

***This introductory guide provides students of the Diploma and MMedSci in Nephrology with general information regarding the course and the University of Sheffield rules and regulations.***

***Amendments to the course curriculum and modules' teaching are liable to be introduced during the academic year by Module leaders or the course organiser. Students are informed of any changes as and when they take place.***

***Students are expected to familiarise themselves fully with the University of Sheffield academic rules and regulations and those informing postgraduate education through the University of Sheffield website. This introductory guide is no substitute for the student familiarising him/herself with the University of Sheffield graduate course rules and regulations.***

***This document is not a binding contract as the Course Management Team reserves the right to modify the course content during the academic year.***

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## **BACKGROUND**

The Sheffield Kidney Institute (SKI) was founded in 1990, bringing together all the clinical and research activities in the field of nephrology in the city of Sheffield within a purpose built unit. The SKI is situated at the Northern General Hospital Campus of the Sheffield Teaching Hospitals NHS Foundation Trust, where it provides a regional service in nephrology for a population approaching 1.5 million. It incorporates all acute and chronic nephrology services, including haemodialysis and continuous ambulatory peritoneal dialysis (CAPD) as well as renal transplantation. The SKI includes additional clinical facilities on Vickers wards 1, 2 and 3. It also incorporates its own offices and outpatients suite at the Sorby Wing of the SKI.

The Staffing at the Sheffield Kidney Institute includes nine Consultant Nephrologists and 2 Professors of Nephrology, as well as a Reader and four Consultant Transplant/Vascular Surgeons. Staffing also includes 1 Associate Specialist and 5 staff grade doctors. Junior staff includes: 10 Specialist Registrars, 7 Core Medical Training doctors and one Foundation Year1 doctor. A large number of University research staff is affiliated to the Institute, including 2 non-clinical Senior Lecturers.

Sheffield has a long research tradition in the field of nephrology since its dialysis and transplantation programme started in 1966. Within the SKI, clinical and basic research is conducted. Clinical research involves a wide range of clinical trials covering the areas of interest of the staff such as progression of chronic kidney disease (CKD), polycystic kidney disease (PKD), diabetic nephropathy, treatment of renal osteodystrophy as well as the use of new solutions for CAPD. Basic research is undertaken within a dedicated set of research laboratories in the Faculty of Medicine and Biomedical Sciences facilities located at the Royal Hallamshire Hospital campus, while clinical research facilities are available within the new Sorby wing of the SKI. The thrust of the research programme evolves around the study of the mechanisms and mediators of experimental and clinical renal remodelling and scarring in CKD with particular emphasis on polycystic kidney disease. The Academic Nephrology Unit is an integral part of the 3Is section of the School of Medicine and Biomedical Sciences.

The Sheffield Teaching Hospitals NHS Foundation Trust is one of the leading teaching hospitals in the United Kingdom. It comprises in excess of two thousand beds located within the campuses of the Northern General, the Royal Hallamshire and the Weston Park Hospitals.

# **DIPLOMA and MASTERS (MMedSci) in NEPHROLOGY**

The Sheffield Kidney Institute, situated at the Northern General site of the Sheffield Teaching Hospitals NHS Foundation Trust, offers Diploma and Masters (MMedSci) courses in Nephrology.

The Diploma course is a full-time taught course running for 9 months through the academic year. Final examination and recommendation of the award of the Diploma to successful candidates takes place late in May or early in June. Students electing to pursue the Masters Degree in Nephrology (MMedSci) option will complete their Diploma studies first before undertaking a Masters project. Students are allocated projects from a wide range of clinical topics. Options are available for those who would like to undertake laboratory-based research projects. They will be expected to submit a comprehensive dissertation based on their work, which may be the subject of an oral presentation. Students will be supported in their projects by the clinical and/or scientific staff of the SKI. The project will be expected to incorporate many of the skills students have acquired during the Diploma course (research methodologies, critical appraisal of the literature, statistical analysis, computing etc). The Awards for Masters Degree will be recommended in September of the academic year.

## **AIMS AND OBJECTIVES**

The course aims to provide a structured teaching programme, both clinical and theoretical, covering most aspects of clinical nephrology. It is intended for young overseas physicians with some experience in nephrology. Those with a good general, internal, medicine background but with little or no nephrology experience may also find the courses a useful introduction to specialisation in Nephrology. It is designed to provide students, who intend to pursue a career in nephrology, with the necessary exposure and background in clinical nephrology to develop their career.

The course is not intended to form Nephrologists, as this requires a number of years of clinical training in the field. Instead, it provides an introduction to nephrology for those with no significant past experience in the specialty and provides an update and advanced knowledge for those with prior experience. The course qualifications Diploma/MMedSci should not be considered by students or potential employers as a Nephrology specialist qualification, instead they provide the foundation for further training and qualifications in Nephrology.

## **PHILOSOPHY OF THE COURSE**

The philosophy of the course is based on the principles of adult education combining teacher-centred and student-centred learning. It consists of alternating periods of intensive teaching and tutorials with periods of reflective self-learning. To begin with, the majority of the teaching is didactic consisting of formal lectures and seminars. These are complemented by students' self-learning as well as case based discussions and workshops. Considerable emphasis is on student-centred learning by means of interactive sessions, computer assisted learning (CAL), workshops, group exercises and individual presentations. Throughout the academic year, students may alternate time dedicated to experiential (clinical) activities with time dedicated to reflective learning.

A personalised training programme is aimed to provide the students with a range of clinical knowledge and skills. It is based on individual students' personal development plans (PDP) discussed and agreed with the course organiser at the beginning of the academic course. The PDP is based on an in depth assessment of the student's background, clinical skills and level of knowledge as well as his/her personal training objectives. The Diploma course is a modular taught course in nature with emphasis on clinical aspects. It provides the students with a range of learning techniques and skills, all focused on achieving the course and the student's training and learning objectives.

Each student will be expected to build a portfolio incorporating all his or her educational material relevant to a given module. The portfolio is a live document allowing each student to record and store a wide range of information. The portfolios will be reviewed at regular intervals by the course supervisor/organiser and will form part of the ongoing evaluation of the student's efforts. The portfolios will also be reviewed at the end of each module and form part of the final module score.

Students will be divided into groups in order to focus and tailor their training to their previous level of knowledge and experience. The course emphasis is to address individual needs and dividing students according to their level of experience will allow addressing individual student's deficiencies, thus providing a tailored approach to student needs. This will also meet the students' individual expectations as formulated in their PDP.

Students will be expected to take initiative and work largely independently for the Masters project. Mentoring will be available to direct and support students but no direct supervision will be provided. The Masters project and dissertation must reflect the student's own effort and ability.

## MODULE LEADERS/STAFF CONTACT NUMBERS

### General Nephrology

Professor A M El Nahas  
Professor of Nephrology

Tel: 2714017  
Email: [m.el-nahas@shef.ac.uk](mailto:m.el-nahas@shef.ac.uk)

### Renal Surgery & Transplantation

Dr W S McKane  
Consultant Renal Physician

Tel: 2716466  
Email: [william.mckane@sth.nhs.uk](mailto:william.mckane@sth.nhs.uk)

Mr B Shrestha  
Consultant Surgeon

Tel: 2715315  
Email: [badri.shrestha@sth.nhs.uk](mailto:badri.shrestha@sth.nhs.uk)

### Renal Radiology

Professor S K Morcos  
Consultant Radiologist

Tel: 2714339  
Email: [sameh.morcos@sth.nhs.uk](mailto:sameh.morcos@sth.nhs.uk)

### Renal Histopathology

Dr J R Shortland  
Consultant Histopathologist

### Renal Dietetics

Mrs V Trickett/Miss D Jones  
Renal Dieticians

Tel: 2715072  
Email: [Val.Trickett@sth.nhs.uk](mailto:Val.Trickett@sth.nhs.uk)  
Email: [davlyn.jones@sth.nhs.uk](mailto:davlyn.jones@sth.nhs.uk)

### Renal Physiology & Pharmacology

Dr J Haylor  
Non-Clinical Senior Lecturer

Tel: 2715322  
Email: [j.l.haylor@sheffield.ac.uk](mailto:j.l.haylor@sheffield.ac.uk)

### Tropical Nephrology

Professor R Barsoum  
Professor of Nephrology  
Cairo Kidney Centre

Email: [rbarsoum@msn.com](mailto:rbarsoum@msn.com)

### Dialysis Replacement Therapy

Professor A M El Nahas  
Professor of Nephrology

Tel: 2714017  
Email: [m.el-nahas@sheffield.ac.uk](mailto:m.el-nahas@sheffield.ac.uk)

### Research & Statistics

Professor A M El Nahas  
Professor of Nephrology

Tel: 2714017  
Email: [m.el-nahas@sheffield.ac.uk](mailto:m.el-nahas@sheffield.ac.uk)

### Miscellaneous

Professor A Watson

Tel: 0115 9627961  
Email: [jhayes1@ncht.trent.nhs.uk](mailto:jhayes1@ncht.trent.nhs.uk)

Dr T Johnson

Tel: 2712842  
Email: [t.johnson@sheffield.ac.uk](mailto:t.johnson@sheffield.ac.uk)

## **Course Organiser**

Professor El Nahas

Tel: 2714017

Email: [m.el-nahas@sheffield.ac.uk](mailto:m.el-nahas@sheffield.ac.uk)

## **Course Tutors**

Professor C Brown  
Dr S Brennan

Email: [cbbrown1@compuserve.com](mailto:cbbrown1@compuserve.com)

## **Clinical Tutors**

Dr B Kawar  
Dr C Chow

Email: [bskawar@doctors.org.uk](mailto:bskawar@doctors.org.uk)

Email: [chow\\_cc@hotmail.com](mailto:chow_cc@hotmail.com)

## **Teaching Fellow**

Dr Parvez Hossain

Email: [m.hossain@sheffield.ac.uk](mailto:m.hossain@sheffield.ac.uk)

