and Practice in Physical Health, AHS3108W OT Theory and Practice in Mental Health, and AHS4121W Occupational Therapy Practice and Service Learning.

(b) Distinction for the degree: Overall average of 75% throughout all four years of study.

**BSc Physiotherapy:**

(a) (i) A class medal to be awarded for best performance in each year of study (provided an average of 75% or above is obtained);

(ii) A class medal to be awarded at the end of final year in the following three professional courses, provided a result of 75% or above has been obtained in each case:
- AHS4065W Clinical Physiotherapy III
- AHS4071H Applied Physiotherapy III
(b) Distinction for the degree: Overall average of 75% throughout all four years of study.

**BSc Audiology and BSc Speech-Language Pathology:**

(a) (i) A class medal to be awarded for best performance in each year of study (provided an average of 75% or above is obtained);

(ii) A class medal to be awarded for the best clinical performance in the following courses provided a result of 75% is obtained in each case:

- AHS3004H Clinical Speech Therapy II (third year BSc Speech-Language Pathology);
- AHS3008H Clinical Audiology II (third year Audiology);
- AHS4005H Clinical Speech Therapy IIIA and AHS4006H Clinical Speech Therapy IIIB (combined) (fourth year Speech-Language Pathology)
- AHS4008H Clinical Audiology IIIA and AHS4009H Clinical Audiology IIIB (combined) (fourth year Audiology).

(b) Distinction for the degree: Overall average of 75% throughout all four years of study.

**DEAN’S MERIT LIST**

**MBCChB**

All MBChB students in years 1 to 5 who have a full course load and with 75% or more for all courses will be acknowledged on the Dean’s Merit List (each year).

**HEALTH & REHABILITATION SCIENCES**

All Health and Rehabilitation Science students in years 1 to 3 who have a full course load and 70% or more for all courses will be acknowledged on the Dean’s Merit list (each year).

The name of the student in each discipline who is deemed to have made the most progress academically over the four years of study in each programme will be placed on the Dean’s Merit list.
GUIDE TO PROFESSIONAL BEHAVIOUR EXPECTED OF HEALTH SCIENCES STUDENTS (INCLUDING USAGE OF SOCIAL MEDIA)

The general rules for students in the faculty states that “students doing clinical work are expected to act in accordance with the ethical norms laid down by the Health Professions Council of South Africa”. This guide sets out the behaviour expected of all health sciences students in their personal and professional lives and in the presence of patients and their families. The intention of the guide is to encourage students to maintain high standards in their personal and professional lives and to strive to uphold, in their behaviour, the high esteem in which health professionals are viewed.

UCT Faculty of Health Sciences aims to develop distinctive qualities in all its graduates. These qualities are based on the CANMeds Framework. The Faculty aims to produce Expert Health Professionals who have the qualities of:

- Communicator
- Collaborator
- Manager
- Health advocate
- Scholar
- Professional

The Faculty expects its students to:

- Learn the knowledge and understanding of the scientific, philosophical, ethical and legal principles underlying the practice of patient centred care and demonstrate the ability to apply that knowledge and understanding to problem solving in the health care environment;
- Acquire the ability to work as an effective member of a health care team through understanding and respecting the roles of other health professionals and work collaboratively through appropriate interprofessional and interdisciplinary relationships in the interests of delivering a high level of patient care; and
- Be committed to forming appropriate partnerships with patients through respecting their cultural, ethnic, age, gender, sexual orientation and socioeconomic origins in order to optimise their health and the care they are offered.
- The following areas of general behaviour, dress, academic and clinical training, relationships with patients, relationships with colleagues, clinical practice and social media are presented as a guide in developing professional qualities.

General Behaviour

1 Students need to be aware that their behaviour outside the clinical environment, including in their personal lives impacts on both their clinical and academic work and may have an impact on the confidence that their patients and their teachers have in them and their fitness to practice.

Students are expected to be polite, honest, compassionate and trustworthy and act with integrity. This includes being honest when conducting research, writing reports and logbooks signing attendance registers and when completing and signing forms.

Students need to be present and punctual for all formally arranged learning opportunities and assessments or provide medical or other valid reasons for their absences.

Dress

2 Students are expected to dress appropriately, particularly when they are in contact with patients. Students are expected to:

(a) Be tidy, clean and neat;
(b) Refrain from wearing very casual or inappropriate clothes (no bare midriffs, shorts, short skirts or slipslops);
(c) Refrain from sporting hairstyles and jewellery that may offend patients and their families;
(d) Maintain a high standard of personal hygiene; and
(e) Wear uniforms or clean white coats where appropriate.

Academic and clinical training
3 Students need to take responsibility for their own learning and to maintain their learning and skills throughout their careers. This means that they need to keep up to date and practice as much as possible the skills that they are taught. Health sciences professionals learn through seeing procedures done, trying these skills under supervision or in a clinical skills laboratory and then practising the skills in a clinical environment under supervision until they are skilled enough to do these alone. Students are expected to gain as much clinical proficiency as they can.

Students are expected to:
(a) Attend all structured teaching and learning sessions (lectures, tutorials, clinics, ward rounds, after hours duties, laboratory sessions etc);
(b) Complete all assignments and written work on time;
(c) Show respect for the knowledge and skills of their teachers and others involved in their learning;
(d) Behave with courtesy towards teachers, administrators and support staff;
(e) Reflect on the feedback they are given about their behaviour and performance and respond appropriately;
(f) Respond to communication, whether this be in connection with patient care or their own education; and
(g) Give constructive feedback on the quality of their learning and teaching.

Relationship with patients
4 Health sciences students have extensive contact with patients and their families throughout the clinical years of their training. Patients generally look upon the students as part of the health care team. This places responsibilities upon the student to behave in a manner that earns the respect of patients.

Students are expected to:
(a) Be respectful, polite and considerate towards everyone including patients, their escorts, community members, staff and fellow students;
(b) Greet patients politely and address them appropriately being mindful of age differences and sensitive to the cultural context;
(c) Build relationships with patients and their families based on honesty, openness, trust and good communication;
(d) Maintain a professional boundary between themselves, their patients and anyone else close to the patient;
(e) Ensure that patients or their caregivers give their informed consent for any activity performed by the student on the patient;
(f) Ensure that they are adequately supervised when performing any procedures on patients;
(g) Be aware of the rights of the patient and respect the decisions made by patients;
(h) Not unfairly discriminate against patients nor allow personal views to affect the treatment that they provide. (This includes views about ethnic origin,
race, age, colour, culture, gender, sex, religious beliefs, political orientation, lifestyle, marital status, disability, sexual orientation, social and economic status etc).

(i) Ensure that they maintain patient confidentiality and not discuss the patient with anyone not directly involved in the patient’s care;
(j) Be aware of ethical issues in relation to the care of the patient;
(k) Ensure that they are clearly identified as students;
(l) Be aware of their own limitations in relation to the care of the patient and refer to their supervisors; and
(m) Ensure the protection of their own health when treating patients.

Relationship with colleagues
5 Teamwork is key to the work of the health professional. Health professional students have to be able to work effectively with their colleagues in order to deliver a high standard of care and ensure patient safety. Students need to develop skills to work in multi-disciplinary teams, offering respect for the skills of other members of the team and developing effective communication with all members of the health care team.

Clinical Practice
6 Being able to provide a high standard of clinical care is key to becoming a health professional.

Students are expected to:
(a) Recognise and work within the limits of their competence and ask for assistance when necessary;
(b) Be honest with patients and accurately represent their position as students;
(c) Ensure that they are appropriately supervised;
(d) Ensure that the treatment offered is based on clinical need;
(e) Be aware of scarce resources and not waste these;
(f) Maintain high standards of clinical practice;
(g) Raise concerns with the relevant authorities when clinical standards that could compromise patient or others safety are not upheld.

Social Media
7 Social media has grown phenomenally over the past few years. It has become common for health care professionals to use blogging, personal websites and online social networking in both their professional and personal lives. While social media is a useful tool, health professionals need to be aware of the risks, particularly to patient confidentiality and the blurring of professional and private boundaries that is posed by social media. Once information is posted on social media it is difficult and sometimes impossible to remove and can spread beyond an individual’s control. Inappropriate online activities can have a detrimental effect on relationships with colleagues, patients, employment prospects and personal integrity.

Be aware of:
(a) Maintaining confidentiality – do not post information about patients (living or deceased), colleagues or teachers on social media (even when names are removed) regardless if this communication is only meant for colleagues or
other health professionals.

(b) Refraining from defaming others – defamation is the publication, declaration or broadcast of material that is capable of lowering a person in the estimation of others thereby damaging the reputation of the subject. Do not re-post material about others that can be defamatory. Do not post comments that can harm the reputation of colleagues or the profession or jeopardise your future as a health professional.

(c) Doctor-patient boundaries – social media allows patients to access information about health professionals’ personal lives that goes beyond what a normal patient/health professional relationship would allow. Be aware of what you post about yourself and your personal life. Be careful not to violate professional boundaries. Avoid online relationships with current or former patients.

(d) Your ethical and legal obligations to protect patient confidentiality.

(e) Professional boundaries: think carefully before “friending” others, including employers, other health professionals, administrative staff, teachers and tutors and allowing them to access personal information. Don’t place staff members into an awkward position by requesting them to join your network.

(f) Be aware of the image you project of yourself online and how this can impact on your professional standing.

(g) Practical tips:
- Protect your privacy – be careful what personal information you share with others, check your privacy settings regularly (please note even with privacy settings in place, it is possible to underestimate the number of people who can see your posts and how quickly it can be spread)
- Consider the size of your audience – it is probably much wider than you think
- Check who your friends are – ensure that you do not have patients as your friends. Check past posts and ensure that you have not made offensive comments in the past.
- Check the groups you have joined – check the posts on the group to ensure that there are no offensive comments made or that the groups do not subscribe to racist, sexist, culturally insensitive or other such offensive or derogatory views.
- Check your photographs – are there any that you would not like your patients or colleagues to see?
PROCESS TO INVESTIGATE REPORTED STUDENT IMPAIRMENT OR UNPROFESSIONAL CONDUCT

Introduction

In terms of its mandate to guide health professionals and to protect the public, the Health Professions Council of South Africa (HPCSA) is responsible for ensuring that practitioners are fit to practise. This means that the HPCSA will not licence an impaired person to practise.

The Health Professions Council Act and the associated regulations relating to impairment of students and practitioners oblige students, practitioners and faculties of health sciences to report impairment when observed in students or in fellow students or members of the health professions to the HPCSA. The HPCSA is required to consider any report it receives and to make a decision on the merits of the case.

Definitions

Impaired: The Health Professions Council (HPCSA) defines impairment as “a condition which renders a practitioner incapable of practising a profession with reasonable skill and safety”.

The University understands this to mean that an undergraduate student may be reported as impaired where he or she:

- has become physically or mentally disabled to such an extent that the student is unable to perform the clinical duties of his/her chosen profession or it is not in the public’s interest to allow that student to practise the profession;
- has become unfit to purchase, acquire, keep, use, administer, prescribe, order, supply or possess any scheduled substance;
- has used, possessed, prescribed, administered or supplied any substance contrary to prescribed regulations; or
- has become addicted to the use of any chemical substance.

Unprofessional conduct: The HPCSA defines unprofessional conduct as “improper or disgraceful or dishonourable or unworthy conduct or conduct which, when regard is taken to the profession of a person who is registered in terms of this Act, is improper or disgraceful or dishonourable or unworthy”.

The University understands this to include but not to be limited to:

- Failure to attend academic, clinical or clinical service commitments and continuing to be absent from academic or clinical commitments without permission.
- Unethical behaviour (e.g. deliberate misrepresentation or dishonesty, abusive or foul language towards teachers, fellow students or patients).

The Student Development and Support Committee is a Committee consisting of several academic staff members who identify, support and monitor the performance of students with academic and other difficulties.

In the event of a reported disability this Committee may seek advice from the Disability Unit or other expert body.

The Dean’s nominee will ordinarily be the Deputy Dean: Undergraduate Education.
IMPAIRMENT REVIEW PROCESS

1 An impairment, or any physical or emotional or behavioural problem that may be or become an impairment, must be reported by either the student, tutor, fellow student, course convener or clinician teaching the student to the Student Development and Support Committee (SDSC) or to the Dean’s nominee. If the matter is reported to the Dean’s nominee, the Dean’s nominee may refer it to SDSC in the first instance. The role of the SDSC will be to assess whether the student needs support and, if so, to try to provide this support.

