



**MEDICAL AND
HEALTH SCIENCES**

The Elective Handbook

Retain this book until you have
satisfactorily completed your
elective

Updated August 2022

THE ELECTIVE HANDBOOK

Guidelines and Instructions for Planning and Undertaking the Elective

1	ELECTIVE COMMITTEE 2022	3
2	THE PHILOSOPHY	4
2.1	Definition	4
2.2	Aims	4
2.3	Anticipated Results	4
2.4	The Elective and the Graduate Learning Outcomes for the Medical Programme.....	4
2.5	The Nature of the Elective Scheme	4
3	YOUR ELECTIVE.....	5
3.1	Split Electives	5
3.2	NZ based GP Elective	5
4	PLANNING YOUR ELECTIVE (Year 4)	5
5	ELECTIVES	5
5.1	General	5
5.2	Personal Risk	6
5.3	Personal Safety.....	6
6	PROJECTS DURING YOUR ELECTIVE	6
7	PLANNING YOUR ELECTIVE (YEAR 5)	6
7.1	Elective organisation steps during Year 5.....	7
7.2	The Elective Survey	7
7.3	Electives in the Otago Training Catchment	8
7.4	Elective Approval and Confirmation	8
7.5	Notes	8
8	ETHICAL AND PROFESSIONAL EXPECTATIONS OF MEDICAL STUDENTS ON ELECTIVES	9
9	GRADING SYSTEM FOR ELECTIVE.....	10
10	ELECTIVE REPORT	11
10.1	Elective Report.....	11
10.2	Elective Interview.....	12
10.3	Format for the setting out of your report	12
11	POST-ELECTIVE STUDENT EVALUATION and RECOMMENDATION FORM	14

GLOSSARY OF TERMS

Elective Advisor

A member of the University of Auckland Elective Committee who approves student elective choices, assesses Student and Supervisor reports, and conducts the end of the elective interview. The advisor is allocated a number of elective students to oversee their elective planning and are also part of elective review for some elective students.

Elective Supervisor

A person at the elective attachment site who is prepared to supervise a medical student during the whole or part of the ten-week elective period in the final year of the medical course. This is an honorary position.

Elective Associate

A person who will assist the Supervisor in the supervision of a medical student during the elective.

1 ELECTIVE COMMITTEE 2022

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2 THE PHILOSOPHY**2.1 Definition**

The elective is a quarter during your trainee intern Year 6 in which you have a free choice of activity - medical, paramedical or medico-social. A non-medical elective may only be undertaken under exceptional circumstances.

Students have a free choice of elective that is subject to approval by the appropriate Elective Advisor in advance.

2.2 Aims

- To provide you with an opportunity to explore some aspect of a chosen medical topic in depth.
- To encourage you to think about your future and to provide opportunity for contact with possible future vocational areas.
- To allow you to extend and consolidate knowledge in areas of interest and weakness.
- To enable you to round off your training through study of a topic not directly related to future vocation.
- To encourage initiative, social accountability, and a sense of responsibility with minimal direction.

2.3 Anticipated Results

- Students will have the opportunity to prove themselves in their own chosen field of endeavour.
- Facilitation of the transition from 'student' with no responsibility to 'doctor' with total responsibility.
- Students will at least partly formulate ideas about their future vocations.
- Closer relationships between students and staff.
- Upgrading of specific skills in the area of medicine that the student works during his or her elective.
- Enhancement of student's general education.
- Deeper understanding and appreciation of different cultures and their health care needs.
- Enhanced appreciation of the interconnected endeavours of different health care professionals and the environments in which they work.

2.4 The Elective and the Graduate Learning Outcomes for the Medical Programme

The elective must also relate to the Graduate Learning Outcomes for the medical programme. While it is anticipated that you will work towards achieving a significant number of these, there will be three or four that you should particularly concentrate on for your personal elective. You will be asked to identify these, as part of the application process and provide evidence of how you have achieved these in your report and/or during interview at the completion of the elective.

2.5 The Nature of the Elective Scheme

The elective represents a mutual contract between your Supervisor and yourself and is subject to minimal interference by the Faculty.

The elective period is a prescribed part of the medical programme and as such must be accounted for. The elective activity must occupy ten weeks of the elective quarter.

3 YOUR ELECTIVE

Electives may be clinical, research project-oriented or simply designed to widen the students experience in a particular sphere. In general, electives should be designed with some definite goal(s) in view. Your 10 week elective can be spent at one site in one clinical speciality or participating in research, or split into two 5-week clinical placements in different specialities and/or sites.

You will begin planning your Elective in Year 5 following release of the Year 6 Quarter allocation. You will then be invited to begin the process by initiating discussions with your elective advisor in July and submitting the year 6 Elective survey in September.

3.1 Split Electives

Students have the option to split a 10-elective into two 5-week clinical placements. The student has multiple options for the split configuration. It can be undertaken in the same speciality at different sites; in different specialities at the same or different sites; or split between DHB and non-DHB sties. Students should note:

1. 5-week placements are likely to be better able to be accommodated at clinical sites rather than a single 10-week placement.
2. You are able to split an Elective 5 + 5 weeks only.
3. No other split configuration will be accepted.
4. Research Electives and Research Projects with Dissertation must be 10 weeks and cannot be split.

Students are given the opportunity to indicate their preference for a 10-Week Elective or Split-Elective on the Elective Survey which will be released in early September.

3.2 NZ based GP Elective

If you wish to conduct a NZ based GP Elective, the Department of General Practice has requested students be referred to the Department to ensure the practice is suitable and that practices currently used for teaching are not being over committed and there is no impact on teaching. All students must contact the departmental administrator Litea Tubu l.tubu@auckland.ac.nz.