## **Course Mentors and Assistants**

Dr Mohsen El Kossi  
Dr Aimun Ahmed  
Dr Tim Ellam

Email: [elkossi@gmail.com](mailto:elkossi@gmail.com)

Email: [a.ahmed@shef.ac.uk](mailto:a.ahmed@shef.ac.uk)

Email: [timellam@doctors.org.uk](mailto:timellam@doctors.org.uk)

## **Postgraduate Course Manager**

Mrs Denise Smith

Tel: 2714663

Email: [d.smith@sheffield.ac.uk](mailto:d.smith@sheffield.ac.uk)

## **Academic Secretary**

Mrs Sue Smith

Tel 2714577

Email: [s.w.smith@sheffield.ac.uk](mailto:s.w.smith@sheffield.ac.uk)

## CONTRIBUTING SPEAKERS

### National Faculty:

Professor E Brown	London	Renal Replacement Therapy
Dr D Ansell	Bristol	UK Renal Registry
Dr D O'Donoghue	Manchester	Chronic kidney disease
Professor J Cunningham	London	Renal Osteodystrophy
Dr A Davenport	London	Acute Kidney Injury
Dr R Greenwood	Stevenage	Haemodialysis
Dr P Sweny	London	Renal Transplantation
Professor R J Unwin	London	Renal Physiology
Professor A Watson	Nottingham	Paediatric Nephrology
Dr D C Wheeler	London	Lipids and the Kidney
Dr K Harris	Leicester	Proteinuria
Professor K Farrington	Stevenage	End Stage Renal Care
Professor J Feehally	Leicester	Glomerulonephritis
Professor S Davies	Stoke-on-Trent	CAPD
Dr J Tattersall	Leeds	Haemodialysis
Dr C Tomson	Bristol	Cardiovascular of Renal Disease
Dr D Adu	Birmingham	Tropical Nephrology/Glomerulonephritis
Professor R Bilous	Middlesbrough	Diabetic Nephropathy
Dr J Levy	London	Vasculitis
Dr E Lightstone	London	CKD
Professor T Cook	London	Renal Pathology
Dr S White	Leeds	Renal Physiology
Professor S Powis	London	Renal Transplantation

In addition, overseas/international experts contribute to the teaching of the course.

### International Faculty

Professor R Barsoum	Egypt	Tropical Nephrology
Professor N Lameire	Belgium	Acute kidney injury
Professor A El-Sherif	Egypt	Evidence-based medicine
Dr K Jager	The Netherlands	Renal Registry setting

# THE SYLLABUS

The Diploma in Nephrology is an integrated modular educational course consisting of 10 modules.

The module outlines contain objectives and appropriate references. Lecture outlines and notes may also be included. These module outlines will serve as your own personal guide to study and will facilitate active learning. The outlines may be of particular help to those students whose mother tongue is not English.

The 10 taught modules are as follows:

<b>Module Code</b>	<b>Credits</b>	<b>Module Title</b>
MDN6200	30	General Nephrology
MDN6003	10	Tropical Nephrology
MDN6290	10	Renal Surgery and Transplantation
MDN6220	10	Dialysis Replacement Therapy
MDN6260	15	Renal Physiology, Pharmacology and Cell Biology
MDN6005	10	Renal Radiology
MDN6004	10	Renal Histopathology
MDN6230	10	Renal Dietetics
MDN6000	5	Research and Statistics
MDN6006	10	Miscellaneous, including Paediatric Nephrology and IT

## 1. **General Nephrology**

**Module Co-ordinator: Professor A M El Nahas**

Diagnosis and management of:

- Acute uraemic emergencies
  - Acute kidney injury (AKI)
  - Chronic kidney disease (CKD)
  - Glomerulonephritides
  - Diabetic nephropathy
  - Reflux nephrology
  - Urinary tract infection
  - Polycystic kidney disease
  - Hypertension
  - Reno-vascular hypertension
  - Renal stones
  - Electrolytes disorders
  - Renal osteodystrophy
  - Acid-base disorders
  - Drugs nephrotoxicity
- In addition, students will have bedside teaching demonstration sessions.

**2. Tropical and Developing World Nephrology as well as Public Health and Epidemiology**

**Module Co-ordinators: Professor R Barsoum/Dr J Peters**

- Tropical Nephrology – I Biological Agents (viral, bacterial, parasitic)
- Tropical Nephrology – II Physical and Chemical Agents, Environmental Pollution
- Infectious Nephropathies
- Acute kidney injury in the developing world
- Chronic kidney disease in the developing world
- ESRD in the developing world

**3. Renal/Access Surgery and Transplantation**

**Module Co-ordinators: Mr B Shrestha/Dr W S McKane**

- Techniques of vascular and peritoneal access surgery
- Tissue typing
- Immunology of allograft rejection
- Immunosuppression (new and old)
- Medical complications of renal transplantation
- Surgical complications of renal transplantation

**4. Dialysis Replacement Therapy**

**Module Co-ordinator: Professor A M El Nahas**

- The dialysis machine
- Principles of haemodialysis
- Applications in acute and chronic renal insufficiency
- Monitoring of dialysis adequacy
- High efficiency and high flux dialysis
- Haemofiltration techniques including CAVH and CVVH
- Plasmapheresis and its indications
- CAPD as well as intermittent and automated peritoneal dialysis

**5. Renal Physiology, Pharmacology and Cell Biology**

**Module Co-ordinator: Dr J Haylor**

- Fluid and electrolytes disorders
- Glomerular filtration/ultrafiltration
- Proximal tubular functions
- Tubulo-glomerular feedback
- Urinary acidification process
- Autoregulation of renal flow and pressure
- Cell biology of the kidney in health and disease

- 6. Renal Radiology**  
**Module Co-ordinator: Professor S K Morcos**
- Overview of renal imaging
  - Cystic disease of the kidney
  - Renal osteodystrophy
  - Angiography in the diagnosis and management of reno-vascular disease
  - Isotope renal imaging
  - Attendance of the weekly radiology meeting
- 7. Renal Histopathology**  
**Module Co-ordinator: Dr J Shortland**
- Principles of light microscopy
  - Principles of immunofluorescence
  - Principles of electron microscopy
  - Primary renal diseases
  - Secondary renal diseases
  - Transplantation histopathology
  - Attendance of the weekly renal histopathology conference
- 8. Renal Dietetics**  
**Module Co-ordinators: Miss D Jones/Mrs V Trickett**
- Nutritional assessment of kidney patients
  - Dietary prescription for renal patients
  - Dietary Management of dialysis patients
  - Malnutrition and CKD
- 9. Research and Statistical Analysis**  
**Module Co-ordinators: Professor A M El Nahas/ Statistical Services Unit, University of Sheffield**
- Introduction to clinical research
  - Research planning and evaluation
  - Epidemiology
  - Paper review and evaluation
  - Audit principles
  - Statistical analysis and evaluation
- 10. Miscellaneous**  
**Module Co-ordinators: Professor A Watson (Paediatric Nephrology)/ Dr T Johnson (computer awareness)**
- Paediatric Nephrology** teaching in Nottingham, under the supervision of Professor A Watson.

Additional activities include 'Meet the Expert' workshops (approximately 2/3 per month). Students will have the opportunity to meet and discuss a topic/case with a national or international expert.

### **Clinical Skills Training (CST)**

Throughout the academic year, students will have the opportunity to improve their clinical skills through a range of educational opportunities. These will include General Medicine Workshops run by Dr S Brennan, a senior Consultant Physician. They will also involve regular bedside teaching demonstration by course clinical tutors.

### **Mini-Clinical Evaluation Exercises (Mini-CEX):**

It will also include Mini-CEX. These are Mini Clinical Evaluation Exercises giving a 15 minute snapshot of doctor/patient interaction. It is designed to assess the clinical skills attitudes and behaviours of students essential to providing high quality care.

Students may be asked to undertake a number of observed encounters during the year. Each encounter should represent a different clinical problem.

Feedback will be provided after each encounter by the tutor rating the student. Tutors and students will identify agree strengths, areas for development and an action plan for each encounter.

### **Case-based Discussions (CbDs):**

Students will regularly present and discuss medical cases with the tutors. The aim of CbD is to enable the tutor to provide systematic assessment and structured feedback.

## SUMMARY OF MODULES

This table shows the plan of both courses. It summarises the core concepts, basis of knowledge, assessment procedures and the skills developed in each module.

<b>Module</b>	<b>Core concepts</b>	<b>Basis of knowledge</b>	<b>Skills to be developed</b>	<b>Assessment may include</b>
<b>General Nephrology</b>  <b>MDN6200</b> <b>30 credits</b>	To gain an understanding of the pathogenesis, diagnosis and management of common nephrological conditions	A sound and practical approach to general (internal medicine)  A sound and practical approach to renal diseases	Clinical skills Self- and directed-Learning Knowledge retrieval and evaluation Critical approach to knowledge and information Working in groups Oral and written communications Encouragement to comment, ask questions and discuss issues	Essays Bedside clinical skills Portfolio Group discussions Case presentations Visiting professors' feed back Written examination  Subject to module leader update and amendments
<b>Tropical Nephrology and Public Health</b>  <b>MDN6003</b> <b>10 credits</b>	Acquaintance with the common features of nephrology practice in tropical countries resulting from unusual causes of renal disease, typical climate and underprivileged socioeconomic development  Introduction to Public Health and Epidemiology	Published information on the epidemiology, causes and clinical picture of acute renal failure, tropical nephritis, parasitic nephropathies, end-stage renal disease and its management, flavoured with personal experience	Interpretation of typical clinical syndromes and histopathological patterns of tropical renal disease. Ability to understand, tolerate and deal with specific socioeconomic issues in the management of ESRD in underdeveloped countries	Written examination Oral assessment in the "Meet the Professor" session Portfolio  Subject to module leader update and amendments
<b>Renal Surgery &amp; Transplantation</b>  <b>MDN6290</b> <b>10 credits</b>	Operative details of Renal Transplantation Post-Operative complications Complications of immunosuppression	Understanding of the methodology involved in the operation of renal transplantation Understanding the basis of action of immunosuppressive drugs Understanding the complications and how to deal with them	How to decide on the suitability for organ donation and transplantation	Written examination Portfolio  Subject to module leader update and amendments