If the matter can be resolved with appropriate support and reasonable accommodation, the SDSC will arrange this and no further action needs to be taken. In such a case the Dean’s nominee will arrange for the Faculty Manager to record the findings in a letter to the student, with such conditions for continued registration as the Dean, acting on behalf of the Faculty, may determine. SDSC shall continue to monitor the student.

2 If the SDSC deems it to be not a matter of supporting the student, it will refer the matter to the Dean’s nominee.

3 The Dean’s nominee will assess the report and, if he/she believes that there is reason to do this, he/she will ask the relevant year convener, or another appropriate staff member who teaches the student, to chair a Conveners’ Committee, at which all conveners teaching/convening courses for which the student is registered in that year, report on whether they deem the student to be impaired, and/or unfit to undergo training and/or practise the relevant profession.

The Chair of the Conveners’ Committee will record the findings of the Committee in a written report to the Dean’s nominee.

4 The Dean’s nominee, having received the report of the Conveners’ Committee, will decide whether to drop the matter, or, if he or she believes there is reason to proceed, shall:
   (a) inform the student of the concerns and explain the process forward;
   (b) appoint a senior academic staff member who does not teach the student, to chair an Impairment Review Committee of two or more academic staff members who do not teach the student in the current year.

5 The Impairment Review Committee:
   (a) will provide the student with a copy of the report of the Conveners Committee and invite the student to submit a written response to it; assess the written report of the Conveners Committee and assess any written response by the student;
   (b) may require the student to undergo a professional assessment by an independent healthcare professional or other expert (e.g. an expert who is knowledgeable about the skills required for the relevant discipline, or who can assess a psychiatric or a substance abuse problem, and who is not teaching the student in the current year).
   (c) will consider the evidence and may, depending on the circumstances, interview the student, and then report its finding and the reasons for its finding in writing to the Dean’s nominee.
The Impairment Review Committee may decide that:
(a) the student’s registration will be cancelled with immediate effect in terms of the relevant Faculty rule/s; or
(b) there will be strict conditions for continued registration, with regular monitoring and with re-assessment by a due date, if necessary, after which a final decision about continued registration is taken; and/or
(c) the student’s impairment will be reported to the Health Professions Council of South Africa, at the time or, if appropriate, upon graduation.

If the finding of the Impairment Review Committee is that the student is unable to perform procedural skills or is unfit to undergo training and/or practise clinically as required by the profession, the Committee shall also report its decision about whether or not the outcome should be reported to the HPCSA.

The Dean’s nominee shall inform the student and provide the student with the finding of the Impairment Committee, orally and in writing. If the student was found unfit for training, the student’s registration is cancelled. The student is informed of the Committee's reasons and of the student's right of appeal to the Vice-Chancellor or nominee.

UNPROFESSIONAL CONDUCT

Any unprofessional conduct observed by a fellow student, tutor, course convener or other person shall be reported to the Deputy Dean.

The Deputy Dean shall, if he or she believes there is reason to do so,
(a) ask the Year Convener, or another appropriate academic staff member, to chair a Conveners Committee (made up of the conveners of the relevant academic year of study and members of the Student Development and Support Committee) to discuss the reported conduct and make a recommendation as to whether the reported conduct should be referred to a Professional Conduct Review Committee; and/or
(b) ask an independent academic staff member (who does not teach the student) to appoint a Professional Conduct Review Committee.

The Professional Conduct Review Committee (PCRC) shall comprise at least two senior academic staff members who are in the opinion of the Dean’s nominee able to act independently and objectively in their assessment of evidence from (amongst others) academic staff and the student concerned relating to the student’s alleged transgression of UCT, Faculty and HPCSA rules and regulations on misconduct and/or unprofessional behaviour.

The Professional Conduct Review Committee shall provide the student with a copy of the report of the Conveners Committee, if the matter has been considered by a Conveners Committee, and shall invite the student to respond in writing to this/these report/s.

The PCRC shall assess the evidence and record its finding and the reasons for its finding. The Committee shall on the basis of its finding decide a course of action with reasons in writing, namely that:
(a) the student’s registration be cancelled with immediate effect in terms of the relevant Faculty rule/s; or
(b) the student's action be referred for action under the rules on disciplinary
jurisdiction and procedures; and/or
(c) there be strict conditions for continued registration, with regular monitoring and with re-assessment by a due date, if necessary, after which a final decision about continued registration is taken; and/or
(d) the student’s impairment be reported to the Health Professions Council of South Africa, at the time or upon graduation.

6 The student will be advised that he/she may appeal to the Vice-Chancellor or nominee against the findings of the PCRC.
AVOIDING PLAGIARISM: A GUIDE FOR STUDENTS

What is Plagiarism?

You commit plagiarism – intentionally or not – in written work when you use another person’s sentences, ideas or opinions without acknowledging them as being from that other person.

In academic work, researchers build on the ideas of others. This is a legitimate and accepted way of doing research. Plagiarism is using someone else’s ideas or words and presenting them as if they are your own. It is therefore a form of academic cheating, stealing or deception. Because plagiarism is an offence, all universities take a very serious view of anyone who is found cheating. Those who are suspected of having plagiarized will be referred to the Vice-Chancellor or nominee for possible disciplinary action in terms of the rules on disciplinary jurisdiction and procedures (DJP1.1).

Not all plagiarism is deliberate, but even inadvertent plagiarism will be severely penalized. It is therefore your responsibility to know what will be regarded as plagiarism and to know how to avoid it.

What makes plagiarism tricky to avoid and dangerous is that it can take many forms.

Forms of Plagiarism

Academic writing requires of you to discuss existing literature but at the same time to come up with your own ideas; to rely on the findings of other researchers, but also to say something new and original; to give an exposition of key readings on the topic, but to express it in your own structure and own words. It is academically difficult to manage a path between these seemingly contradictory demands.

Plagiarism can range from deliberate academic dishonesty to accidental academic sloppiness, and can range from serious and clear forms of plagiarism to instances that are less obvious.

Obvious forms of plagiarism include:

1. Buying or borrowing a paper and copying it.
2. Hiring someone to write the paper or thesis for you.
3. Cutting and pasting large portions of text from the web or from someone else’s paper or book without any quotation marks (or clear indentation for block quotes) or proper reference to the source. The ease of cutting-and-pasting from electronic sources makes this a form of plagiarism that is particularly widespread.
4. Word-for-word copying of a sentence, or paragraph without any proper acknowledgement.
5. Direct translation into English of a paper – or large sections of writing – written in another language.
6. Citing sources that you didn’t actually use.
7. Using substantive extracts from your own earlier work without acknowledgement.

Less obvious forms of plagiarism include:

8. Not giving proper credit to someone else’s ideas or findings.
   When is it proper to give credit and when not? As a general rule, you need to give a reference for any text, diagram, table, illustration or an idea if it comes from:
   a. a book, journal, website, or any other public medium;
   b. what someone has said in an interview you have conducted;
   c. someone’s personal correspondence in the form of a letter or email.
You don’t need to give a reference or give credit if the idea, text, diagram, table, illustration or idea comes from:

a. your own insights, work or experiences. Ideas from co-authored papers, however, still need to be acknowledged;

b. writing up your own field notes or lab reports;

c. “common knowledge”, common sense observations, well-established facts, historical events (but you would obviously have to give a reference if you use an historical *document*) and myths. It is, of course, difficult to know exactly when something is “common knowledge”, but a general rule to follow is: if the same observation is made in multiple sources without any attached references, or if it is something that the general public is well aware of, then no references are needed.

9. *Improper paraphrasing.*
The rule to “put it in your own words” is not always helpful, because many of the accepted key words in academic discourse have precise meaning or are accepted expressions that you shouldn’t change. However, whenever you do written work you must distinguish what you have written from what you are paraphrasing or quoting. To paraphrase is to summarize someone else’s ideas in your own writing style, sentence structures and, where applicable, own words. This is a particularly demanding task for writers whose first language is not English.

10. *Failing to give a proper reference*
You may copy word for word (but not significant chunks), and you are expected to build on the ideas of others, but then you must give proper credit to the source of the quotation or the paraphrased argument, idea or reasoning.

11. *Not acknowledging outsourcing of substantive data analysis*
You may have someone else do the descriptive statistics or statistical data analysis for you, but you need to acknowledge the extent to which it is not your own analysis. In cases where the statistical analysis (model fitting or estimation) forms the central thesis, instead of just being a minor section, or where the thesis is in a discipline that requires you to demonstrate this skill of analysis, it is unacceptable to outsource it, even if you do acknowledge it.

**How to Avoid Plagiarism**

When you start reading and taking notes, carefully distinguish between material that is quoted, material that is paraphrased in your own words and own structure, and material that is your own and expressed in your own words. The way you can distinguish between these different types of sources is to use a different colour for each one, or to put a big Q for “quote”, P for “paraphrase or M for “mine” after the relevant section. Make sure that you keep scrupulous track of the author, year, title, and page from which you are taking the quote. There are numerous electronic tools that can assist you with this, such as RefWorks and Mendeley. (See section on “resources” below.)

1. *Fully reference and acknowledge the work of others*
While academic staff will teach you about systems of referencing, and how to avoid plagiarizing, you too need to take responsibility for your own academic career. Knowing how to give proper credit, cite appropriately, and acknowledge the original source and reference accurately is an essential step in avoiding plagiarism. There are numerous referencing conventions and you are expected to use a referencing convention that is accepted in your discipline. There are many guides on how to reference properly. See “Referencing Conventions” below for resources and guides.

2. *Use your own expressions and present your work in your own writing style*
It is tempting to use someone else’s elegantly structured phrase or sentence/s, but doing so without proper quoting (acknowledging your use of their exact words) constitutes plagiarism.
It is not enough to change just a word here and there when paraphrasing; you need to use your own sentence constructions. Of course, there are accepted key words in specific academic discourses that have precise meaning or are accepted expressions; you shouldn’t try to put these precise and commonly accepted expressions in your own words.

3. *Organise your work and structure your reasoning in your own way*
   Don’t merely give properly acknowledged summaries of other people’s work (paraphrasing), develop your own sequence of reasoning and line of argumentation.

4. *Use TURNITIN*
   Turnitin is an internet-based service that checks the extent of unoriginal content in your paper or thesis. It will identify all the parts where you have copied text from elsewhere. Where you have acknowledged doing so with direct quotes, that is acceptable. Of course, you should not have too many direct quotes since you are required, after all, to demonstrate your own academic writing and critical thinking skills. Identified copied content that is not acknowledged is plagiarism and you must reword and restructure these identified sections. Note that Turnitin is not a guarantee that there is no plagiarism – it is only a guide. See more about Turnitin [here](#).

Note that you should not submit the same re-worked draft multiple times because the system will then compare your new version with the earlier one you submitted and indicate a very high unoriginality score.

**UCT Rules and Senate Policy**

**RULES ON CONDUCT FOR STUDENTS (Student Rules - Academic conduct)**

RCS2.4 A student:
   (a) must refrain from dishonest conduct in any examination, test or in respect of completion and/or submission of any other form of academic assessment. Dishonest conduct includes but is not limited to plagiarism;
   (b) may not submit the work of any other person in any examination, test or in respect of the completion and/or submission of any other form of academic assessment without full and proper attribution and acknowledgement.

**RULES FOR DEGREES (Rules relating to examinations – Examination sessions and class tests)**

G18.12 Dishonesty, including plagiarism or the submission by a student of other people's work as his/her own, in an examination or any other form of assessment will be dealt with in terms of the disciplinary rules.

**SENATE POLICY**

Senate policy (PC11/99 dated 6.12.1999), sets out the following:
   (i) For each course, academic staff must prescribe a referencing convention, or allow a student to choose from a set of referencing conventions prescribed by the academic staff member (and by implication must teach this key academic literacy skill to junior students) when setting assignments; and
   (ii) All undergraduates are required to make and include a declaration each time they submit written work for assessment.

**Declaration**

Each time your work is assessed, you will need to insert the declaration (see shaded block) or one like it.
Plagiarism Declaration:

1. I know that plagiarism is a serious form of academic dishonesty.
2. I have read the document about avoiding plagiarism, am familiar with its contents and have avoided all forms of plagiarism mentioned there.
3. Where I have used the words of others, I have indicated this by the use of quotation marks.
4. I have referenced all quotations and properly acknowledged other ideas borrowed from others.
5. I have not and shall not allow others to plagiarise my work.
6. I declare that this is my own work.
7. I am attaching the summary of the Turnitin match overview (when required to do so).