<b><u>Module</u></b>	<b><u>Core Concepts</u></b>	<b><u>Basis of knowledge</u></b>	<b><u>Skills to be developed</u></b>	<b><u>Assessment</u></b>
	Transplantation immunology Indications/contraindications to renal transplantation Immunosuppression	Understanding laboratory and clinical aspects of transplantation Factors influencing allograft survival Complication of transplantation Analysis of trial data	Interpretation of immunology laboratory data Clinical assessment of transplant patients and patients for transplantation Developing a structured approach to the assessment of clinical problems in transplantation, including tailor immunosuppression	
<b>Dialysis Replacement Therapy</b>  <b>MDN6220</b> <b>10 credits</b>	Understanding of dialysis modalities	Reading material Workshops Ward rounds	Clinical evaluation and management of dialysis patients	Written examination Portfolio  Subject to module leader update and amendments
<b>Renal Physiology &amp; Pharmacology</b>  <b>MDN6260</b> <b>15 credits</b>	Glomerular ultrafiltration Tubular transport Molecular physiology of Na, K, Ca and acid base linked to renal pathology	Burton Rose Medical Course	Discussion of molecular physiology	Written examination Portfolio  Subject to module leader update and amendments
<b>Renal Radiology</b>  <b>MDN6005</b> <b>10 credits</b>	Principles in the imaging of the urinary tract The radiology of renal osteodystrophy The radiology of cystic disease of the kidney contrast media induced nephrotoxicity	Good understanding of the principles of imaging renal disease Competence in the interpretation of common diagnostic imaging examinations	Interpretation of radiological investigations	Data Interpretation Portfolio  Subject to module leader update and amendments
<b>Renal Histopathology</b>  <b>MDN6004</b> <b>10 credits</b>	An understanding of the interpretation of renal histopathology Insight into imaging techniques, LM, EM	Renal anatomy Renal histology Renal histopathology Tutorials and demonstrations Weekly histopathology session	Interpret a renal biopsy Interpret a renal electronmicrograph Interpret immunofluorescence	Data interpretation Portfolio  Subject to module leader update and amendments

<b><u>Module</u></b>	<b><u>Core Concepts</u></b>	<b><u>Basis of knowledge</u></b>	<b><u>Skills to be developed</u></b>	<b><u>Assessment</u></b>
<b>Renal Dietetics</b> <b>MDN6230</b> <b>10 credits</b>	Food sources of Nutrients Manipulation of nutrients in disease Nutritional assessment	Interpretation and application of dietary prescription Interpreting biochemicals and anthropometric data	Communication skills Assessment of food intake Dietary modification Anthropometric measurement	Written examination Exercise in dietary calculation and modification Portfolio  Subject to module leader update and amendments
<b>Research &amp; Statistics</b> <b>MDN6000</b> <b>5 credits</b>	Understanding of basic statistical workshop Understanding the concept of evidence-based medicine Planning and conducting basic science research Ethics in biomedical research	Workshops/lectures covering basic statistical concepts Designing a clinical study Literature searching Evaluation & understanding of published data	Analytical and statistical skills	Written examination Project Portfolio  Subject to module leader update and amendments
<b>Miscellaneous (Computer Awareness)</b> <b>MDN6006</b> <b>10 credits</b>	Introduction to IT Access to the Internet Word and data Processing	Weekly tutorials Group PCs Essays and application of skills	Word processing Spreadsheets Excel Scanning Internet browsing	Ongoing based on application of skills Practical workshops Practical examination  Subject to module leader update and amendments
<b>Miscellaneous (Paediatric Nephrology)</b>	To gain an understanding of the range of renal problems affecting from antenatally detected urinary tract abnormalities through to adult life To discuss management of such problems in children	Teaching, in Nottingham, covering paediatric topics with lectures, seminars and discussion with all members of the multidisciplinary paediatric nephrology team	Appreciation of growth and development in children and impact of illness on families Interpretation of growth charts Educational concerns and psychosocial development	Written examination Quiz Portfolio  Subject to module leader update and amendments
<b>Dissertation</b> <b>MDN6080</b> <b>60 credits</b>	Deciding/Identifying the research topic Understanding and implementation of literature reviews and data analysis	Data analysis Statistical evaluation	Clinical and or laboratory investigation	Dissertation Oral presentation  Subject to module leader update and amendments

## **Formative Evaluation and Assessment**

Throughout the modules students will be evaluated by the teachers. This will form part of the students' formative evaluation throughout the academic year. Formative evaluation will also include the review of the students' portfolio and relevant feedback throughout the different modules. Formative assessment will aim to evaluate the students and assign their ongoing evaluation score that contributes to the final module score. Also, formative assessment is aimed to provide educational feedback to the students to improve their knowledge and skills.

## **Portfolio learning**

The students will be asked to enter their daily activities and learning experience in a personal portfolio. The portfolio will consist of learning and teaching material as well as the student's own reflections and comments on his/her learning experience. The portfolio will also include the student's self-learning activities. It is expected that the portfolio form a significant part of the student's self-learning process. Portfolios will be regularly reviewed and assessed by the course leader and tutors and will constitute a significant percentage of students' ongoing evaluation mark.

The formative and portfolio evaluation score will be that used by the University of Sheffield with a mark given on the 100 point scale. These values can be interpreted as follows:

Very poor performance or level of knowledge	20%
Poor	40%
Pass	50%
Good	60%
Very good	70%
Excellent	80%

## **Summative Assessment**

Summative assessment will take place at the end of each module and along with the formative assessment will contribute to the module final score.

# EXAMINATION AND ASSESSMENT INFORMATION

## Diploma Course

During the course, your performance will be assessed through course work. The assessment procedures include:

- ❑ An examination at the end of each module
- ❑ Continuous assessment (e.g. workshop presentations, essays, clinical bedside skills)

Marks are allocated as follows but may be subject to amendment

Module	Codes and Credits	Marks
General Nephrology	MDN6200 – 30	Clinical examination 25% <i>Viva voce</i> 20% Written examinations 20% Ongoing evaluation 15% Portfolio 20%
Renal Physiology, Pharmacology and Cell Biology	MDN6260 - 15	Written examination 50% Portfolio 50%
Tropical Nephrology	MDN6003 – 10	Written examination 34% Presentation 33% Portfolio 33%
Renal Surgery and Transplantation	MDN6290 - 10	Written examination 50% Portfolio 50%
Dialysis Replacement Therapy	MDN6220 – 10	Written examination 50% Portfolio 50%
Renal Radiology	MDN6005 – 10	Written examination 50% Portfolio 50%
Renal Histopathology	MDN6004 – 10	Written examination 50% Portfolio 50%
Renal Dietetics	MDN6230 – 10	Written examination and assignment 50% Portfolio 50%
Miscellaneous	MDN6006 – 10	Paediatric written examination 50% IT examination 25% Portfolio 25%
Research and Statistics	MDN6000 – 5	Written examination 50% Portfolio 50%

Students who have been awarded 120 credits will be eligible for the award of the Postgraduate Diploma. The Examiners may, at their discretion, recommend that a candidate who is awarded not fewer than 100 credits be eligible for the Postgraduate Diploma, providing that the student has obtained an average grade of not less than 50 and a grade or grades of not less than 40 in modules where credits are not awarded.

To obtain a pass in any single module students must obtain an overall score of 50. One re-sit of the failed component of a module is allowed, with a fee payable to the University of Sheffield.

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2008

Students who fail the General Nephrology module will not be eligible to pursue the Masters Degree and will have the opportunity for remedial teaching and re-sit a clinical and *viva voce* examination in September in order to obtain the Diploma degree. Those who fail the re-sit will be awarded a Certificate of Attendance of the course.

### **Masters Course**

Students who are awarded 180 credits will be eligible for the award of a Master's Degree. The Examiners may, at their discretion, recommend that a candidate who is awarded not fewer than 150 credits be deemed to have passed the Examination for a Master's degree, providing that the student has obtained an average grade of not less than 50 and a grade or grades of not less than 40 in the elements of the programme of study in respect of which credits are not awarded. The dissertation is 60 credits.

### **Re-Sit Examinations**

On the recommendation of the examiners, a student can enter for a subsequent examination or submit a revised dissertation on one occasion only. A candidate satisfying the examiners in a subsequent examination will be awarded a bare pass grade (50%) in respect of that module.

Students who are permitted to re-sit any module/s or resubmit their dissertation, should register and pay the appropriate fee to the University of Sheffield.

Students who fail the Masters evaluation will be allowed a re-submission within 3 months of viva/presentation. Failure of the re-sit will disqualify the student from the Masters Degree and they will be awarded the Diploma only.

### **Board of Examiners**

The Board of Examiners will include members of the Sheffield Kidney Institute faculty as well as outside examiners.

External Examiners:            Professor S Powis  
   University College London

   Professor J D Williams  
   Cardiff University

The Sheffield Kidney Institute Examiners Board (subject to availability):

   Professor A M El Nahas  
   Professor C Brown  
   Dr A Khwaja  
   Dr A C M Ong  
   Dr S Brennan  
   Dr J L Haylor  
   Dr T S Johnson  
   Dr B Kawar

## **Examinations**

Students who miss an examination due to illness or extenuating circumstances must provide a medical certificate before the examination and not retrospectively.

The examiners marks are final and students will not be allowed to view their scripts. However, tutors will be pleased to assist students to improve examination techniques.

## **Double Marking**

Continuous assessment work is double marked when appropriate. In view of the fact that an External Examiner is unable to make a judgement on an oral presentation, internal examiners assess all workshop presentations independently.

## **Feedback to Students**

Students will be given feedback on continuous assessment work and examinations. In addition, regular feedback will be given throughout the course. This may be in the form of an evaluation form, written or verbal comments or comments directly indicated on the script. If students require additional feedback, they are encouraged to make an appointment with the appropriate module co-ordinator.

## **Appeals**

Students must apply in writing within 14 days of the publication of the exam results using the downloadable Academic Appeals Form on the University of Sheffield website. If the Dean finds that there is a prima facie case they will either determine that the appeal be upheld or refer the matter to an Academic Appeals Committee where it will be dealt with in accordance with the established Procedures (involving a reopening of the issues originally dealt with by the Examiners)

(<http://www.shef.ac.uk/ssid/procedures/grid.html#academic>).

## **Award Recommendations**

All results and recommendations will be approved under delegated powers by Faculty Officers. Where students have been recommended for the award of a qualification these will be awarded and details will be forwarded to the Ceremonies Office as soon as it is established that the relevant students are free from any debts to the University. Results statements will be posted to students at their permanent address (or any previously notified temporary correspondence address). It is the responsibility of students to ensure that the Student Services Department has been correctly notified of a safe postal address.

# UNIVERSITY EXAMINATION GUIDELINES

## NOTES FOR CANDIDATES ON INVIGILATED EXAMINATIONS

### **Before the Examination**

#### 1. *The use of calculators in examinations*

A candidate wishing to use an electronic calculator in an examination should note Examination Regulation 6 and request approval for the particular calculator no later than week 10 of the relevant Semester.

Exam. Reg. 6:

A candidate may use an electronic calculator in examinations (unless such use has been prohibited in any particular examination by the Examiners), subject to the following conditions:

- (i) the calculator shall be of a type officially approved in advance by the University;
- (ii) each calculator to be used in an examination shall be approved in advance by the Dean of the relevant Faculty or by the Dean's representative, and such approval shall be symbolised by the attachment of a distinctive marker to the calculator;
- (iii) the calculator shall be presented for inspection by an invigilator on request at the beginning of each examination in which the calculators are to be used;
- (iv) the calculator shall be self-contained, battery-operated and noiseless;
- (v) spare batteries may be taken into the examination hall, but instruction manuals, battery chargers, battery packs and spare parts are not permitted, nor any attachments which extend the capabilities of the calculator (such as printers or memory packs);
- (vi) any time signals on the calculator shall be switched off before entry into the examination hall;
- (vii) a candidate who brings into the examination hall any calculator not approved in accordance with these regulations will be considered to have used or attempted to use unfair means.

Approval for a calculator to be used in University examinations is granted on an individual basis and each calculator to be used must be presented by the student for the attachment of a distinctive marker.

If you expect to use a calculator in an examination you must comply with the following instructions:

- (a) Consult the lists of approved/prohibited models displayed in Departmental Offices, the Student Services Information Desk (SSID) in the Union of Students Building and in the Registration and Examinations Office, Level 6 University Houses. (Students are advised not to buy a new calculator without consulting the latest edition of the lists.)
- (b) If your calculator is shown on the list of approved models, take it to SSID where a marker will be attached.
- (c) If your calculator is shown on the list of prohibited models, do not attempt to use it in an examination. If you do you will be judged to have "used or attempted to use unfair means" and disciplinary action may be taken against you.
- (d) If your calculator is on neither list, take it to SSID as soon as possible and preferably no later than mid-December in any year, and complete the application

This document is not a binding contract as the Course Management Team reserves the right to modify the course content during the academic year.  
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for it to be approved. You will be able to keep your calculator. A decision will be available before the Christmas vacation. Further applications can be considered after the Easter vacation but no later than the beginning of May in any year. Calculators which do not have external means of programming and have numeric function only will almost certainly be permitted. Among the calculators which are prohibited are:

- (i) Those having an alphabetic display of stored data (including text) or equations or alphabetic formulae; (models which produce alphabetic output only in the form of messages in the normal course of operation are permissible).
- (ii) Those capable of external programmability, whether by detachable modules or the insertion of cards, tape, bar codes or cassettes, or by any other means (other programmable calculators are normally acceptable).

Approval given to calculators in previous years remains valid. Any calculators which are already marked as approved do not need to be re-submitted for approval.

2. *All candidates* should read carefully the General Regulations as to Examinations.
3. *Fee*: No fee is payable when a candidate takes an examination at the first sitting. A re-examination fee must be paid when a candidate has failed at the first sitting or been absent on that occasion without good cause.
4. *Anonymous marking and U-cards*: Candidates will write their Registration Numbers on all answer books. Candidates must bring their UCard (which bears the Registration Number) to every examination. Any candidate who does not possess such a card must consult the Registry Office, Level 6 University House at least 14 days before the examination.
5. *Religious beliefs*: Any student who is not able, for any religious reasons, to take examinations on any day on which examinations may be set during the year (including Saturdays but not Sundays), is asked to notify the Registry Office at the beginning of each session for which he/she registers. Once examination timetables have been set it is difficult for alterations to be made.
6. *Alternative examination arrangements*: The Examination Team will make alternative examination arrangements for students with a long term or permanent disabling condition, dyslexic students and those with additional support requirements. Students so affected should contact the Examinations Team as soon as possible at the beginning of the academic year. A request for alternative arrangements should be supported by staff of the University Health Service, the University counselling Service, the Sheffield Regional Access Centre or an educational psychologist.
7. *Dictionaries*: A candidate whose first language is not English should note the provision of Examination Regulation 5.

Exam. Reg. 5:

A candidate whose first language is not English may use a dictionary during examinations, provided that

- (i) the candidate has obtained the written permission of the Dean of the relevant Faculty; and
- (ii) the candidate presents the dictionary, together with the written authority for inspection of the Chief Invigilator at the beginning of each examination in which the dictionary is to be used.
- (iii) Electronic dictionaries may not be used in invigilated examinations.

8. *Illness before an examination:* A candidate who is taken ill prior to an examination should consult the University Health Service at the earliest opportunity in order that alternative examination arrangements can be considered and a medical report can be made to the Examiners.

### **On the day of an invigilated examination**

9. *Personal belongings:* Candidates should bring to the hall only essential personal belongings (e.g. pens and rulers in a transparent plastic bag) and preferably no items of value. Outdoor coats, large bags, brief cases etc, must be left outside the hall, in the cloakrooms, if available, or in a designated area of the hall itself. (Small handbags may be left on the floor by the candidate's desk.) The University of Sheffield accepts no responsibility for any loss or damage to personal belongings. You will be unable to claim from the University if they are lost or damaged.

10. *Mobile phones and pagers:* (and other devices which can store text) must not be taken to examinations. A mobile phone is potentially a method of storing unauthorised material.

Exam. Reg. 3:

All unauthorised material (such as revision notes, books and data tables) and electronic devices (such as electronic dictionaries, mobile phones, radios and personal audio equipment) shall be left outside the examination hall or surrendered to an invigilator before entering the hall. Any material required for any particular examination will be provided in the hall. (If candidates are permitted to introduce books, notes or other material into an examination hall, they will be informed by the Department concerned, and the nature and the extent of the authorised material will be stated on the question paper.)

11. *Unauthorised material (such as revision notes):* see exam. Reg. 3 (above).

12. **Smoking and the consumption of alcoholic drinks is not allowed in the examination hall.**

13. *Admission to the hall:* Candidates will be admitted to the hall a few minutes before the start of each examination.

14. *Absence:* If, for no good reason, a student fails to attend an examination, special papers will not be set and the student shall be deemed to have failed.

15. *Late arrival and early departure:* Candidates who are more than 30 minutes late for an examination will not be admitted. A candidate will not be allowed to withdraw from an examination until 40 minutes have elapsed. Any candidate leaving an examination must do so quietly and take great care not to disturb other candidates. No candidate will be allowed to leave during the last 10 minutes of an examination.

16. *Seating arrangements in examination halls:* Candidates should read carefully the seating arrangements which will be set out on the notice board outside the examination hall. Candidates are not allowed to reserve seats for themselves beforehand. Invigilators may require candidates to move to alternative seats.

17. *On the examination desk* the candidate will find the question paper, answer books, an attendance slip and any ancillary materials provided for the particular examination.

18. *During the few minutes before the examination begins*, candidates must:

- (a) Listen carefully to any announcements the Chief Invigilator may have to make.
- (b) Make sure that they have the correct question paper on their desks: if in doubt they should put up a hand and ask an Invigilator.
- (c) Complete the attendance slip on the desk, (this will be collected by an Invigilator soon after the start of the examination).
- (d) Complete as far as possible the cover sheet of one answer book on the desk.
- (e) Read the notes on the cover of the answer book.

19. *If candidates require further stationery* during the examination, they should put up a hand and an Invigilator will bring it to them.

20. *Temporary withdrawal:* A candidate who wishes to make a temporary withdrawal from an examination for personal reasons must put up a hand and ask to be accompanied by an Invigilator or other authorised person.

21. *Illness during an examination:*

- (a) A candidate who wishes to withdraw from an examination because of an illness should inform an Invigilator. The candidate may be escorted to the University Health Service and may be able to complete the examination later. If the candidate chooses not to be escorted (s)he should attend the University Service without delay or ask one of the Medical Officers to call on him/her; otherwise the University Health Service may not be able to advise the academic authorities on the student's condition at the time of the examination.
- (b) If a candidate is temporarily affected by illness but is able to continue the examination after a short absence, the period of time lost through illness will be noted and the information taken into consideration where appropriate.

22. At the end of an examination all answer books, continuation sheets (even if only used for rough notes) and graph paper should be fastened together with string. If more than one book is used, all relevant papers should be fastened in their appropriate book. All cover sheets of used answer books must be completed and candidates must enter in the space provided the numbers of the questions answered within, in the order in which they have been attempted. Candidates must leave the hall

quickly and quietly when permitted to do so, leaving all written work on the desk. Question papers may be removed from the hall only if no instruction to the contrary is given.

### **After the Examination**

23. Publication of results: Examination results will be made available through academic departments or posted to the student's permanent or correspondence address, if not available during a Semester.