Signature: ____________________________

Declaration to be included in your thesis

In the front of your thesis, a signed and dated declaration in the following format must be included:

Declaration

I, ........................................, hereby declare that the work on which this thesis is based is my original work (except where acknowledgements indicate otherwise) and that neither the whole work nor any part of it has been, is being, or is to be submitted for another degree in this or any other university. I authorise the University to reproduce for the purpose of research either the whole or any portion of the contents in any manner whatsoever.

Signature: ........................................ Date: ........................................

Referencing conventions

The responsibility is on your lecturer to ensure that you are (or become) familiar with, and observe, one of the internationally recognised guides to scholarly conventions on presentation, documentation of sources and referencing. It is your responsibility to question any part of this that you do not understand, to apply the rules, and to be aware of the consequences of plagiarism.

There are many ways of referencing, and the University has not set one way as preferable to another. The Library and Writing Centre, however, recommend one of the following forms:

- the Harvard system
- American
- Modern Language Association (MLA) or Footnoting

They also have a standard for referencing articles in electronic journals.

For advice and guides on referencing see:

UCT Library Referencing Help:

http://libguides.lib.uct.ac.za/refworks

and

http://www.lib.uct.ac.za/research-help/referencing-help/

and
If you are confused because each lecturer tells you to reference your work in a different way, discuss this with him or her.

**Consequences of plagiarising**

By committing plagiarism you will get zero for the plagiarised work, and may fail the course or your thesis. In addition, the matter must be referred to the Vice-Chancellor or nominee for possible disciplinary action in terms of the rules on disciplinary jurisdiction and procedures (DJP1.1) against you.

If this is the case, and the plagiarism is substantial, the Registrar has indicated that, unless there are unusual circumstances, the prosecution will ask for your expulsion. Even if you are not expelled, a conviction for cheating on your academic record is likely to limit your career opportunities. If you are preparing for a profession, you should know that a conviction for cheating in academic work may bar you from professional licensing temporarily or permanently.

**Web–based information and resources**

There are many sites and guides on the internet regarding plagiarism.

Video on how to avoid plagiarism: [https://www.youtube.com/watch?v=2XUPZ9jx4gs](https://www.youtube.com/watch?v=2XUPZ9jx4gs)

*A Student’s Guide to Avoiding Plagiarism* (UCT Philosophy department): this handy and concise resource looks at forms of plagiarism, gives tips on how to avoid it and provides some examples.

Contact the Vula Team for further support: help@vula.uct.ac.za or 021-650 5500

**Assistance for staff and students**

The Library Staff, the Writing Centre and the Office for Research Integrity are willing to assist you, by providing details of referencing conventions, and helping you use them.

UCT Library staff for general queries about referencing:
Amina Adam; Jen Eidelman; Cyrill Walters

UCT Library staff for queries about RefWorks:
Dilshaad Brey; Dianne Steele; Gill Morgan; Khumbulele Faltein

UCT Library staff for queries about Mendeley:
Tamzyn Suliaman

Research Ethics:
Dr Robert McLaughlin (UCT Office for Research Integrity)

UCT Writing Centre
[http://www.writingcentre.uct.ac.za/writing/talk/contacts](http://www.writingcentre.uct.ac.za/writing/talk/contacts)
Tel: 021 650 5021
POLICY ON TUBERCULOSIS FOR UNDERGRADUATE HEALTH SCIENCES STUDENTS

Reducing the risk of tuberculosis in undergraduate Health Sciences students

South Africa is at the centre of the HIV and tuberculosis pandemics. The lifetime risk of tuberculosis for individuals with latent TB infection (up to 60% of the South African population) in non-HIV-infected persons is approximately 10%, increasing to >10% per year in HIV-infected persons. Hence, the approach to reducing your risk of tuberculosis is intimately linked to knowing and acting upon your HIV status.

1 Know your HIV status
All students within the University of Cape Town should be offered counselling and testing for HIV infection. Any student who will have contact with patients or will work in a hospital, community health centre or clinic environment must have undergone counselling and education surrounding the issues of HIV testing.

2 Minimising risk of tuberculosis transmission in the workplace
Due to the massive burden of tuberculosis in South Africa, students working in a healthcare environment will be unable to avoid contact with tuberculosis patients at all times. It is, however, impractical to wear protective masks continuously. The following measures will be enforced to reduce risk:

2.1 Education
2.1.1 All health sciences students will be specifically educated as to the risks of acquisition of TB and as to the preventive measures which should be taken to minimize such risks. Record of such education will be a prerequisite before any patient contact.

2.1.2 All health sciences students will be made aware of the common symptoms associated with tuberculosis – that is, cough, night sweats, loss of appetite and loss of weight. Students should be encouraged to seek medical advice from UCT’s Student Wellness Service or any other health facility of their choice if these symptoms occur.

2.2 Risk avoidance
2.2.1 Students must if at all possible avoid contact with patients who are known to have multi-drug resistant (MDR) or extensively drug resistant (XDR) pulmonary tuberculosis. Students must NOT enter an isolation cubicle accommodating a patient with MDR or XDR pulmonary tuberculosis or one accommodating a patient with extrapulmonary MDR or XDR tuberculosis, where pulmonary involvement has not been ruled out.

2.2.2 Students will not receive bedside teaching from medical staff using patients known to have MDR or XDR pulmonary tuberculosis.

2.2.3 Students whose immune systems are compromised
Students who are immunocompromised for whatever reason (HIV-infected, on long-term immunosuppressant’s such as corticosteroids or methotrexate, have cancer, are struggling with stress and poor nutrition, etc) are encouraged to discuss their health with UCT’s Student Wellness Service or any other health facility of their choice. There is a vital role for isoniazid
preventive therapy (IPT) for some of these students (e.g., those with a positive tuberculin skin test) and, for those who are HIV-infected, antiretroviral therapy may be indicated.

2.3 Risk reduction through personal protective wear – masks

2.3.1 When masks are to be worn

All health sciences students should be required to wear a mask in the following high-risk environments:

2.3.1.1 When in contact with:
- patients with an unexplained cough,
- formally identified pulmonary TB patients presenting for the first time or confirmed drug-sensitive tuberculosis patients who have not been on anti-tuberculosis treatment for \( \geq 2 \) weeks;

2.3.1.2 When entering or working in an induced sputum cubicle (of specific relevance to physiotherapy students).

2.3.2 Type of mask to be worn

Surgical masks are ineffective as a means of reducing tuberculosis acquisition. Students must, therefore, wear an N95 (or FFP3) particulate filter mask (respirator).

2.3.3 Fit-testing

All health sciences students must have a once-off fit-test to determine the correct type and size of mask for their face, thereby ensuring a proper fit. The outcome of each student’s fit-test will be recorded for future reference.

The fit-testing process will include instructing the student on how to use the mask correctly. They must be informed of at least the following:

2.3.3.1 that facial hair (notably beards) disrupt N95 mask efficiency and therefore that facial hair removal is advisable – students who choose to wear a beard nonetheless must understand that the N95 mask will be less efficacious;

2.3.3.2 that they must check the integrity of the mask every time they use it;

2.3.3.3 how to put the mask on and take it off;

2.3.3.4 that they must disinfect their hands before and after putting the mask on and taking it off;

2.3.3.5 that care must be taken not to squash the mask;

2.3.3.6 that under normal working conditions an N95 mask can remain effective for at least 8 hours of continuous use. Mask efficacy is reduced if they become torn or moist. If the N95 mask is used only intermittently then it can be effective for 1-4 weeks, depending on the frequency of use;

2.3.3.7 that used masks must be disposed of by being discarded in a medical waste box.

2.3.4 Provision and distribution of masks
2.3.4.1 The FHS will provide students, as needed, with free access to supplies of the N95 mask that fits them throughout the period of their undergraduate studies. Students should not obtain N95 masks from hospital wards as these are often in short supply for healthcare workers and visitors.

2.3.4.2 At sites where there is a UCT-employed Site Coordinator, Site Facilitator or Facility Manager, this person will be responsible for supplying students with masks as needed. At all other sites the distribution of masks will be the responsibility of the Lecturer, Clinical Educator or Supervisor responsible for the students concerned.

2.3.4.3 The Faculty’s provision of masks will be administered by the office of the Health Teaching Platform Coordinator.

3 Students with TB

3.1 Any student diagnosed with TB is urged in the strongest possible terms to ensure that they know their HIV status in order to ensure optimal treatment.

3.2 A student who is found to have TB is also strongly encouraged to confidentially advise the Student Development and Support Office of their TB status in order to enable the Faculty to help ensure that s/he receives whatever support and essential treatment and follow-up are needed.

3.3 In the case of drug-sensitive pulmonary TB, a student should stay out of class and out of the work environment for two weeks after diagnosis and commencement of treatment. With pulmonary MDR-TB, while the final decision will be in the hands of the attending doctor, generally a return to class and work should be allowed once they have sputum converted – that is, established to be culture-negative on two occasions from sputum taken one month apart.

3.4 The Student Development and Support Office will maintain a confidential record of all students who have reported their diagnosis of TB in order to help ensure that such students are appropriately managed throughout their illness.

3.5 Reporting: The Head of the Faculty’s Student Development and Support Portfolio will monitor infections on the basis of confidential student TB statistics made available to him/her monthly by the Student Development and Support Office. If there are sudden changes in incidence, s/he can initiate an investigation – including consultation with the Head of the Division of Infectious Diseases and HIV Medicine – with a view to preventing further infections.
Appendix A - Use of Electronic Devices

A.1 Definition
Electronic devices include cell phones (including smart phones), computers (laptops, notebooks, netbooks, and handhelds), mp3 and other digital audio and video players (including DVD players), and analogue and digital audio and video recording devices (still and movie cameras). Recordings include any format which may be done by any electronic device including videos, images and sound.

A.2 Application
This policy is applicable to students and other individuals who attend courses and lectures offered by the Faculty of Health Sciences. This also includes ward rounds, bedside teaching and interactions which happen in medical facilities. No part of this policy is intended to conflict with established policies of University of Cape Town or a student's right to due process as stated in the Code of Student Conduct or the Student Handbook.

A.3 Background
There are a number of electronic devices which are available to students and which they bring where teaching happens and when they interact with patients. The Faculty considers teaching to be a special time for focused engagement between educators and students. This includes teaching which happens in lectures, tutorials and bedside teaching. Electronic devices are often an impediment to such focused engagement and under no circumstances should students use electronic devices to make unauthorised recordings without the necessary permission.

A.4 Rationale
The usage of personal electronic devices in teaching can hinder instruction and learning, not only for the student using the device but also for other students. Usage of an electronic device for activities unrelated to teaching tends to distract the student using the device, and is distracting and disrespectful to his/her neighbours and the educator. Both teaching and learning are thus undermined. In addition it is unethical to record patients or information related to patients in any format, whether video, images or audio with explicit written consent.

A.5 Classroom teaching
Electronic devices are allowed in the classroom only for the purposes of course instruction. The use of personal computers and other electronic devices in the classroom is a privilege which may be withdrawn at the discretion of the educator.

In all cases, when permission has been granted by an educator for the use of an electronic device in the classroom, the student shall employ such device solely in a manner appropriate to the coursework and avoiding distractions or interruptions to fellow students or the educator. For example where permission has been given for the use of a device for personal note-taking, it may only be used for this sole purpose and not noisily to the extent that others are distracted by it.

The educator has the discretion to grant either individual or a blanket approval or prohibition for the use of one or more types of electronic devices in the classroom. If the latter then it is each student’s responsibility to ensure that all cell phones and electronic devices such as PDAs, pagers, instant message devices, games, other handheld devices and laptop computers are turned off and stowed in a secure place during class.
The educator reserves the right to withdraw a previously granted approval for the use of an electronic device, on an individual or blanket basis, if in the educator’s best judgment continued use of such a device detracts from the effectiveness of the classroom learning environment.

A student with a diagnosed disability must present to the educator the appropriate paperwork from the Undergraduate Office so that special accommodation can be made for the use of an otherwise prohibited electronic device. Other exceptions are medically necessary assistive devices, approved emergency communications and warning devices operated by authorized law enforcement officers, fire-fighters, emergency medical personnel or other emergency personnel. Such individuals must present the educator or the Undergraduate Office with the necessary paperwork confirming such status or information.

The educator should include in each course syllabus a statement establishing under what conditions electronic devices may be used in the classroom, and the manner in which a violation of the educator’s rules of use of such devices shall be addressed. In case of a change in status of an electronic device in the course of the semester, the educator should update the course syllabus as appropriate.

It is expected that access to the internet will be off during class unless the educator specifically authorizes it for class-related purposes. Use of cell/smart phones during class time is always prohibited, as is leaving the room to answer or make a call.

A.6 Patient information
Under no circumstances should electronic devices be used when dealing with patients except for purposes of taking personal notes. Using such devices to record interviews of patients, images of patients whether still or video without explicit written consent is not allowed at all.

A.7 Violations
Any behaviour determined as inappropriate use or distractions resulting from the use of electronic devices may result in a warning, dismissal from class for the day of the infraction, a reduction in the grade for the class, or referral to the Undergraduate Office. Violating the ethical, privacy and confidentiality rights of patients may result in more serious consequences.

Appendix B - Appropriate use of Computing Facilities

B.1 Introduction
Computing and networking play increasingly important roles in teaching, research, and administration. The Faculty anticipates many benefits from the use of information technology by students and staff. UCT maintains computing and networking facilities for the purpose of conducting and fostering the teaching, research and administration activities of the Faculty. To maximize the usefulness of Computer Facilities, UCT provides access in the most open manner permitted by the owners or providers of the Computing Facilities.

B.2 Prohibited activities
The following activities involving use of Computer Facilities are prohibited:
- Transmitting unsolicited information which contains obscene, indecent, lewd or lascivious material or other material which explicitly or implicitly refers to sexual conduct.
- Transmitting unsolicited information which contains profane language or panders to bigotry, sexism, or other forms of discrimination.
- Transmitting information which threatens bodily harm or which intimidates another person or organisation.
- Communicating any information concerning any password, identifying code, personal identification number or other confidential information without the permission of its owner or the controlling authority of the computer facility to which it belongs.
Creating, modifying, executing or retransmitting any computer program or instructions intended to gain unauthorized access to, or make unauthorized use of, a Computer Facility or Licensed Software.

Creating, modifying, executing or retransmitting any computer program or instructions intended to obscure the true identity of the sender of electronic mail or electronic messages, collectively referred to as "Messages", including, but not limited to, forgery of Messages and/or alteration of system and/or user data used to identify the sender of Messages.

Accessing or intentionally destroying software in a Computer Facility without the permission of the owner of such software or the controlling authority of the Facility.

Making unauthorized copies of Licensed Software.

Communicating any credit card number or other financial account number without the permission of its owner.

Effecting or receiving unauthorized electronic transfer of funds.

Violating the provisions of copyright, particularly on software, data and publications.

Broadcasting email messages indiscriminately to all users of a computing facility, the broadcasting of messages concerning the use of a facility by the manager of a facility being a specific exception.

Appendix C – Social Media

C.1 Introduction
The growing popularity of social networks such as Facebook (FB) and Twitter provides increasing connectivity for Employees and Students in their personal and professional communications. Although there are clear benefits, frequently the potential risks are not fully appreciated. Information management ought to be introduced into curricula in the early years.

C.2 Online identity and relationships
Online communication blurs the traditional professional and personal boundaries. Even when privacy is anticipated, the online environment needs to be considered as a public space. For instance conversations with Friends on FB remain in FB permanently and are retrievable by others. The permanence of postings provides a significant indication of a person’s character. Social media contributions may have a positive or negative impact on future job applications.

Comments made online in social spaces can be detrimental to the person and to others. For example thoughts and behaviours may be appropriate in a social setting yet indicate unprofessional behaviour from a practitioner’s perspective.

Information tends to be permanent and durable. Defamation of others or an institution may lead to detrimental consequences. A conscious awareness of the possible harm to the reputation of colleagues must be clarified. Links can be made even when there is no obvious connection. For instance a derogatory comment about a colleague may be tracked. Previous postings can provide clues to identify that person.

C.3 Patient relationships
Confidentiality needs to be respected online too. Health professionals hold an implicit social contract with society to be leaders. Improper disclosure of information related to the health of individuals or quality of care in facilities can be harmful. Any images, video or audio clips need to be used with full consent.

C.4 Refer to
STUDENT TRANSPORT POLICY

1 Purpose
All students registered for professional degrees in the Faculty of Health Sciences (FHS) are required during the course of their studies to visit and to do work at a range of off-campus learning sites. These sites are mostly within greater Cape Town while some are further afield.

The purpose of this policy is to set out a framework for how students will travel between the FHS campus and the institutions and communities in which they are required to do work as part of their formal academic programme. Such a framework will clarify student responsibilities, FHS responsibilities and shared responsibilities.

2 Principles
The policy is informed by the following underlying principles:
- Academic need and relevant educational outcomes
- Equity (with reference to transformation)
- Duty of care (with reference to safety and security)
- Needs of the academic programme and relevant educational outcomes
- Time efficiency
- Cost-effectiveness
- Flexible transport solutions
- Shared responsibility (University/Faculty and students)
- Transport provided only if booked
- University-funded transport is a centrally-coordinated Faculty function
- Accessibility to students with disabilities
- Social responsiveness
- Environmental responsibility

These principles have to be understood and applied within a context of necessarily limited funding available for student transport.

3 Transport options
Given that students’ transport needs are highly variable and diverse, they can only be met by using a combination of different transport solutions within a flexible system.

Transport solutions that are potentially available to students and FHS include the following:
- Walking
- Cycling
- Public transport
- Own car
- Lift provided by a fellow-student
- Lift provided by a staff member
- Partner-owned vehicle (partners including government and NGOs)
Responsibilities
In keeping with students’ responsibility for their own learning, it is in the first instance individual students’ responsibility to be where they are required to be for the purposes of both on-campus and off-campus learning activities. Where students elect – or, as in some cases, are required – to use Faculty transport, it is their responsibility to comply with the conditions under which such transport is provided – for instance, booking each trip needed, timeous arrival at the place from which the transport will depart, etc.

The Faculty for its part takes responsibility for giving students as much assistance with their programme-related transport needs as funding allows. In giving effect to this commitment the Faculty undertakes further to make whatever decisions and choices are required with reference to the principles listed in (2) above.

Own transport arrangements
Students are in general encouraged to make their own transport arrangements where this is practical, whether this involves walking, cycling, using public transport, driving their own car or accepting a lift from a fellow student or staff member.

Students who make their own transport arrangements are alone responsible for ensuring that they present themselves where they are required to be and do so on time.

Whatever mode of transport students use – including transport provided by the Faculty/University – it is at the individual student’s own risk.

Students who use their own car, must note that at certain facilities there will not be sufficient on-site parking to enable them to park within the facility’s premises. Students are expected to respect that those who work at such sites on a regular basis enjoy priority access to whatever on-site parking is available. At certain sites – e.g., Khayelitsha (Site B) Community Health Centre – this precludes the use of students’ private cars because there is no suitable parking available outside the facility’s premises either.

Faculty-provided transport for fieldtrips and other non-routine purposes
To enable the Faculty to plan optimal use of its transport budget, by the end of June each year conveners of courses that during the following year will involve students travelling to, from and/or within off-campus teaching/learning sites, will submit to the Faculty Transport Committee (see Section 10 below) a schedule of non-routine trips for which they request the provision of transport. With such a schedule Course Conveners will provide the following:

- A motivation for how such off-campus teaching/learning adds value to the curriculum;
- The location of the sites where students will be required to present themselves;
The target enrolment for the course;
- Estimated numbers of students who will require the transport requested where this is expected to differ from total enrolment.

The Faculty will respond to such requests, if possible, by the end of August of the year in which the request is made and draw up a provisional transport plan for the following year.

Where the transport requested is approved, the Course Convener will submit confirmation of all relevant details of such transport to the Faculty Transport Office by the end of the third week of January in the year that the transport is required. Such details must include confirmation of the precise destinations to which students will need to be transported, the dates or days of the week on which they need to be transported, by what time on those days they must reach the specified destinations and at what time they must be picked up and returned to campus.

Students planning to make use of Faculty-provided transport for fieldtrips and other non-routine purposes may be required to book their place on such transport as per the procedure set out in Section 7 below.

**Faculty-provided routine transport**

The Faculty will routinely provide the following transport as booked by students:

(a) on weekdays during the day to and from teaching sites along set routes determined by the Faculty as advised by the Faculty Transport Committee;
(b) every night including on weekends a single pick-up between 22h00 and 23h00 for students on-call at GF Jooste, New Somerset, Red Cross Children’s and Victoria Hospitals.

Students will be responsible for booking places on each trip for which they elect to utilise FHS-provided transport.

- In the case of weekday, daytime transport, bookings must be made in advance via the FHS Transport Vula site.
- In the case of night transport, bookings must be made – again in advance – by messaging or calling the night transport cell phone.

Places on the buses will be reserved exclusively for students who have booked a place for themselves following the procedures set out above. Students who neglect to book transport are responsible for finding their own way to and from the relevant learning site.

When travelling back to campus on FHS-provided buses, students will be responsible for ensuring that they are at the pre-arranged pick-up points on time. In the event of something beyond their control happening such that they are unable to make it to the pick-up point on time, it will be their responsibility to contact the driver concerned or, failing this, a relevant staff member on campus. Whenever possible, such contact should be made before the scheduled pick-up time.

Where students fail without good reason to present themselves on time at the relevant pick-up point, it will be their responsibility to find their own way back to campus.

Where students have not managed to present themselves on time at the relevant pick-up point through no fault of their own, a driver may be requested by an
authorised FHS representative to fetch the students concerned, particularly in instances where the students’ safety might be at risk. However, if this situation arises in the latter part of the afternoon such that the driver making a special trip to collect a student who has missed their bus, would arrive back on campus later than 17h00, a special trip will not as a rule be approved and the student concerned will be responsible for finding their own way home.

Safety and personal physical integrity
The University regards the safety and physical integrity of every student as of paramount importance.

The University recognises at the same time that there are inevitable and unavoidable occupational health and safety risks associated with training to be and practicing as a healthcare professional.

Thus, the FHS
a) will not require students to travel to and work within sites where the risk of physical harm is known to be unreasonably high;
b) will provide students with clear directions to the sites where they are required to be present;
c) will endeavour to prepare students with information and skills to keep themselves as safe as possible en route to and within all off-campus learning sites;
d) will seek to ensure that all University and University-commissioned vehicles used to transport students to and from, as well as within, off-campus learning sites – both those owned by the University and those hired for this purpose – are roadworthy and appropriately registered and licensed;
e) will seek to ensure that the drivers of such vehicles – whether University employees, students or those whose services are hired for this purpose – have valid, unendorsed licenses;
f) will in the event of an accident, hijacking or any other form of criminal assault or theft, provide affected students with whatever support it can within the means at its disposal;
g) will in the event of FHS-provided transport being delayed or having to be cancelled as a result of a vehicle breaking down, an accident, roadworks, unanticipated traffic or an external service provider failing to arrive as contracted, communicate what has happened, to the staff members responsible for the affected students at the sites where they are being expected – this will be the responsibility of the driver concerned as assisted, when necessary, by the Faculty Transport Supervisor, the Faculty Operations Manager or another member of Faculty staff.

Insurance
The University does not have the financial resources to provide students with more than limited insurance cover.

The UCT Student Handbook No.3 states as follows:
“The University provides no cover for personal possessions, including motor vehicles, even when a student may be involved in compulsory academic activity. The University does not accept liability for any personal items that may be stolen or damaged.”
Regarding personal accident insurance, the same Student Handbook states:
“The University operates a Group and Funeral Cover Insurance Scheme, which aims to supplement students' private medical aid or insurance schemes in the event of UCT-related accidental injury. Participation is compulsory and the premium is included in the academic fee”.

The maximum benefits under the Group and Funeral Cover Insurance Scheme include R25 000 for medical expenses where the student is involved in an official field trip for academic purposes.

It is recommended that students arrange for their own medical aid cover as well as insurance cover for personal accidents, including motor vehicle accidents, and loss, theft or damage of personal possessions.

**Governance and implementation**

The organisation and funding of student transport in the FHS will be centralised Faculty functions. To ensure that its provision is as cost effective as possible, no transport for students that is to be paid for using university – that is, departmental or faculty – funds may be commissioned other than through, or with the written consent of, the Faculty Transport Office.

Implementation and monitoring of this policy will be the responsibility of the Deputy Dean: Undergraduate Education as advised by a Faculty Transport Committee constituted as a sub-committee of the Clinical Teaching Platform Committee.