### **NOTES FOR CANDIDATES ON NON-INVIGILATED EXAMINATIONS**

1. When preparing essays, projects or other work, you will read widely and become familiar with the work of others. You should ensure that the materials you prepare for submission would be accepted as your own original work. A lecturer or tutor who is assessing your work is interested in your understanding of an idea and you should use your own words to demonstrate your understanding. The selective quoting of material from books and articles is permissible, but the material must always be attributed to its sources by means of quotation marks. In assessed essays, a footnote or brackets naming the author and the title of the text plus the dates of publication would be required, as would a bibliography that provides full references of all the material consulted or used.

The basic principle underlying the preparation of any piece of academic work is that the work submitted must be your own original work. Plagiarism and collusion are not allowed because they go against this principle. Please note that the rules about plagiarism and collusion apply to all assessed and non-assessed work, including essays, experimental results and computer code. Cutting and pasting from websites would also be considered unacceptable. [www.jiscpas.ac.uk/roadmapmethod.php?s=1](http://www.jiscpas.ac.uk/roadmapmethod.php?s=1) is the website for the plagiarism detection service.

Plagiarism is passing off others' work as your own, whether intentionally or unintentionally, to your benefit. The work can include ideas, compositions, designs, images, computer code, and, of course, words. This list is not exhaustive. The benefit accrued could be, for example, an examination grade or the award of a research degree.

- a. If a student submits a piece of work produced by others, or copied from another source, this is plagiarism.
- b. If a student produces a piece of work which includes sections taken from other authors, this is plagiarism, unless the source has been attributed as outlined above. The length of the copied section is not relevant, since any act of plagiarism offends against the general principle set out above. When copying sections from other authors it is not sufficient simply to list the source in the bibliography.
- c. If a student paraphrases from another source without the appropriate attribution, this is plagiarism. Paraphrasing should use a student's own words to demonstrate an understanding and accurately convey the meaning of the original work, and should not merely reorder or change a few words or phrases of the existing text.
- d. If a student copies from or resubmits his or her own previous work for another assignment, this is self-plagiarism, and is not acceptable.

2. Collusion is another example of the use of unfair means, where two or more people work together to produce a piece of work all or part of which is then submitted by one or each of them as their own individual work.

- a. If a student gets someone else to compose the whole or part of any piece of work, this is collusion.
- b. If a student copies the whole or part of someone else's piece of work with the knowledge and consent of the latter, then this is collusion.
- c. If a student allows another student to copy material, knowing that it will subsequently be presented as that student's own work, then this is collusion.
- d. If two or more students work on an assignment together, produce an agreed piece of work and then copy it up for individual submission, then this is collusion. When producing a piece of work arising out of group work, students should seek the advice of the tutor setting the assigned work regarding the acceptable limits of collaboration.

3. Both plagiarism and collusion are strictly forbidden. Students are warned that the piece of work affected may be given a grade of zero, which in some cases will entail failure in the examination for the relevant unit or research degree. The student may also be referred to the Discipline Committee.

4. You should follow any guidance on the preparation of material given by the academic department setting the assignment. If in doubt, consult the member of the academic staff responsible for the unit of study. There is unlikely to be any objection to you discussing the subject of an essay or project with fellow students in general terms, or to quoting from various sources in the work submitted. However, if you have any problems with an assignment you should always consult your tutor, who will give general advice and help.

### **Statement of Procedures for the Anonymous Marking of Examinations**

#### **Principle**

It is a requirement of Senate that there should be anonymity at the point of marking for all invigilated examinations and wherever practical and appropriate for non-invigilated examinations. This requirement is intended to prevent unconscious bias (either in favour of or against students) which might occur in the marking process.

#### **Approved Exceptions**

It is recognised that there are circumstances where the implementation of anonymous marking for particular forms of non-invigilated examination is either;

- not practical because the nature of the examination involves contact between the student and the examiner as part of the assessment,

or

- not appropriate because the process of conducting anonymous marking would diminish the formative value of the feedback derived from the assessment process.

With reference to these principles, the following specific circumstances have been identified as acceptable grounds for exception to the requirements for anonymous marking

- i. When the assessment takes the form of a practical demonstration, performed in the presence of the examiners, for example, an oral language examination, presentation, artistic performance clinical practice or laboratory work.
- ii. When the assessment takes place over a period of time with support from a designated supervisor or tutor and familiarity with the content of the assessment, usually a topic identified by the individual student or group, makes anonymity difficult. This would apply mostly to dissertations, projects and portfolios.
- iii. When the assessment takes place during the teaching of a module for formative purposes. This is for the reason that administration of anonymous marking in these circumstances is likely to prevent feedback from being provided in sufficient time to inform learning during the module.

### **School of Medicine**

Information linking students' registration numbers to students' names is retained by the School's administrators only until the whole marking process is complete.

The examination scripts to be marked by each examiner are sorted by numerical order of the student registration numbers by the School's administrators. The scripts are then given to the examiner along with a mark sheet for completion listing the students' registration numbers in the same numerical order.

Mark sheets are returned the School's administrators who will put them into the master spreadsheet which will identify students by both their names and registration numbers once all the marks are available for discussion by the examining board.

### **Guidelines on penalties for late submission of non-invigilated work**

Late submission will result in a deduction of 5% of the total mark awarded for each working day after the submission date. Working days includes working days within standard vacation times. For example, if a submission date falls on the last day before the start of the Easter vacation, penalties would start to be applied from the following working day and not from the first day following the vacation.

Day late	Mark reduced by 5%	Mark awarded when reduced by 5%*	
	Multiply by	Original 60	Original 50
1	0.95	57	47.5
2	0.90	54	45
3	0.85	51	42.5
4	0.80	48	40
5	0.75	45	37.5

\* standard mathematical rounding rules would be applied and marks rounded up

The 5 day working day deadline for late submission is absolute and any work submitted after the 5 working day period without a special dispensation would receive zero.

This penalty system applies to all assignments submitted for assessment on all postgraduate programmes, including the dissertation component.

The only exceptions allowed under the late submission penalties regime, subject to Faculty approval, is a policy of zero tolerance (any late submission receiving a mark of zero) which may be applied to coursework and assessed work for which marks and feedback are habitually provided either immediately or to a very short timescale and the schedule of work may be disrupted by the possibility of late submission.

### **Special Dispensations**

- special dispensations would cover medical problems, personal or medical problems arising from disability or specific learning difficulties, extreme personal and family problems or a force majeure.
- an application for late submission should be made in advance of the normal submission date.
- an application for a special dispensation for late submission should be made in writing.
- an application for a special dispensation for late submission should be accompanied by medical evidence or other documentation where appropriate.
- an application for a special dispensation for late submission should be made to the Course Organiser. It should not be made to a personal tutor or dissertation supervisor.
- the Course Organiser's discretion for the granting of special dispensations is limited to 10 working days, after which the sanction of the Department's Director of Teaching or Head of Department must be called upon.
- due to extenuating circumstances which the student was unable to place, or for valid reasons did not place, before the examinations or assignment submission date, the application should be lodged in advance of the relevant Exam Board.

Full guidance is available under guidance and policies at [www.shef.ac.uk/letc/design#programme%20assessment](http://www.shef.ac.uk/letc/design#programme%20assessment)

### **Non-participation or less than full participation in group work**

Students involved in group work for assessment should individually provide evidence of their participation via a reflective self-assessment of the work of the group and their contribution to it. This self-assessment should be completed individually and independently but submitted together with the group work. The form which it might take could be varied according to the group work (eg diary, brief discursive report, etc). The contribution of this self-assessment to the mark of an individual for group work will be governed by use of one of the following two alternatives:

- In cases where group work directly facilitates a specific learning outcome of a unit, the self-assessment could be allocated a proportion of the marks and each individual group member would be individually assessed for this portion.

- In cases where the experience of group work does not directly facilitate a specific learning outcome of a unit, the self-assessment would only contribute to the total mark if it indicated that an individual's score should be adjusted. Any adjustment would be at the discretion of the examiner.

Examination regulations can be found at <http://www.shef.ac.uk/ssid/exams/>.

### **Evaluating your programme of study**

Whilst you are a student, you will have opportunities to evaluate the quality of your programme of study and its individual units. Student evaluation is an essential part of assuring the quality of departments' provision and provides us with essential feedback on your experiences of your programmes of study.

The University requires all departments to operate a system of anonymous student evaluation of programmes on an annual basis. We will inform you of the purpose and process of student evaluation, including how and when it will take place and what will be done with the results. We will ask for comments on your experience of each level as a whole in each session, in addition to commenting on individual units. At the end of your programme, you will also be asked to comment on the programme as a whole.

As an introduction, these are some of the issues that we will be asking you about:

- The overall coherence and content of your programme;
- Tutorial support;
- Assessment deadlines and feedback;
- Appropriateness of the teaching methods;
- Availability and suitability of learning resources.

The questionnaires will normally ask you for tick-only responses to most questions, and will use a rating scale, but we will also give you the opportunity to provide more detailed responses or free-form comments.

We will endeavour to provide you with feedback on the issues that students have raised through the evaluation process and how we are addressing these. It is important that we receive a good response rate to student evaluations, as your feedback is an essential part of helping us to maintain the quality of teaching and learning provision, and may benefit you and future students. Quality reviews of departments' teaching and learning consistently demonstrate ways in which student feedback often does lead to changes being made to units and programmes.

### **Participating in other evaluation processes**

In addition to the student evaluation operated by the departments, you may also be asked to participate in other surveys throughout your study. Many final year students take part in the National Student Survey (NSS), which seeks views from students on their overall satisfaction with their programme of study. The results of this survey, which was run for the first time in 2005, are published. The University also runs an Annual Student Satisfaction Survey towards the end of semester 1, which all categories and levels of students are offered the opportunity to complete. This evaluates student satisfaction with the broad range of University services, for example, library and IT

facilities, and also includes questions on academic support. The University also uses these survey results, in addition to those at departmental level, to gauge how well departments are performing.