The FTC will consider all proposals pertaining to the provision of transport by the Faculty and make recommendations in the light of this policy to the Clinical Teaching Platform Committee and the Deputy Dean: Undergraduate Education.

The Faculty Transport Office will keep statistics of student usage of the transport provided, with a view, in particular, to ensuring that HEQSF levels of transport provision are aligned as closely as possible with levels of actual usage. Further, to inform regular reviews of this policy, detailed statistics will be kept of journeys made both by FHS and outsourced vehicles, destinations served, distances covered and numbers of students conveyed as identified by course. The coordination of the collection of these statistics and their analysis will be the responsibility of the Faculty Operations Manager.

**FACULTY MISSION STATEMENT**

The Faculty’s mission is to:
- Respond to the healthcare needs of South Africa and beyond.
- Educate health professionals, educators and scientist for life.
- Undertake research that is relevant to the needs of our country and beyond.
- Promote health equity through promoting health professional standards in the delivery of quality healthcare.
- To be socially responsive to the needs of the people of our country and beyond.
- To develop interventions to reduce the risk of ill health, disability and mortality.

**FACULTY OF HEALTH SCIENCES CHARTER**
Preamble
Post-apartheid South Africa is emerging from decades of systematic discrimination that affected every aspect of society, including the health sector, resulting in profound inequities in health status in the population. Central to the reconstruction of South African society is the need to develop a culture of human rights based on respect for human dignity and non-discrimination.

Although there were significant attempts by staff, students and the institution to resist apartheid injustices, UCT was not immune to the racist, sexist, and other discriminatory practices and values that typified society under apartheid. As UCT grapples with transformation, we remain burdened with the legacy of these discriminatory practices.

To overcome this legacy of apartheid and other forms of discrimination, the UCT Health Sciences Faculty has produced this Charter as a basis for transformation of the institutional culture of the Faculty to ensure that students and staff have access to an environment where they are able to realise their full potential and become active participants in the academic life of the Faculty.

Principles
Non-discrimination
The Faculty will not tolerate any form of negative discrimination and will uphold the University's policy on non-discrimination.

Supportive culture
The Faculty will foster a supportive culture, where diversity and difference is respected, in order to encourage students and staff to reach their full potential in their activities of learning, working, teaching, research and service in the Faculty.

Capacity-building
The Faculty will strive to develop the skills of its employees and help to build the skills base of South Africans, in particular formerly disadvantaged South Africans, through various strategies at its disposal.

Employment Equity
The Faculty will strive to attract and retain talented black professionals by recognising their abilities, affirming their skills and ensuring an environment that is welcoming and supportive.

Facilitation of learning
The Faculty will strive to uphold and encourage the highest standards of teaching to create an atmosphere conducive to learning for all students.

Research
The Faculty will strive to uphold the highest ethical standards of research and ensure that research seeks to benefit the South African community.

Service
The Faculty will strive to ensure that students and staff uphold the highest standards of service to the community, including commitments to ethical principles and human rights.

Consultation
The Faculty will strive to consult with staff and students on major policy changes that may be undertaken by the Faculty and that affect them, and will seek to entrench transparency in its workings.
Monitoring and evaluation
The Faculty will endeavour to review its performance annually in the light of this Charter.

Community participation
The Faculty will strive to ensure participation of the community in decisions in the spirit of the Primary Healthcare Approach adopted by the Faculty as its lead theme.

**FACULTY OF HEALTH SCIENCES DECLARATION**
*(For all graduating students)*
At the time of being admitted as a member of the healthcare profession:
I solemnly pledge to serve humanity.
My most important considerations will be the health of patients and the health of their communities.
I will not permit considerations of age, gender, race, religion, ethnic origin, sexual orientation, disease, disability or any other factor to adversely affect the care I give to patients.
I will uphold human rights and civil liberties to advance health, even under threat.
I will engage patients and colleagues as partners in healthcare.
I will practise my profession with conscience and dignity.
I will respect the confidentiality of patients, present or past, living or deceased.
I will value research and will be guided in its conduct by the highest ethical standards.
I commit myself to lifelong learning.
I make these promises solemnly, freely and upon my honour.

**DISTINGUISHED TEACHERS IN THE FACULTY**
*Students may nominate (to the Registrar's office) academic staff for UCT's Distinguished Teacher Awards. Faculty of Health Sciences staff who have received Distinguished Teacher Awards are:*

- 2014 Professor Delawir Kahn (Surgery)
- 2010 Associate Professor R Eastman (Medicine)
- 2010 Professor Z van der Spuy (Obstetrics & Gynaecology)
- 2007 Dr I A Joubert (Anaesthesia)
- 2005 Dr M Blockman (Pharmacology)
- 2004 Associate Professor V Burch (Medicine)
  *(Also received the National Excellence in Teaching and Learning Award from the Council for Higher Education and the Higher Education Learning and Teaching Association of South Africa in 2009)*
- 2003 Associate Professor G Louw (Human Biology)
- 2003 Dr P Berman (Chemical Pathology)
- 2002 Associate Professor J Krige (General Surgery)
- 2001 Dr C Slater (Human Biology)
- 2000 Associate Professor A Mall (General Surgery)
- 2000 Professor D Knobel (Forensic Medicine)
- 1998 Professor MFM James (Anaesthesia)
- 1993 Professor J de Villiers (Neurosurgery)
- 1989 Professor EJ Immelman (General Surgery)
- 1988 Associate Professor G R Keeton (Medicine)
- 1987 Dr C Warton (Anatomy & Cell Biology)
- 1985 Professor A Forder (Medical Microbiology)
- 1984 Dr AH Robins (Pharmacology)
- 1982 Professor W Gevers (Medical Biochemistry)
- 1981 Professor R Kirsch (Medicine)
INDEX OF COURSES

The lecture periods given below were correct at time of going to press. The times and meeting patterns should be checked in the Lecture Timetable or with the department concerned.

LECTURE PERIODS

<table>
<thead>
<tr>
<th></th>
<th>Time Periods</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>08:00 to 08:45</td>
</tr>
<tr>
<td>2</td>
<td>09:00 to 09:45</td>
</tr>
<tr>
<td>3</td>
<td>10:00 to 10:45</td>
</tr>
<tr>
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</tr>
<tr>
<td>5</td>
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</tr>
<tr>
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<td>14:00 to 14:45</td>
</tr>
<tr>
<td>7</td>
<td>15:00 to 15:45</td>
</tr>
<tr>
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<td>16:00 to 16:45</td>
</tr>
<tr>
<td>9</td>
<td>17:00 to 17:45</td>
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</table>

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>AAE2001S</td>
<td>Anaesthesia Part I</td>
</tr>
<tr>
<td>AAE4012W</td>
<td>Anaesthesia Part I for External Credit</td>
</tr>
<tr>
<td>AAE5001W</td>
<td>Anaesthesia for External Credit</td>
</tr>
<tr>
<td>AAE6000W</td>
<td>Anaesthesia Part II</td>
</tr>
<tr>
<td>AHS1003F</td>
<td>Speech and Hearing Sciences</td>
</tr>
<tr>
<td>AHS1025S</td>
<td>Early Intervention</td>
</tr>
<tr>
<td>AHS1032S</td>
<td>Occupational Perspectives on Health and Well-being</td>
</tr>
<tr>
<td>AHS1033F</td>
<td>Movement Science I</td>
</tr>
<tr>
<td>AHS1034S</td>
<td>Introduction to Applied Physiotherapy</td>
</tr>
<tr>
<td>AHS1035F</td>
<td>Human Occupation and Development</td>
</tr>
<tr>
<td>AHS1042F</td>
<td>Human Communication Development</td>
</tr>
<tr>
<td>AHS1045S</td>
<td>Basis of Hearing and Balance</td>
</tr>
<tr>
<td>AHS1048W</td>
<td>Disability Information Management and Communication Systems</td>
</tr>
<tr>
<td>AHS1049S</td>
<td>Promoting Healthy Lifestyles</td>
</tr>
<tr>
<td>AHS1050W</td>
<td>Health, Wellness and Functional Ability</td>
</tr>
<tr>
<td>AHS1051F</td>
<td>Inclusive Development and Agency</td>
</tr>
<tr>
<td>AHS1052F</td>
<td>Work-Integrated Practice Learning Part I</td>
</tr>
<tr>
<td>AHS1053S</td>
<td>Work-Integrated Practice Learning Part II</td>
</tr>
<tr>
<td>AHS1054W</td>
<td>South African Sign Language</td>
</tr>
<tr>
<td>AHS2043W</td>
<td>Occupational Therapy II</td>
</tr>
<tr>
<td>AHS2046F</td>
<td>Diagnostic Audiology</td>
</tr>
<tr>
<td>AHS2047S</td>
<td>Paediatric Rehabilitative Audiology</td>
</tr>
<tr>
<td>AHS2050H</td>
<td>Clinical Physiotherapy I</td>
</tr>
<tr>
<td>AHS2052H</td>
<td>Movement Science II</td>
</tr>
<tr>
<td>AHS2053H</td>
<td>Applied Physiotherapy I</td>
</tr>
<tr>
<td>AHS2106F</td>
<td>Child Language</td>
</tr>
<tr>
<td>AHS2107F</td>
<td>Child Speech</td>
</tr>
<tr>
<td>AHS2108W</td>
<td>Clinical Speech Therapy I</td>
</tr>
<tr>
<td>AHS2109S</td>
<td>School-Based Interventions</td>
</tr>
<tr>
<td>AHS2110W</td>
<td>Clinical Audiology I</td>
</tr>
<tr>
<td>AHS2111S</td>
<td>Diagnostic Audiology in Special Populations</td>
</tr>
<tr>
<td>Course Code</td>
<td>Course Name</td>
</tr>
<tr>
<td>------------</td>
<td>-------------</td>
</tr>
<tr>
<td>AHS3004H</td>
<td>Clinical Speech Therapy II</td>
</tr>
<tr>
<td>AHS3008H</td>
<td>Clinical Audiology II</td>
</tr>
<tr>
<td>AHS3062F</td>
<td>Rehabilitation Technology</td>
</tr>
<tr>
<td>AHS3065S</td>
<td>Adult Rehabilitative Audiology</td>
</tr>
<tr>
<td>AHS3069W</td>
<td>Clinical Physiotherapy II</td>
</tr>
<tr>
<td>AHS3070H</td>
<td>Becoming a Rehabilitation Professional I</td>
</tr>
<tr>
<td>AHS3071F</td>
<td>Acquired Neurogenic Language Disorders</td>
</tr>
<tr>
<td>AHS3072S</td>
<td>Paediatric Dysphagia and Motor Speech</td>
</tr>
<tr>
<td>AHS3073F</td>
<td>Adult Dysphagia and Motor Speech</td>
</tr>
<tr>
<td>AHS3075F</td>
<td>OAEs and Electrophysiology</td>
</tr>
<tr>
<td>AHS3076H</td>
<td>Movement Science III</td>
</tr>
<tr>
<td>AHS3077H</td>
<td>Applied Physiotherapy II</td>
</tr>
<tr>
<td>AHS3078H</td>
<td>Research Methods &amp; Biostatistics I</td>
</tr>
<tr>
<td>AHS3078H</td>
<td>Research Methods &amp; Biostatistics I</td>
</tr>
<tr>
<td>AHS3078H</td>
<td>Research Methods &amp; Biostatistics I</td>
</tr>
<tr>
<td>AHS3102F</td>
<td>Child Language II</td>
</tr>
<tr>
<td>AHS3103S</td>
<td>Voice</td>
</tr>
<tr>
<td>AHS3104S</td>
<td>Vestibular Management</td>
</tr>
<tr>
<td>AHS3105F</td>
<td>Public Health Audiology</td>
</tr>
<tr>
<td>AHS3107W</td>
<td>Occupational Therapy Theory and Practice in Physical Health</td>
</tr>
<tr>
<td>AHS3108W</td>
<td>Occupational Therapy Theory and Practice in Mental Health</td>
</tr>
<tr>
<td>AHS3113W</td>
<td>Foundation Theory for Occupational Therapy Practice I</td>
</tr>
<tr>
<td>AHS4000W</td>
<td>Research Report</td>
</tr>
<tr>
<td>AHS4005H</td>
<td>Clinical Speech Therapy IIIA</td>
</tr>
<tr>
<td>AHS4006H</td>
<td>Clinical Speech Therapy IIIB</td>
</tr>
<tr>
<td>AHS4008H</td>
<td>Clinical Audiology IIIA</td>
</tr>
<tr>
<td>AHS4009H</td>
<td>Clinical Audiology IIIB</td>
</tr>
<tr>
<td>AHS4065W</td>
<td>Clinical Physiotherapy III</td>
</tr>
<tr>
<td>AHS4066H</td>
<td>Becoming a Rehabilitation Professional II</td>
</tr>
<tr>
<td>AHS4071H</td>
<td>Applied Physiotherapy III</td>
</tr>
<tr>
<td>AHS4072H</td>
<td>Research Methods and Biostatistics II</td>
</tr>
<tr>
<td>AHS4119W</td>
<td>Occupational Therapy Research &amp; Practice Management</td>
</tr>
<tr>
<td>AHS4120W</td>
<td>Foundation Theory for Occupational Therapy Practice II</td>
</tr>
<tr>
<td>AHS4121W</td>
<td>Occupational Therapy Practice and Service Learning</td>
</tr>
<tr>
<td>AXL1300F</td>
<td>Introduction to Language Studies</td>
</tr>
<tr>
<td>AXL1301S</td>
<td>Introduction to Applied Language Studies</td>
</tr>
<tr>
<td>AXL1303F</td>
<td>Sociolinguistics Foundation</td>
</tr>
<tr>
<td>BIO2010F</td>
<td>Principles of Ecology and Evolution</td>
</tr>
<tr>
<td>BIO2011S</td>
<td>Life on Land: Animals</td>
</tr>
<tr>
<td>CEM1011F</td>
<td>Chemistry for Medical Students</td>
</tr>
<tr>
<td>CEM1011F</td>
<td>Chemistry for Medical Students</td>
</tr>
<tr>
<td>CEM1011X</td>
<td>Chemistry for Medical Students</td>
</tr>
<tr>
<td>CEM1111S</td>
<td>Chemistry for Medical Students</td>
</tr>
<tr>
<td>CHM5003W</td>
<td>Surgery</td>
</tr>
<tr>
<td>CHM5004H</td>
<td>Trauma</td>
</tr>
<tr>
<td>CHM5005H</td>
<td>Orthopaedic Surgery</td>
</tr>
<tr>
<td>CHM5006W</td>
<td>Surgery for External Credit</td>
</tr>
<tr>
<td>CHM5007W</td>
<td>Neurology and Neurosurgery</td>
</tr>
<tr>
<td>CHM5008W</td>
<td>Ophthalmology</td>
</tr>
<tr>
<td>CHM5009W</td>
<td>Otorhinolaryngology</td>
</tr>
<tr>
<td>CHM5010W</td>
<td>Urology</td>
</tr>
<tr>
<td>CHM6000W</td>
<td>Surgery (Including Allied Disciplines)</td>
</tr>
<tr>
<td>Course Code</td>
<td>Course Name</td>
</tr>
<tr>
<td>--------------</td>
<td>-----------------------------------------------------------------------------</td>
</tr>
<tr>
<td>CHM6020W</td>
<td>Surgery for External Credit</td>
</tr>
<tr>
<td>FTX1004S</td>
<td>Introduction to Financial Management</td>
</tr>
<tr>
<td>FTX1005F</td>
<td>Managerial Finance</td>
</tr>
<tr>
<td>FTX2000S</td>
<td>Personal Financial Management</td>
</tr>
<tr>
<td>FTX2020F</td>
<td>Business Finance</td>
</tr>
<tr>
<td>HSE1001S</td>
<td>Fundamentals of Integrated Health Sciences Part I</td>
</tr>
<tr>
<td>HSE1002F</td>
<td>Fundamentals of Integrated Health Sciences Part II</td>
</tr>
<tr>
<td>HSE1003S</td>
<td>Preparation for Entry-level Psychology for Health and Rehab Sciences Part I</td>
</tr>
<tr>
<td>HSE1004S</td>
<td>Fundamentals of Speech and Hearing Sciences</td>
</tr>
<tr>
<td>HSE1005S</td>
<td>Foundational Concepts in Human Communication Development</td>
</tr>
<tr>
<td>HSE1006F</td>
<td>Foundational Concepts in Early Intervention</td>
</tr>
<tr>
<td>HSE1007F</td>
<td>Foundations of Hearing and Balance</td>
</tr>
<tr>
<td>HSE1008S</td>
<td>Fundamentals of Anatomy and Physiology IA</td>
</tr>
<tr>
<td>HSE1008S</td>
<td>Fundamentals of Anatomy and Physiology IA</td>
</tr>
<tr>
<td>HSE1009F</td>
<td>Fundamentals of Anatomy and Physiology IB</td>
</tr>
<tr>
<td>HSE1009F</td>
<td>Fundamentals of Anatomy and Physiology IB</td>
</tr>
<tr>
<td>HSE1010S</td>
<td>Fundamentals of Human Occupation and Development IA</td>
</tr>
<tr>
<td>HSE1011F</td>
<td>Fundamentals of Human Occupation and Development IB</td>
</tr>
<tr>
<td>HSE1012S</td>
<td>Fundamentals of Biosciences for Physiotherapy IA</td>
</tr>
<tr>
<td>HSE1013F</td>
<td>Fundamentals of Biosciences for Physiotherapy IB</td>
</tr>
<tr>
<td>HSE1014S</td>
<td>Fundamentals of Movement Science and Applied Physiotherapy IA</td>
</tr>
<tr>
<td>HSE1015F</td>
<td>Fundamentals of Movement Science &amp; Applied Physiotherapy IB</td>
</tr>
<tr>
<td>HUB1006F</td>
<td>Introduction to Integrated Health Sciences Part I</td>
</tr>
<tr>
<td>HUB1006F</td>
<td>Introduction to Integrated Health Sciences Part I</td>
</tr>
<tr>
<td>HUB1007S</td>
<td>Introduction to Integrated Health Sciences Part II</td>
</tr>
<tr>
<td>HUB1007S</td>
<td>Introduction to Integrated Health Sciences Part II</td>
</tr>
<tr>
<td>HUB1014S</td>
<td>Anatomy for Communication Sciences</td>
</tr>
<tr>
<td>HUB1019F</td>
<td>Anatomy &amp; Physiology IA</td>
</tr>
<tr>
<td>HUB1020S</td>
<td>Anatomy &amp; Physiology IB</td>
</tr>
<tr>
<td>HUB1022F</td>
<td>Biosciences for Physiotherapy IA</td>
</tr>
<tr>
<td>HUB1023S</td>
<td>Biosciences for Physiotherapy IB</td>
</tr>
<tr>
<td>HUB2005F</td>
<td>Introduction to Medical Engineering</td>
</tr>
<tr>
<td>HUB2015W</td>
<td>Anatomy and Physiology II for Health and Rehabilitation Sciences</td>
</tr>
<tr>
<td>HUB2015W</td>
<td>Anatomy and Physiology II for Health and Rehabilitation Sciences</td>
</tr>
<tr>
<td>HUB2017H</td>
<td>Integrated Health Systems Part IA</td>
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<td>Integrated Health Systems Part IA</td>
</tr>
<tr>
<td>HUB2019F</td>
<td>Integrated Anatomical and Physiological Sciences I</td>
</tr>
<tr>
<td>HUB2020S</td>
<td>Special Study Module</td>
</tr>
<tr>
<td>HUB2021S</td>
<td>Integrated Anatomical and Physiological Sciences II</td>
</tr>
<tr>
<td>HUB2023W</td>
<td>Biosciences for Physiotherapy II</td>
</tr>
<tr>
<td>HUB3006F</td>
<td>General and Applied Physiology</td>
</tr>
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</tr>
<tr>
<td>HUB3007S</td>
<td>Human Neurosciences</td>
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<td>Human Neurosciences</td>
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<td>IBS3020W</td>
<td>Molecular Medicine</td>
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</tr>
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<td>Molecular Bioscience</td>
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<td>Molecular Bioscience</td>
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<td>MCB2022S</td>
<td>Metabolism &amp; Bioengineering</td>
</tr>
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<td>MCB2023S</td>
<td>Functional Genetics</td>
</tr>
<tr>
<td>Course Code</td>
<td>Course Name</td>
</tr>
<tr>
<td>--------------</td>
<td>----------------------------------------------------------------------------</td>
</tr>
<tr>
<td>MDN2002W</td>
<td>Clinical Sciences I</td>
</tr>
<tr>
<td>MDN2002W</td>
<td>Clinical Sciences I</td>
</tr>
<tr>
<td>MDN3001H</td>
<td>Introduction to Clinical Practice</td>
</tr>
<tr>
<td>MDN3003H</td>
<td>Introduction to Clinical Practice Part II</td>
</tr>
<tr>
<td>MDN3004W</td>
<td>Clinical Sciences II</td>
</tr>
<tr>
<td>MDN4011W</td>
<td>Medicine</td>
</tr>
<tr>
<td>MDN4015W</td>
<td>Pharmacology and Applied Therapeutics</td>
</tr>
<tr>
<td>MDN4016W</td>
<td>Medicine for External Credit</td>
</tr>
<tr>
<td>MDN5003H</td>
<td>Pharmacology &amp; Applied Therapeutics</td>
</tr>
<tr>
<td>MDN5004W</td>
<td>Pharmacology and Therapeutics for External Credit</td>
</tr>
<tr>
<td>MDN5005W</td>
<td>Dermatology</td>
</tr>
<tr>
<td>MDN5006W</td>
<td>Rheumatology</td>
</tr>
<tr>
<td>MDN6000W</td>
<td>Medicine (Including Allied Disciplines)</td>
</tr>
<tr>
<td>MDN6003W</td>
<td>Medicine for External Credit</td>
</tr>
<tr>
<td>MDN6004W</td>
<td>Exit examination on procedural competence</td>
</tr>
<tr>
<td>OBS4003W</td>
<td>Obstetrics</td>
</tr>
<tr>
<td>OBS4005W</td>
<td>Obstetrics &amp; Gynaecology for External Credit</td>
</tr>
<tr>
<td>OBS5005W</td>
<td>Gynaecology</td>
</tr>
<tr>
<td>OBS6000W</td>
<td>Obstetrics</td>
</tr>
<tr>
<td>OBS6001W</td>
<td>Obstetrics for External Credit</td>
</tr>
<tr>
<td>PED4016W</td>
<td>Neonatology</td>
</tr>
<tr>
<td>PED5001W</td>
<td>Caring for Children</td>
</tr>
<tr>
<td>PED5003W</td>
<td>Caring for Children for External Credit</td>
</tr>
<tr>
<td>PED6000W</td>
<td>Paediatrics and Child Health</td>
</tr>
<tr>
<td>PED6001W</td>
<td>Paediatrics for External Credit</td>
</tr>
<tr>
<td>PHYS1025F</td>
<td>Physics 1025</td>
</tr>
<tr>
<td>PHYS1025F</td>
<td>Physics 1025</td>
</tr>
<tr>
<td>PPH1001F</td>
<td>Becoming a Professional</td>
</tr>
<tr>
<td>PPH1001F</td>
<td>Becoming a Professional</td>
</tr>
<tr>
<td>PPH1002S</td>
<td>Becoming a Health Professional</td>
</tr>
<tr>
<td>PPH1002S</td>
<td>Becoming a Health Professional</td>
</tr>
<tr>
<td>PPH1002S</td>
<td>Becoming a Health Professional</td>
</tr>
<tr>
<td>PPH2000W</td>
<td>Becoming a Doctor Part 1A</td>
</tr>
<tr>
<td>PPH3000H</td>
<td>Becoming a Doctor Part II A</td>
</tr>
<tr>
<td>PPH4056W</td>
<td>Health in Context</td>
</tr>
<tr>
<td>PPH6000W</td>
<td>Family Medicine and Palliative Medicine</td>
</tr>
<tr>
<td>PPH6005W</td>
<td>Short Elective</td>
</tr>
<tr>
<td>PPRY2002W</td>
<td>Psychiatry for Occupational Therapists</td>
</tr>
<tr>
<td>PPRY4000W</td>
<td>Psychiatry</td>
</tr>
<tr>
<td>PPRY6000W</td>
<td>Psychiatry and Mental Health</td>
</tr>
<tr>
<td>PSSY1004F</td>
<td>Intro to Psychology Part 1</td>
</tr>
<tr>
<td>PSSY1004F</td>
<td>Intro to Psychology Part 1</td>
</tr>
<tr>
<td>PSSY1005S</td>
<td>Intro to Psychology Part 2</td>