### **Students with disabilities**

Disability covers a wide range of impairments including physical and mobility difficulties, hearing impairments, visual impairments, specific learning difficulties including dyslexia, medical conditions and mental health problems. Some of these impairments may have few, if any, implications for a student's life or study. Others may have little impact on day to day life but may have a major impact on a student's study, or vice versa. Some students may already be disabled when they apply to an institution; other may become disabled or become aware of an existing disability only after their programme has started. Others may have fluctuating conditions. Some students may be disabled temporarily by accident or illness.

The University is committed to a comprehensive policy of equal opportunities for all its students, and to responding to additional support requirements. Making adjustments for students who have a disability is an integral part of the responsibility of academic staff, and making a few straightforward changes to the delivery of teaching could alleviate many difficulties.

### **Personal Tutor System**

Every student will be allocated a named personal tutor at the beginning of their programme of study. The student is entitled to individual face to face meetings with their personal tutor at least once per semester and may request additional meetings as the need arises. Your personal tutor is likely to be the same person throughout your degree, although this may change if your personal tutor goes on Research Leave. If this occurs, your Department will allocate you a replacement personal tutor. You can email or phone your personal tutor to ask for an appointment or visit your personal tutor during their publicised office hours.

The role of the personal tutor is to provide academic guidance and confidential personal support, acting as a first point of contact for students and a gateway in to the wide range of student support services available. Students should take equal responsibility for making the student/personal tutor relationship work by maintaining regular contact with their tutor and asking for support as appropriate. It is important that both personal tutors and students keep to any pre-arranged appointments.

Where a student asks that information given to the personal tutor be treated as confidential, this will be respected in all but exceptional circumstances.

### **Personal Development Planning (PDP)**

The University of Sheffield is committed to providing a structured and supported process for all its students to reflect upon their learning and achievement and to plan for their personal, educational and career development. With this aim in mind, Personal Development Planning (PDP) has been developed by the University to help you think about the following questions:

- Academic learning – how does my course develop my employability?
- Career Development – what are the skills I need for my career?
- Personal – how do I learn best?

The PDP process has been designed to help you to:

- Identify weaknesses in your study habits or approaches to assessment that it would be beneficial to improve upon.
- Identify opportunities for learning or developing skills outside the course you study
- Develop transferable skills that employers will want you to have
- Build up a record of evidence of your transferable skills and knowledge that will be useful to have when making applications for jobs.
- Provide information that will assist staff to write a reference for you in support of a job application.

### **Guidance on penalties for student non-attendance**

A full-time student is required under the General Regulations (General Regulations 39 and 40) to attend throughout the whole of each semester. Failure to attend regularly could lead to being denied the credits assigned to particular modules, or being referred to the Faculty Student Review Committee, which has the power to exclude students from further study in the Faculty. Absence or illness should be reported to the Course Administrator in the first instance by telephone or e-mail.

### **Student support**

University Student Services, which includes:

- The Student Services Information Desk (SSiD) in the Union of Students and the SSiD web pages for routine enquiries.
- Student Support and Guidance, responsible for financial help, support for students with disabilities, mature students, international students, the student mentoring scheme (some departments), harassment network and procedures and equal opportunities policy
- University Counselling Service
- University Health Service
- The Union of Students' Advice Centre and Nightline

Tutors and tutorial system; by telephone, e-mail or in person. It is important to regularly check emails for information about seminars, visiting lecturers, timetable changes, etc.

For general information on services available at the University of Sheffield go to <http://www.shef.ac.uk/ssid/>.

## TUTORS AND TUTORIALS

Tutorials form a very important part of the course. The aim of tutorials is to provide the opportunity for in-depth discussions on areas that are of particular interest to the group. The objectives of tutorials are:

- 1) To enable students to learn about the other members of their group early on in the course and to promote active participation (talking, preparing for and making presentations) by all group members.
- 2) For students to raise any concern about the course for discussion with the tutor and other members of the group. Problems of a personal nature can be discussed privately with the tutor or another staff member, as the student wishes.
- 3) To help participants develop skills needed for the course and professional life which may not be taught within the modules, for example:
  - Giving talks and presentations and feeling confident about doing so!
  - Ability to analyse critically scientific papers and summarise key points
  - Evaluation of student presentations (i.e to offer praise/constructive criticism, as appropriate)
  - Ability to work together on a group assignment
- 4) To develop other skills which may be required for successful completion of assessment, examinations and the project. For example, there may be exercises on data handling and information retrieval and revision sessions.

The tutorial group will be conducted on a more informal basis than other parts of the course. Tutorial groups usually meet weekly.

Attendance and participation in tutorials will be taken into account in the overall assessment of the performance of both Masters and Diploma students.

### **Student Discussions**

Student discussion sessions will be planned at regular intervals. These will be run by the students for the students. Each session will have a nominated leader who will chair and organise the discussion. The Leader will be requested to report to the course organiser or the clinical tutor about the activities of the group. Some of these discussion meetings may be facilitated by a member of the academic staff.

# TEACHING/LEARNING METHODS

## **Lectures**

Lectures form an important part of the course. For each module, lecture sessions have been organised to convey information/detail that permit a better understanding and appreciation of the subject. The module outlines – your own personal guide – contain lecture outlines/objectives, notes (in some cases) and references. Read the material and come prepared for the lectures.

You will learn from the lectures by listening, observing, summarising and note taking. In a few sessions, lectures may be supplemented with handouts. For others you will have to write your own notes. Here are a few handy tips on how to take good notes from lectures.

Formal lectures will also be complemented by relevant case based discussions. It is expected that formal and didactic lectures will constitute an introduction to the topic encouraging self-reading and learning followed by case-based discussion of the topic.

## **HOW TO WRITE NOTES**

### **Select and summarise**

Notes are a summary. There is no point in taking down a written statement word for word; in such a case it would be much easier to refer directly to the original document. Nor can the normal student hope to record more than a fraction of what is stated at a lecture. The objective is to try to reproduce the main thread of what is stated at a lecture. The objective is to try to reproduce the main thread of the argument, some of the most important facts included in it and enough details about the sources of the notes. It is futile to attempt to take down even a single sentence word for word; in doing so the next sentence is likely to be missed altogether. In note-taking the student must select both the facts that are necessary to record and the words to describe them. Whenever a speaker has something which should be recorded in detail, it will usually be repeated at dictation speed; if not, ask for it to be repeated slowly. The use of abbreviations is of help provided that they can be recognised later; small words like 'and' 'is' and 'are' may often be safely omitted.

### **Identifying facts**

An accurate record of names, dates and places should be made so that the notes can be properly identified later. Most students in their careers have given time to making notes which they cannot afterwards use because they forgot to include these simple details. The title, author and page references of any book from which notes are taken must always be included.

### **Finding leading ideas**

Some speakers and writers work to a carefully thought-out plan. Their ideas will have been arranged in a definite order. The note-taker has to try to pick out the main points in the development of the argument and build notes around the headings which summarise them. With practice it is soon possible to recognise a leading idea and to give it prominence in the notes.

Each separate leading idea can be identified in a written text because it is normally contained in a separate paragraph. Very often the point of the paragraph will be found in the first sentence. Having made his point the writer will proceed to illustrate it and to consider its implications. However, the point of a paragraph is not always found at the beginning and it may be in the middle or even at the end.

Some speakers work in a different way and think aloud or free-associate perhaps around a number of ideas. This may stimulate the listener's own thoughts and the speaker's thread may be noted selectively.

### **Portfolio entry**

Every lecture should be followed by an entry of the topic/lecture in the student's relevant portfolio section. A summary of the lecture should be formulated and also reflection on what has been learnt included. It is expected that after each lecture, the student enters under the reflection section of his/her portfolio 5 points/items learnt from that lecture.

# WRITTEN PRESENTATIONS

## Guidelines on Essay Writing

It is important before taking up pen to think out the general pattern of ideas that the essay is to follow. To help ensure that the pattern develops clearly it is advisable to fit it upon a framework. The following framework is suggested as a simple and effective example:

1) *Introduction*

- a. Comment upon the subject of the essay.
- b. Which aspects will be dealt with and the proposal structure of the essay.
- c. Why these aspects have been chosen.

2) *Main Part*

- a. Develop the argument about the subject in some three or four leading ideas.
- b. Support each leading idea with examples.

3) *Conclusion*

The conclusion should emerge logically from the development of ideas in the main part. If the essay subject was in the form of a question, the question should be answered.

In most essays you will be required to include a paragraph with some comments regarding the relevance of the topic under discussion to your own practice. This may consist of sharing your own experience, based on your practice in your own country, regarding the subject under discussion. This point is of particular importance as the course aims to provide the students with information and discussion topics/points of relevance to their own experience.

Plagiarism and copy/paste from publications is unacceptable and will be severely reprimanded. Students are asked to familiarise themselves with the University of Sheffield strict rules, regulations and penalties regarding plagiarism (see below).

## HINTS ON PRESENTATION

### Paragraphs

The introductory and concluding sections and each leading idea in the main body of the essay, should have a separate paragraph. That is, they should start on a new line with the first word inset a few inches. Paragraphing helps the reader to distinguish each main point in the essay. For some essays, headings for the various sections can be included.

### Style

The best advice about style is to write simple and naturally. For this, everyday language is best, provided that it does not include slang. Slang has the disadvantage of having only local and temporary currency. Sentences should be kept short.

## **Editing**

The first draft of essays is invariably too long; this requires editing and is usually painful. It is however, both necessary and a good discipline. It may be useful to enlist the help of a (patient and interested) third party who, because they are less invested in what has been produced, may be more able to make dispassionate suggestions. At this stage references (as well as spelling and grammar) may also be checked. Marks will be deducted for errors in spelling and grammar and for poor presentation. Particular attention should be paid to the spelling of medical and nephrological terms. Misspelling reflects a careless approach.

## **Plagiarism** (see policy on page 36)

The essays should not consist of copying material from textbooks, journals or electronic publications. The words in the essay have to be your own. It is appropriate to use information from other people's work **using your own words**. However, whenever you do this you must **state the sources** from which the information comes. If you do not state the source, your work may be disqualified on the ground of plagiarise or cheating. You have to formulate your own arguments based on what you have read. You have to come up with your own understanding and synthesis of the subject under discussion or review. You have to formulate and express your own views on the subject.