</tr>
<tr>
<td>PSSY1006F</td>
<td>Introduction to Psychology Part 1 +</td>
</tr>
<tr>
<td>PSSY1006F</td>
<td>Introduction to Psychology Part 1 +</td>
</tr>
<tr>
<td>PSSY1006F</td>
<td>Introduction to Psychology Part 1 +</td>
</tr>
<tr>
<td>PSSY1007S</td>
<td>Introduction to Psychology Part 2 +</td>
</tr>
<tr>
<td>PSSY2003S</td>
<td>Social Psychology and Intergroup Relations</td>
</tr>
<tr>
<td>PSSY2006F</td>
<td>Research In Psychology I</td>
</tr>
<tr>
<td>PSSY2009F</td>
<td>Developmental Psychology</td>
</tr>
<tr>
<td>PSSY2010S</td>
<td>Cognition and Neuroscience</td>
</tr>
<tr>
<td>PTY2000S</td>
<td>Integrated Health Systems Part IB</td>
</tr>
<tr>
<td>Course Code</td>
<td>Course Name</td>
</tr>
<tr>
<td>-------------</td>
<td>-------------</td>
</tr>
<tr>
<td>PTY2000S</td>
<td>Integrated Health Systems Part IB</td>
</tr>
<tr>
<td>PTY3009H</td>
<td>Integrated Health Systems Part II</td>
</tr>
<tr>
<td>PTY3009H</td>
<td>Integrated Health Systems Part II</td>
</tr>
<tr>
<td>PTY4008S</td>
<td>Medicina Forensis</td>
</tr>
<tr>
<td>PTY6017W</td>
<td>Forensic Medicine</td>
</tr>
<tr>
<td>RAY2001W</td>
<td>Radiobiology</td>
</tr>
<tr>
<td>SLL1028H</td>
<td>Xhosa for Health and Rehabilitation Sciences</td>
</tr>
<tr>
<td>SLL1028H</td>
<td>Xhosa for Health and Rehabilitation Sciences</td>
</tr>
<tr>
<td>SLL1028H</td>
<td>Xhosa for Health and Rehabilitation Sciences</td>
</tr>
<tr>
<td>SLL1044S</td>
<td>Beginners' Afrikaans for MBChB</td>
</tr>
<tr>
<td>SLL1048H</td>
<td>Afrikaans for Health and Rehabilitation Sciences</td>
</tr>
<tr>
<td>SLL1048H</td>
<td>Afrikaans for Health and Rehabilitation Sciences</td>
</tr>
<tr>
<td>SLL1048H</td>
<td>Afrikaans for Health and Rehabilitation Sciences</td>
</tr>
<tr>
<td>SLL2002H</td>
<td>Becoming A Doctor: Part IB</td>
</tr>
<tr>
<td>SLL3002H</td>
<td>Becoming a Doctor: Part 2B</td>
</tr>
<tr>
<td>SLL3003W</td>
<td>Clinical Language</td>
</tr>
<tr>
<td>Topic</td>
<td>Page</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>------</td>
</tr>
<tr>
<td>Acquired Neurogenic Language Disorders</td>
<td>79</td>
</tr>
<tr>
<td>Addictions Psychiatry, Discipline of</td>
<td>188</td>
</tr>
<tr>
<td>Additional Undergraduate Information</td>
<td>224</td>
</tr>
<tr>
<td>Administrative offices at UCT dealing with student matters, contact details of</td>
<td>7</td>
</tr>
<tr>
<td>Adolescent Health Research Unit (AHRU)</td>
<td>209</td>
</tr>
<tr>
<td>Adult Dysphagia &amp; Motor Speech</td>
<td>80</td>
</tr>
<tr>
<td>Adult Rehabilitative Audiology</td>
<td>77</td>
</tr>
<tr>
<td>Afrikaans for HRS</td>
<td>113</td>
</tr>
<tr>
<td>Allergology (Paediatric), Discipline of</td>
<td>174</td>
</tr>
<tr>
<td>Allergology, Discipline of</td>
<td>156</td>
</tr>
<tr>
<td>Anaesthesia and Perioperative Medicine, Department of</td>
<td>143</td>
</tr>
<tr>
<td>Anaesthesia Ext Credit</td>
<td>133</td>
</tr>
<tr>
<td>Anaesthesia for External Credit</td>
<td>134</td>
</tr>
<tr>
<td>Anaesthesia Part I</td>
<td>32</td>
</tr>
<tr>
<td>Anaesthesia Part II</td>
<td>47</td>
</tr>
<tr>
<td>Anatomical Pathology, Discipline of</td>
<td>180</td>
</tr>
<tr>
<td>Anatomy &amp; Physiology IA</td>
<td>110</td>
</tr>
<tr>
<td>Anatomy &amp; Physiology IB</td>
<td>111</td>
</tr>
<tr>
<td>Anatomy and Physiology II for Health and Rehabilitation Sciences</td>
<td>114</td>
</tr>
<tr>
<td>Anatomy for Comm Sciences</td>
<td>68</td>
</tr>
<tr>
<td>Anxiety &amp; Stress Disorders, Medical Research Council (MRC) Unit on</td>
<td>219</td>
</tr>
<tr>
<td>Applied Physiotherapy I</td>
<td>115</td>
</tr>
<tr>
<td>Applied Physiotherapy II</td>
<td>118</td>
</tr>
<tr>
<td>Applied Physiotherapy III</td>
<td>120</td>
</tr>
<tr>
<td>Basis of Hearing &amp; Balance</td>
<td>69</td>
</tr>
<tr>
<td>Becoming a Doctor Part 1A</td>
<td>27</td>
</tr>
<tr>
<td>Becoming a Doctor Part II A</td>
<td>29</td>
</tr>
<tr>
<td>Becoming a Doctor: Part 2B</td>
<td>31</td>
</tr>
<tr>
<td>Becoming A Doctor: Part I B</td>
<td>28</td>
</tr>
<tr>
<td>Becoming a Health Professional</td>
<td>111</td>
</tr>
<tr>
<td>Becoming a Professional</td>
<td>108</td>
</tr>
<tr>
<td>Becoming a Rehab Prof II</td>
<td>120</td>
</tr>
<tr>
<td>Becoming a Rehab Professnl I</td>
<td>117</td>
</tr>
<tr>
<td>Beginners' Afrikaans for MBCkB</td>
<td>26</td>
</tr>
<tr>
<td>Biochemistry and Structural Biology, Division of</td>
<td>152</td>
</tr>
<tr>
<td>Bioethics Centre</td>
<td>5</td>
</tr>
<tr>
<td>Biological Information Transfer</td>
<td>57</td>
</tr>
<tr>
<td>Biosciences for Physio II</td>
<td>114</td>
</tr>
<tr>
<td>Biosciences for Physiotherapy IA</td>
<td>110</td>
</tr>
<tr>
<td>Biosciences for Physiotherapy IB</td>
<td>112</td>
</tr>
<tr>
<td>Biostatistics, Discipline of</td>
<td>192</td>
</tr>
<tr>
<td>Brain Behaviour Initiative (BBI)</td>
<td>209</td>
</tr>
<tr>
<td>BSc (Audiology)</td>
<td>60</td>
</tr>
<tr>
<td>BSc (Medicine)</td>
<td>51</td>
</tr>
<tr>
<td>BSc (Occupational Therapy)</td>
<td>86</td>
</tr>
<tr>
<td>BSc (Physiotherapy)</td>
<td>105</td>
</tr>
<tr>
<td>BSc (Speech-Language Pathology)</td>
<td>60</td>
</tr>
<tr>
<td>Cardiology (Paediatric), Discipline of</td>
<td>176</td>
</tr>
<tr>
<td>Cardiology, Discipline of</td>
<td>157</td>
</tr>
<tr>
<td>Cardiothoracic Surgery, Discipline of</td>
<td>201</td>
</tr>
<tr>
<td>Cardiovascular Research in Africa, Hatter Institute for</td>
<td>215</td>
</tr>
<tr>
<td>Cardiovascular Research Unit</td>
<td>210</td>
</tr>
</tbody>
</table>
Caring for Children.................................................................................................................. 36
Caring for Children for External Credit........................................................................................ 134
Charter, Faculty of Health Sciences ............................................................................................... 257
Chemical and Systems Biology, Division of.................................................................................... 153
Chemical Pathology, Discipline of ................................................................................................. 181
Chemistry for Medical Students .................................................................................................. 53
Child and Adolescent Psychiatry, Discipline of ............................................................................ 175
Child Health Unit ............................................................................................................................ 176
Child Language ............................................................................................................................... 72
Child Language II ............................................................................................................................ 80
Child Nursing Practice .................................................................................................................... 175
Child Speech ....................................................................................................................................... 74
Class Medals ........................................................................................................................................ 226
Clinical Audiology I ........................................................................................................................ 73
Clinical Audiology II ........................................................................................................................ 76
Clinical Audiology IIIA .................................................................................................................... 82
Clinical Audiology IIIB .................................................................................................................... 82
Clinical Heamatology, Discipline of ............................................................................................... 157
Clinical Immunology, Discipline of ............................................................................................... 156
Clinical Laboratory Sciences, Department of ................................................................................ 152
Clinical Language ............................................................................................................................ 31
Clinical Pharmacology, Discipline of ............................................................................................. 158
Clinical Physiotherapy I .................................................................................................................. 114
Clinical Physiotherapy II ................................................................................................................ 117
Clinical Physiotherapy III ............................................................................................................... 119
Clinical Sciences I .......................................................................................................................... 113
Clinical Sciences II ........................................................................................................................ 116
Clinical Speech Therapy I ............................................................................................................... 74
Clinical Speech Therapy II ............................................................................................................. 78
Clinical Speech Therapy IIIA .......................................................................................................... 82
Clinical Speech Therapy IIIB .......................................................................................................... 83
Cognition and Neuroscience ............................................................................................................ 71
Colorectal Cancer Research Consortium, CANSA's ....................................................................... 210
Communication Sciences and Disorders, Discipline of ................................................................. 144
Community Eye Health Institute ..................................................................................................... 213
Computational Biology, Discipline of ............................................................................................ 153
Consultation-Liaison Psychiatry, Discipline of ............................................................................. 188
Course code index ............................................................................................................................. 260
Critical Care (Paediatric), Discipline of .......................................................................................... 176
Critical Care Medicine ..................................................................................................................... 159
Cuban degree courses ...................................................................................................................... 129
Dean's Merit List .............................................................................................................................. 226
Dean's Office ....................................................................................................................................... 5
Declaration, Faculty ........................................................................................................................... 259
Deferred examinations ....................................................................................................................... 7
Degree and course codes .................................................................................................................. 10
Degree with distinction or honours .................................................................................................. 224
Departments in the Faculty ............................................................................................................... 140
Dermatology ....................................................................................................................................... 39
Dermatology (Paediatric), Discipline of .......................................................................................... 176
Dermatology, Discipline of (Adult) .................................................................................................. 159
Desmond Tutu Centre ....................................................................................................................... 213
Developmental Paediatrics, Discipline of ....................................................................................... 176
Developmental Psychology ............................................................................................................... 95
INDEX
INDEX