If you **plagiarise**, copy or cheat in some way your work may be disqualified and you can fail the whole course, even if the plagiarism is not discovered until much later.

It is also possible to **self-plagiarise**, where the same or a similar piece of work is used to obtain more than one grade.

In the following section (Writing References) you will find information about the preferred method of quoting or citing information.

## **Assessment Criteria**

The following will be taken into account when deciding upon the final mark.

- 1) Quality of the content, including evidence of original thought and the extent to which the 'question' has been answered.
- 2) A well structured essay (or report) including an introduction and a conclusion.
- 3) A literature search of the most recent studies in the field. Although students will not be able to obtain all the references in the time available for assessments carried out as part of the modules, it should be evident that they have used a database and referred to a reasonable selection of papers. *For the dissertation*, students are expected to have identified all of the relevant literature.
- 4) Correct use of references. This includes the appropriate use of references in the text and the correct listing of all references, in full, at the end of the essay.
- 5) Correct spelling and an acceptable standard of grammar.

## WRITING REFERENCES

When you are writing up a piece of work you should refer to (cite) the publications you have used at the relevant points in the text. There are several different formats in which references can be presented. This section is about the *Harvard system* which is preferred by most of the module co-ordinators. The other main system used is the *Vancouver system*, where references are numbered as they appear in the text and are listed in this numerical order (not alphabetically) at the end.

In the Harvard system the name of the author or authors and the year of publication are given at the relevant point in the text and the reference list is then presented in alphabetical order, by author's name at the end of the text. Thus:

'Stryer (1981) has shown .....' where author's name is part of the sentence give the year in brackets.

or '..... as has been demonstrated (Southwood and Moran, 1982)' where the name is not part of the sentence, give the names and year in brackets.

Although there are some minor variations in which references are listed, particularly in terms of the punctuation used, it is very important to list all the references using the same system. When writing your project the following rules should be followed if you are to use the Harvard system:

1) Where the paper to be cited has more than two authors, give the name of the first author and et al, eg (Peto et al 1991). The name of all authors should then be given in the list of references at the end.

2) Where more than one paper has appeared in one year for which the first name (of one or more authors) is the same, distinguish between them by using a letter.

e.g. 'Goulding and Smith (1992a) found that.....' and 'It has been shown that Goulding and Smith, 1992b).....' and 'A weighed intake study (Goulding and Jones, 1992c)....'

3) Names of journals can be given in full or abbreviated (one or the other) according to the 'World list of scientific periodicals' (Butterworth's) but with initial capitals for each word. Do not guess the abbreviation.

4) If you get information from an unpublished report or by personal contact you must get permission to quote it. It should be listed as follows:

Higley. G. (1983). Personal communication.

5) Conference proceedings or symposia may be listed under editor or sponsoring body. If you are not sure what to include, give as much information as possible.

**PLEASE NOTE:** There should be sufficient information given in the references to enable the reader to obtain any one of the papers or books listed.

Finally, you are advised to look at the directions given to the contributors for an eminent journal such as *Kidney International* (number one of the most recent volume) for information and a selection of examples of references. Look at the papers in the journal if you are still uncertain about how to write up a particular reference. It should be emphasised again that once you have decided on a format, including punctuation, be consistent!

### **Bibliography**

This is a list of books or reports (not cited in the essay) which you have read for general information. It will not be necessary for most assignments.

### ***Special Note:***

Any material copied from books or lectures must be properly referenced. Plagiarism – this is copying other people’s work without reference on the source – is not permitted and you will be penalised or disciplined (see section on Written Presentations)

### **Deadlines for assessed work** (see guidelines for penalties on page 38)

Details and dates of deadlines for submission of assignments/written material will be given at the beginning of each module and/or at the ‘start the week’ sessions. Marks will be deducted for assignments which are handed in late. Please ensure that assignments and all written work submitted are spell-checked. Unjustified delays in submission of work will be penalised.

**NB:** No excuses will be accepted for non-attendance during assessed practicals/workshops or the late submission of assignments, except for illness supported by the appropriate GP note or extenuating circumstances.

# MASTERS PROJECT

Masters students will be allocated a project/dissertation after the completion of the Diploma course. Some students may be required to undertake a critical appraisal of the published literature relating to a nephrological topic. Some students may be given clinical projects requiring data collection of clinical ward-based activities. Dissertations will be scored by a Board of Examiners. A *viva voce* examination will be at the discretion of the examiners.

## **Project Design**

As a preliminary exercise, you should think about and design your project to answer the question or test the hypothesis posed in the title of your project. Once you have designed the project, discuss it with the supervisor who will give you feedback. Where the study involves human subjects, a protocol will have to be submitted to the Ethics Committee for approval. The Course Director will advise you if this is necessary but the majority of projects are audit-type or critical appraisal exercises which do not require Ethics Committee approval, though ethical considerations should be thought of at all times.

## **Carrying out the Project**

The project is normally commenced after the Diploma examinations in May/June (**any leave to be taken during the project period must be arranged beforehand with the supervisor**).

## **Data Collection**

This will take place in the period between the end of the taught section of the course and the end of July. It will be up to you to organise your time during this period but you should take the advice of your supervisor.

During the progress of your project, you should be meeting with your supervisor on a regular basis. He or she will be your guide and give you advice. The organisation of your time is your responsibility and you should ensure you are available to receive messages from those involved in the project.

## **Writing Up**

You should finish data collection at the end of July at the latest and then complete your dissertation during August. It is important that you start writing sections of the project during data collection. An information sheet, which covers in some detail how you should write up your thesis, is given here. Read it carefully, as this is your guide on writing the report.

## **Oral Presentation**

As part of the project, students may be required to give an oral presentation outlining their project and presenting preliminary results. The presentation usually follows a standard format; a brief introduction, project aims, methodology, preliminary results and discussion. The requirement for an oral presentation is at the discretion of the Board of Examiners.

# A GUIDE TO WRITING A MASTERS DISSERTATION

[www.shef.ac.uk/eltc/services](http://www.shef.ac.uk/eltc/services) gives information on the writing advisory service.

A Masters dissertation is like a mini thesis. There is no set length to it, though most Master's theses do not exceed 70 double spaced manuscript pages, excluding the appendices. It has the following components:

## **Title**

This should reflect and be focussed on a particular question or problem you are addressing in your dissertation.

## **Abstract**

This should be between 200-400 words in length and essentially summarises the aims, methods, results and conclusions.

## **Introduction**

Should be highly focused and describe in sufficient detail the published papers relevant to the problem or question you are addressing. *Do not attempt to write all you know about the particular field of study, be very focussed and write as if you are trying to explain to a friend why you wanted to do the study.* Sub-headings are usually necessary. This section should not exceed a quarter of the whole dissertation.

## **Aims**

Set this out simply as a numbered list, indicating the hypothesis you wish to test.

## **Material and Methods**

This section should be set out in sub-headings.

## **Material or Subjects**

If you are conducting experiments on human volunteers or patients, the number of subjects, the age and sex distribution and any other relevant factors, such as particulars about the disease, should be inserted here.

For experiments on human subjects, there needs to be added a statement on ethical considerations, that all subjects gave their informed consent for the study to be carried out and that the study was approved by the Ethics Committee of the Northern General Hospital. This is important.

If you are conducting animal experiments, again details about the animals (husbandry, ethical issues, feeding etc.) should be inserted under this heading.

If you are doing studies on tissue samples, bacterial cultures, food analysis, etc. a description of numbers and type of material you are using will go under this section.

## **Protocol**

This section should contain an outline of the design of the experiment, indicating the times at which various manoeuvres were carried and appropriate controls. A diagram may be useful.

## **Methods**

This should set out in some detail the techniques used in your studies, for example, experiments, procedures, diet composition and formulation, questionnaires. If necessary, examples of diets, questionnaires can be included as appendices at the end of the dissertation.

## **Statistical Analysis**

Any statistical tests employed in the evaluation of data should be inserted here. The students will have access to statistics clinics where they can discuss with experienced statisticians their requirements.

## **Results**

This should be set out with sub-headings that are appropriate and include figures and tables. The legends to figures should contain sufficient information to enable a naïve reader to understand what is being demonstrated. Tables should have a heading that explains the nature of the material presented and no legend. Data points that are statistically significant should be indicated and in the figure legends or at the bottom of the table, a level of significance and the appropriate statistical test should be indicated. Where appropriate, primary data can be included as an appendix at the end of the thesis. You may point out interesting results in a short paragraph of text under the tables. However, it is not necessary to repeat the exact findings (eg in graphs or tables and in the text).

## **Discussion**

This should contain the following:

- an interpretation or explanation of the results generated.
- consideration as to what extent the aims have been fulfilled.
- a justification or criticism of the methodology employed and an indication of the insights that your results give to the understanding of the whole area. A suggestion of what future studies might be done to further develop this particular philosophy may be also included.
- a discussion of how your data supports or contradicts other studies and if there are discrepancies, offer explanations.

Again, it is important to keep it fairly short and focused. In most dissertations the discussion section is between 4 and 10 pages long.

## Conclusions

These should be presented as a numbered list of the major conclusions of your studies.

## References

For dissertations, our preference is that the names and the date of the paper are inserted in the text and then a list of references in alphabetical order is put at the back of the paper (see information on writing references). Please note that the names of all authors must be included. Most dissertations would not need more than 100 references, and some considerably less. The number used depends on the amount of previous research that that been conducted in your research area.

## **ALLOCATION OF MARKS**

The following will be taken into account in the allocation of marks for the final dissertation.

- 1) Quality of the content, including evidence of original thought and the extent to which the 'research question' has been answered and the aims fulfilled.
- 2) A well structured report including an abstract, introduction, detailed methodology, results, discussion, and limitations and a conclusion. Although it is acceptable to discuss the research area from a broad perspective, the report should not include irrelevant information. The report should be well set out, with figures and tables labelled.
- 3) Appropriate use of statistics for analysing the data and evidence that you have a good understanding of the analyses carried out. The level of analysis required will vary greatly from simple frequency tables to multiple regression. You will lose marks if it is evident that a lot more could have been done with the data.
- 4) A thorough literature search. You are expected to show initiative in locating all or the majority of relevant information including any which is not listed on CD Rom.
- 5) Correct use of references. This includes the appropriate use of references in the text and the correct listing of all references, in full, at the end of the dissertation. **If references are not cited or listed properly, then students will be required to make appropriate revisions.**
- 6) Correct spelling and use of grammar.

The final mark will reflect the extent to which you have succeeded in achieving these criteria.

These are guidelines – before you start writing, take advice from the course organiser or a member of the course management team.

**PLEASE HAND IN ONE BOUND COPY TO THE DEPARTMENT**

# OTHER RELEVANT INFORMATION & PROCEDURES

## Student Representation

Students are required to elect one course representative at the beginning of the academic year to sit on staff-student committees. As a member of the staff-student committee, the course representative is there to feed in student views on a whole range of issues that are of concern to students. It is essential that the student representative communicates with other students and course representatives to find out what they are concerned about.

Students are encouraged to approach their student representative with any problems which they would like to be brought to the attention of the staff. Staff meet regularly with the representative to discuss issues raised. In some cases solutions can be put into action immediately. Otherwise, complaints will be discussed at the weekly meetings. During the meetings with student issues of concern to staff are also discussed.

The Student's Union offers support to course representatives and the Education Officer can also provide advice.

Students who do not wish to go through the student representative are encouraged to approach their personal tutor or the Course Organiser/Postgraduate Course Administrator directly.

## Appointments with Staff

The staff of the Sheffield Kidney Institute have many commitments in addition to teaching on the course. It is, therefore, usually necessary for students who wish to meet with a staff member to make an appointment beforehand, unless the problem is very urgent. Staff welcome the opportunity to meet students and this system ensures that sufficient time is available to discuss the matter in question.

## Absence from the Department

Students are required to inform the Course Organiser or Postgraduate Course Administrator as early as possible if they are absent from the course for medical reasons or extenuating circumstances. **Absence for any other reason (eg holidays) should be discussed with the Course Co-ordinator and project supervisors before any arrangements are made.** Workshops and practicals **cannot** be re-arranged for individual students under any circumstances.

## Procedures for Withdrawal/Deferment from the Course

Students who feel unable to continue with the course after having discussed their situation with the Course Organiser / Postgraduate Course Administrator, may wish to withdraw or suspend their studies.

## Suspension of Studies

This request must be sent to the Postgraduate Course Administrator. Suspension of studies has to be sanctioned by the Faculty of Medicine and is not automatically

granted. The Postgraduate Course Administrator will write to the Administrator in the Medical Faculty to request permission.

### **Withdrawal**

If a student wants to withdraw totally from the course, he/she should notify the Postgraduate Course Administrator in writing. It is sensible for the student to complete that particular module, together with the assignments necessary, so that the appropriate credits towards their degree can be appended to their academic record.

## SUPPORT FACILITIES

### **Library Facilities** ([www.shef.ac.uk/library/subjects/usered.html](http://www.shef.ac.uk/library/subjects/usered.html))

Three of the libraries within the University of Sheffield hold books relevant to the nephrology courses:

- Samuel Fox Library at the Northern General Hospital
- Health Sciences Library at the Royal Hallamshire Hospital
- Information Commons

The libraries currently shelve books and bulletins of direct relevance to nephrology and also house a number of nephrology journals. In addition, the Sheffield Kidney Institute has a small library based on in the Renal Sorby Wing and there is also a growing library of Nephrology text books and a comprehensive set of DVDs covering all aspects of nephrology which are kept in the course office.

You will be shown around the library at the Northern General Hospital at the beginning of the course. This gives details of opening hours and the main services offered. Each library possesses information retrieval systems, notably CD-ROM, which are essential for literature searching.

*Copies of journals and materials from boxes should not be removed from the library, other than for photocopying. Any journals or reference materials which go missing cannot be replaced. Therefore, please respect the needs of your fellow students and return all materials after use.*

### **Printing** ([www.shef.ac.uk/cics/printing](http://www.shef.ac.uk/cics/printing))

Please be aware there are charges for printing in the open access areas at the Samuel Fox Library and in the University's IT Training Centre.

### **Photocopies and Telephone Calls**

You can make photocopies in the Samuel Fox Library on presentation of your UCard. There will be a charge for this service. **Students are not allowed to use the telephones, fax machine or computers in the Academic Office.** If you would like to send faxes, this can be done in the Clocktower reception for a small charge.

### **Student Advice Centre** ([www.shef.ac.uk/union/advice](http://www.shef.ac.uk/union/advice))

The Student Advice Centre at the Students' Union provides a free, professional and confidential advice service for all students.

They are open for face to face appointments between 9am-5pm Monday to Friday throughout the year (9am-4pm during vacation). Book an appointment, or if you require urgent or brief advice, you can use the drop-in session between 11am-3pm to speak to an adviser. Alternatively you can contact the advisers direct via phone, fax, email or post.

The Student Advice Centre also provides advice and information on various specialist matters relating to international students. If your case is complex they may help you

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by making representations on your behalf to a third party, e.g. the Home Office or British Diplomatic Post Abroad.

**Counselling Service** ([www.shef.ac.uk/counselling/students](http://www.shef.ac.uk/counselling/students))

The University Counselling Service is based at 36 Wilkinson Street and provides a free, confidential service to students.

## **SHEFFIELD TEACHING HOSPITALS NHS FOUNDATION TRUST INFORMATION**

### **Smoking**

The Sheffield Teaching Hospitals NHS Foundation Trust and the University of Sheffield do not allow smoking in any of their buildings, estates or grounds. This includes the Medical, Dental and Nursing Schools on Trust premises.

### **Principles of Confidentiality**

Patients have a right to expect that a doctor, nurse or other members of the Health Team or Trust staff in general will not disclose any personal information learnt during the course of their duties, unless permission is given. Without assurances about confidentiality, patients may be reluctant to give information which is needed in order to provide good care.

### **Occupational Health**

You will be asked to complete an OH2 form, which is a pre-placement health screening questionnaire issued by the Occupational Health Department of the Sheffield Teaching Hospitals NHS Foundation Trust. The department will check for antibodies to TB, mumps, measles and rubella. They may or may not ask that you visit the department, depending on the medical information that you declare. Students will not be allowed into clinical areas until they have been health cleared by the Occupational Health Department.

### **Renal Wards**

You should be supervised at all times on the renal wards and seek the permission of the ward doctors before accessing the patients' medical notes. Patients have protected rest periods and meal times and these should be respected at all times. You are also asked to be considerate to patients' visitors.

### **Letter of Authority**

During your studies at the University of Sheffield you will be issued with a letter of authority by the Sheffield Teaching Hospitals NHS Foundation Trust. The letter of authority is with observer status which is non-clinical contact with patients.

### **Dress Code**

You should be dressed appropriately at all times, particularly when in clinical areas. Your overall general appearance should be smart, clean and tidy in accordance with the professional role of a doctor.

### **Security**

An identity badge with a photograph should be worn at all times on Trust property. Sheffield Teaching Hospital NHS Foundation Trust identity badges and any access fobs that have been issued should be returned to the Course Manager at the end of the year.

# GENERAL INFORMATION

## **Sources of Information for Students**

These will be in the form of emails (students must check their emails daily), individual letters or notices posted in the department.

## **Incoming Mail**

All mail for Diploma/Master students must be addressed to:

c/o Renal Academic Office  
Vickers Corridor  
Northern General Hospital NHS Foundation Trust  
Herries Road  
Sheffield  
S5 7AU

## **Office Hours**

The Course Office at the Northern General Hospital is open for enquiries during the following hours

Monday – Friday      10.00 am – 12.30 pm

## **Contact Addresses**

Please let the Course Office have your Sheffield address and telephone number and also inform the University of any change of address. When you start to do your projects, please keep in regular contact (at least twice a week) with the department as messages and post will be left for you to pick up and some of the information could relate to the work you are doing on your project.

## **Buses**

There is a free shuttle bus service which travels between the Northern General Hospital and the Royal Hallamshire Hospital. Priority is given to STH staff at busy times. You will be asked to show your name badge as proof of identity.

## **Buses to the University of Sheffield, Firth Court**

The 97 bus leaves from Norwood Road to the City Centre. Once in the city centre catch a number 52 or 40 outside the Sheffield Cathedral (same side of the road as the Halifax Building Society or HSBC Bank going out of town), ask the driver to tell you when you arrive at the University of Sheffield, (stop before the Children's Hospital).

You are advised to check with the Bus Company or driver that these buses do in fact pass the entrances, just in case any routes have been changed.

### **Other Useful Telephone Numbers**

Travel Line (Bus enquiries)	01709 515151
Rail Enquiries	08457 125678
National Express (Coach travel)	08705 808080
Tourist Information	2814040
Sheffield City Council	2726444

### **Additional Information**

Bank (currently Royal Bank of Scotland and based at the main entrance) opening hours:

Monday – Friday 10.30 am – 2.30 pm

Huntsman Dining Room is open during the following hours:

<b>Breakfast</b>	7.00 am – 10.45 am
<b>Lunch</b>	11.30 am – 1.45 pm
<b>Afternoon Service</b>	3.00 pm – 8.00 pm
<b>Snack Service</b>	8.00 pm – 9.00 pm
<b>Night Service</b>	9.00 pm – 2.00 am

Halal meat can be bought at a reasonable price from the local shops just below the Barnsley Road entrance to the Northern General.

There is a multi-faith room in the Chesterman wing. There is a Mosque in the Huntsman building, near wards Firth 5 & 6 and a Chapel on Vickers corridor.

***This booklet, alongside the International Student Guide previously issued by the University of Sheffield, is to be kept for reference. You will need to refer to them throughout your time at the University of Sheffield.***

***PLEASE KEEP THEM SAFE***