Diagnostic Audiology in Special Pops ................................................................. 73
Diagnostic Audiology ......................................................................................... 72
Disability Information Management and Communication Systems ............ 126
Disability Studies, Discipline of ................................................................. 144
Distinguished Teachers in the Faculty .............................................................. 259
Drug Discovery and Development Research (DDD) Unit ............................ 219
Early Intervention ......................................................................................... 68
Education Development Unit ........................................................................... 5
E-learning Policy ............................................................................................. 249
Emergency Medicine, Discipline of .............................................................. 201
Endocrinology (Paediatric), Discipline of ....................................................... 177
Endocrinology and Diabetic Medicine, Discipline of ................................... 160
Environmental and Occupational Health Research (CEOHR), Centre for ... 210
Environmental Health, Discipline of ............................................................ 192
Epidemiology, Discipline of ............................................................................ 192
Exit examination on procedural competence ............................................... 47
Faculty Office and other central offices in the Faculty .................................. 5
Family Medicine and Palliative Medicine .................................................... 46
Family Medicine, Discipline of ..................................................................... 192
Fees Office .................................................................................................... 7
Financial assistance ...................................................................................... 7
Forensic Medicine ....................................................................................... 138
Forensic Medicine and Toxicology, Discipline of ........................................ 181
Forensic Psychiatry, Discipline of ............................................................... 188
Foundation Theory for Occupational Therapy Practice I ............................ 99
Foundational Concepts in Early Intervention ............................................... 85
Foundational Concepts in Human Communication Development ............ 84
Foundations of Hearing and Balance ............................................................ 86
Foundational Theory for OT Prac II ............................................................ 100
Functional Genetics ..................................................................................... 58
Fundamentals of Anatomy and Physiology IA ............................................ 120
Fundamentals of Anatomy and Physiology IB .............................................. 122
Fundamentals of Biosciences for Physiotherapy IA .................................... 121
Fundamentals of Biosciences for Physiotherapy IB .................................... 123
Fundamentals of Human Occupation and Development 1B ....................... 103
Fundamentals of Human Occupation and Development IA ...................... 102
Fundamentals of Integrated Health Sciences Part I ...................................... 48
Fundamentals of Integrated Health Sciences Part II ..................................... 50
Fundamentals of Movement Science & Applied Physiotherapy IB ............. 123
Fundamentals of Movement Science and Applied Physiotherapy IA .......... 122
Fundamentals of Speech and Hearing Sciences ........................................... 83
Gastroenterology (Paediatric), Discipline of ............................................... 177
Gender, Health and Justice Research Unit .................................................. 214
General and Applied Physiology ................................................................. 131
General Information .................................................................................... 5
General Internal Medicine, Discipline of ...................................................... 160
General Paediatrics, Discipline of ............................................................... 177
General Psychiatry, Discipline of ............................................................... 188
General Rules for Undergraduate Students ................................................. 11
General Surgery, Discipline of ................................................................. 202
George Hospital Staff (Medicine) ................................................................. 167
Geriatric Medicine and the Albertina and Walter Sisulu Institute of Ageing in Africa 214
Guide to the usage of this Handbook ............................................................ 4
Gynaecology ............................................................................................... 38
<table>
<thead>
<tr>
<th>Department/Unit</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Occupational Medicine, Discipline of</td>
<td>165</td>
</tr>
<tr>
<td>Occ Ther Prac &amp; Service Learng</td>
<td>100</td>
</tr>
<tr>
<td>Obstetrics for External Credit</td>
<td>136</td>
</tr>
<tr>
<td>Occupational Therapy, Division of</td>
<td>145</td>
</tr>
<tr>
<td>Occupational Therapy Theory and Practice in Physical Health</td>
<td>98</td>
</tr>
<tr>
<td>Obstetrics and Gynaecology, Department of</td>
<td>169</td>
</tr>
<tr>
<td>Obstetrics</td>
<td>44</td>
</tr>
<tr>
<td>Obstetrics for External Credit</td>
<td>136</td>
</tr>
<tr>
<td>Life on Land: Animals</td>
<td>57</td>
</tr>
<tr>
<td>Lipidology, Discipline of</td>
<td>162</td>
</tr>
<tr>
<td>Lung Infection and Immunity Unit</td>
<td>218</td>
</tr>
<tr>
<td>Master's Degree for MBChB students</td>
<td>22</td>
</tr>
<tr>
<td>Medical Gastroenterology, Discipline of</td>
<td>163</td>
</tr>
<tr>
<td>Medical Imaging Research Unit, MRC/UCT</td>
<td>221</td>
</tr>
<tr>
<td>Medical Microbiology, Discipline of</td>
<td>184</td>
</tr>
<tr>
<td>Medical Physics, Discipline of</td>
<td>199</td>
</tr>
<tr>
<td>Medical Virology, Discipline of</td>
<td>185</td>
</tr>
<tr>
<td>Medicina Forensis</td>
<td>132</td>
</tr>
<tr>
<td>Medicine</td>
<td>34</td>
</tr>
<tr>
<td>Medicine (Including Allied Disciplines)</td>
<td>43</td>
</tr>
<tr>
<td>Medicine (Paediatric), Discipline of</td>
<td>178</td>
</tr>
<tr>
<td>Medicine Ext Credit</td>
<td>133</td>
</tr>
<tr>
<td>Medicine, Department of</td>
<td>154</td>
</tr>
<tr>
<td>Metabolism &amp; Bioengineering</td>
<td>57</td>
</tr>
<tr>
<td>Military Hospital Staff (Medicine)</td>
<td>167</td>
</tr>
<tr>
<td>Mission Statement, Faculty</td>
<td>257</td>
</tr>
<tr>
<td>Mitchell's Plain Hospital Staff</td>
<td>167</td>
</tr>
<tr>
<td>Molecular Medicine</td>
<td>59</td>
</tr>
<tr>
<td>Molecular Mycobacteriology Research Unit, MRC/NHLS/UCT</td>
<td>219</td>
</tr>
<tr>
<td>Movement Science I</td>
<td>110</td>
</tr>
<tr>
<td>Movement Science II</td>
<td>115</td>
</tr>
<tr>
<td>Movement Science III</td>
<td>117</td>
</tr>
<tr>
<td>Neonatology</td>
<td>34</td>
</tr>
<tr>
<td>Neonatology, Discipline of</td>
<td>178</td>
</tr>
<tr>
<td>Nephrology (Paediatric), Discipline of</td>
<td>179</td>
</tr>
<tr>
<td>Nephrology and Hypertension, Discipline of</td>
<td>163</td>
</tr>
<tr>
<td>Neuro and Neuro Surg</td>
<td>41</td>
</tr>
<tr>
<td>Neurology (Paediatric), Discipline of</td>
<td>179</td>
</tr>
<tr>
<td>Neurology, Discipline of</td>
<td>164</td>
</tr>
<tr>
<td>Neuropsychiatry, Discipline of</td>
<td>188</td>
</tr>
<tr>
<td>Neuropsychology (Paediatric), Discipline of</td>
<td>179</td>
</tr>
<tr>
<td>Neurosurgery, Discipline of</td>
<td>203</td>
</tr>
<tr>
<td>New Somerset Hospital Staff (Medicine)</td>
<td>167</td>
</tr>
<tr>
<td>Nuclear Medicine, Discipline of</td>
<td>199</td>
</tr>
<tr>
<td>Nursing and Midwifery, Division of</td>
<td>145</td>
</tr>
<tr>
<td>OAE's &amp; Electrophysiology</td>
<td>77</td>
</tr>
<tr>
<td>Obs &amp; Gynae Ext Credits</td>
<td>132</td>
</tr>
<tr>
<td>Obstetrics</td>
<td>44</td>
</tr>
<tr>
<td>Obstetrics and Gynaecology, Department of</td>
<td>169</td>
</tr>
<tr>
<td>Occ Perspctv on Hlth &amp; Wellng</td>
<td>93</td>
</tr>
<tr>
<td>Occ Ther Prac &amp; Service Learng</td>
<td>100</td>
</tr>
<tr>
<td>Occupational Medicine, Discipline of</td>
<td>165</td>
</tr>
<tr>
<td>Occupational Therapy II</td>
<td>96</td>
</tr>
<tr>
<td>Occupational Therapy Theory and Practice in Mental Health</td>
<td>98</td>
</tr>
<tr>
<td>Occupational Therapy Theory and Practice in Physical Health</td>
<td>98</td>
</tr>
<tr>
<td>Occupational Therapy, Division of</td>
<td>145</td>
</tr>
<tr>
<td>Ophthalmology</td>
<td>41</td>
</tr>
<tr>
<td>Ophthalmology, Discipline of</td>
<td>204</td>
</tr>
<tr>
<td>Orthopaedic Surgery</td>
<td>39</td>
</tr>
</tbody>
</table>
OT Research & Practice Management ................................................................. 99
Otorhinolaryngology ....................................................................................... 42
Otorhinolaryngology, Discipline of ................................................................. 205
Paediatric Motor SP Dis & Dysphagia ................................................................. 79
Paediatric Pathology, Discipline of ................................................................. 186
Paediatric Radiology, Discipline of ................................................................. 199
Paediatric Rehab Audiology ........................................................................... 71
Paediatric Surgery, Discipline of ................................................................. 206
Paediatrics and Child Health ........................................................................ 45
Paediatrics and Child Health, Department of ............................................... 172
Paediatrics for External Credit ....................................................................... 137
Pathology, Department of ................................................................................ 180
Personal Financial Management .................................................................... 129
Pharmacology & Applied Therapeutics ......................................................... 37
Pharmacology and Applied Therapeutics ....................................................... 34
Pharmacology and Therapeutics for External Credit ....................................... 135
Physics 1025 .................................................................................................... 54
Physiotherapy, Division of ............................................................................. 146
Plastic, Reconstructive and Maxillo-facial Surgery, Discipline of ............... 207
Preparation for Entry-level Psychology for Health and Rehab Sciences Part I 121
Primary Healthcare Directorate ....................................................................... 5
Prizes ................................................................................................................ 226
Professional Behaviour ................................................................................... 234
Promoting Healthy Lifestyles .......................................................................... 127
Psych for Occupational Therapy .................................................................... 94
Psychiatry ......................................................................................................... 32
Psychiatry and Mental Health ......................................................................... 46
Psychiatry and Mental Health, Department of ............................................. 188
Psychopharmacology, Discipline of ............................................................... 188
Psychotherapy, Discipline of ......................................................................... 188
Public Health and Family Medicine, Department of .................................... 192
Public Health Audiology ................................................................................ 78
Public Health Medicine, Discipline of .......................................................... 196
Public Mental Health, Alan Fisher Centre for .............................................. 209
Public Mental Health, Discipline of ............................................................... 188
Pulmonology (Adult), Discipline of ............................................................... 165
Pulmonology (Paediatric), Discipline of ........................................................ 179
Radiation Medicine, Department of .............................................................. 199
Radiation Oncology, Discipline of ............................................................... 199
Radiobiology ................................................................................................... 129
Radiology, Discipline of ................................................................................. 200
Receptor Biology, MRC/UCT Research Group for ....................................... 221
Rehabilitation Technology ............................................................................. 76
Research In Psychology I ............................................................................... 71
Research Methods & Biostats I ....................................................................... 119
Research Methods and Biostatistics II ............................................................ 120
Research Report .............................................................................................. 81
Rheumatology ................................................................................................. 40
Rheumatology (Adult), Discipline of ............................................................. 166
Rheumatology (Paediatric), Discipline of ...................................................... 179
Rules and Curricula for Undergraduate Programmes .................................... 17
SA Sign Language .......................................................................................... 75
School-Based Interventions .......................................................................... 74
Seminars in Comm Sciences .......................................................................... 81
<table>
<thead>
<tr>
<th>Short Elective</th>
<th>48</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social and Behavioural Sciences. Discipline of</td>
<td>197</td>
</tr>
<tr>
<td>Social Psych &amp; Intergroup Rel</td>
<td>95</td>
</tr>
<tr>
<td>Special Study Module</td>
<td>55</td>
</tr>
<tr>
<td>Speech and Hearing Sciences</td>
<td>66</td>
</tr>
<tr>
<td>Student Transport Policy</td>
<td>253</td>
</tr>
<tr>
<td>Surgery</td>
<td>37</td>
</tr>
<tr>
<td>Surgery (Incl Allied Disc)</td>
<td>43</td>
</tr>
<tr>
<td>Surgery Ext Credit</td>
<td>138</td>
</tr>
<tr>
<td>Surgery for External Credit</td>
<td>135</td>
</tr>
<tr>
<td>Surgery, Department of</td>
<td>201</td>
</tr>
<tr>
<td>Surgical Gastroenterology, Discipline of</td>
<td>208</td>
</tr>
<tr>
<td>Term dates</td>
<td>8</td>
</tr>
<tr>
<td>Transcripts</td>
<td>7</td>
</tr>
<tr>
<td>Trauma</td>
<td>38</td>
</tr>
<tr>
<td>Tuberculosis, Policy on</td>
<td>247</td>
</tr>
<tr>
<td>Unprofessional Conduct</td>
<td>238</td>
</tr>
<tr>
<td>Urology</td>
<td>42</td>
</tr>
<tr>
<td>Urology, Discipline of</td>
<td>208</td>
</tr>
<tr>
<td>Vestibular Management</td>
<td>77</td>
</tr>
<tr>
<td>Victoria Hospital Staff</td>
<td>167</td>
</tr>
<tr>
<td>Voice</td>
<td>80</td>
</tr>
<tr>
<td>Women’s Health Research Unit</td>
<td>222</td>
</tr>
<tr>
<td>Work-Integrated Practice Learning Part I</td>
<td>128</td>
</tr>
<tr>
<td>Work-Integrated Practice Learning Part II</td>
<td>128</td>
</tr>
<tr>
<td>Xhosa for HRS</td>
<td>112</td>
</tr>
</tbody>
</table>