4 PLANNING YOUR ELECTIVE (Year 4)

Students should begin thinking about the elective in Year 4, ready for more specific action in Year 5. Do not leave the arrangement of your Elective until the last minute, the planning, approval and arrangements take much longer than you expect. Talk to current trainee interns or junior doctors who have done electives which interest you. Read Elective Reports from previous years for information and inspiration. Elective reports from 2005 onwards are available on [Elective report database](#) available via the MBChB Portal.

Talk to colleagues and friends who may have personal contacts with existing or possible supervisors. There is also an elective website that can provide information on how to organize and where to go for an elective. The website address is <http://www.electives.net>.

5 ELECTIVES

5.1 General

Approval will depend on the quality of the Elective proposal. A clear statement of aims and learning outcomes of the elective, nomination of a suitable Supervisor and confirmation from the Supervisor that they agree to supervise your elective is required in order to confirm your Elective proposal.

5.2 Personal Risk

In general, the choice of elective destination is your decision, provided it meets academic requirements.

Some issues to consider in your planning (please note this list is not exhaustive):

- Sexual assault
- Consensual sexual activity that carries risks
- Drug use
- Petty and violent crime
- Medical illness
- Trauma
- Internal conflicts
- Unwanted attention

5.3 Personal Safety

If for any reason you feel unsafe on your elective you should immediately leave your elective. In consultation with the Chair of the Elective committee, an alternative elective will be arranged. In these circumstances you would not be required to perform additional elective time unless there were other reasons to consider such a requirement. It is important that your experiences are formally documented by you, and that Ms Claudia Makgill and the Chair of the Elective Committee are notified.

NOTE: On return from elective all students will be sent a link to their university email to complete a confidential post health questionnaire. This will be discussed at the post elective interview.

6 PROJECTS DURING YOUR ELECTIVE

In general, completion of a clinical or basic research project will enhance the elective. Such projects are not compulsory although they are encouraged. A project may range from audit of a clinical experience, a small clinical research project to performing specific laboratory-based research. If research (other than audit) is planned, this will usually require ethical approval which will need to be arranged before commencing the elective.

Students undertaking a research project of any kind at a DHB should contact the site-coordinator for that DHB and advise them of the details of the research. The site-coordinators are responsible for all student activities on site and will ensure policy compliance for the research.

7 PLANNING YOUR ELECTIVE (YEAR 5)

Early in Year 5 students must begin to make more specific plans for their elective quarter.

Quarter Dates*	There are 4 x 10-week elective blocks, one per quarter
1 st Quarter	early January to late February (10-week elective)
2 nd Quarter	early March to late April (10-week elective)
3 rd Quarter	middle of May to middle of July (10-week elective + 2-week vacation)
4 th Quarter	early August to early October (elective plus 1 week vacation)

*Specific dates for each quarter will be posted on Canvas at the beginning of Year 5.

The post-elective interviews will be conducted during the Medical Imaging Week for each quarter.

7.1 Elective organisation steps during Year 5

March	Allocation survey for year 6 made available.
late March	Results from above survey advised by email. .
July	Elective Advisors allocated to students in early July. You will make contact with your supervisor to discuss your elective objectives and plans prior to the release of the Elective survey in September. Failure to make contact with your Elective Advisor or complete Elective paperwork within a reasonable time frame (including the deadlines below) may be considered a fitness to practice issue.
6 September	Elective survey opens – students are sent the survey via email.
19 September	Elective survey closes.
Deadlines September 2	Submission of Scholarship Applications. To be eligible for a scholarship requires approval of your elective by your Elective Advisor.

7.2 The Elective Survey

All Clinical Electives in DHB sites are arranged by site-coordinators at the 5 DHBs in the Auckland Medical Programme catchment and use the Elective Survey as guide for student's' placement preferences. **Students should not approach DHB clinical staff to arrange clinical elective placements.**

All students will be surveyed in early September in Year 5 for their elective preferences. Students should already have been in contact with their Elective Advisor to discuss their elective **prior** to the release of the survey.

Students will have the opportunity to indicate if they are preferencing a DHB Clinical Elective, Research Elective, Research Project with Dissertation or a self-generated non-DHB elective and whether they want a 10-week placement or two 5-week clinical placements (note the Research Elective and the Research Project with Dissertation cannot be split over two 5-week blocks).

Students will then identify 6 specialities they would prefer to be placed in and the site for each preference.

The survey will be open for 2 weeks and students' surveyed preferences are final. Failure to complete the survey will result in site-coordinators placing you in any space that is available which may result in you being placed out of your cohort.

DHB Electives during the Global Pandemic – the current global pandemic has caused numerous disruptions to the Medical Programme with one of the most significant and ongoing effects being the exclusion of overseas travel for Electives. Where previously most students travelled internationally for electives, we must now accommodate almost all elective students in our DHBs. This has placed immense strain on the system and site-coordinators have a difficult job managing elective placements alongside regular cohort attachments. Because of the scope of the task for site-coordinators it is difficult for the Medical Programme to institute deadlines for elective placements in DHBs. Unfortunately, it is sometimes the case where a small number of students are still being placed in the final weeks before their Elective commences. If students are concerned about their placement they should contact the Electives Administrator (Claudia.makgill@auckland.ac.nz) or their site-coordinator for more information.

7.3 Electives in the Otago Training Catchment

Electives in a DHB or other organisation located in the Otago Medical School's training catchment are subject to approval by the Dean of the Otago Medical School.

Applications for electives in the Otago catchment will only be considered for extenuating circumstances and should be made, in the first instance, to either the Phase 3 Director or the Chair of the Electives Committee. If the student's case for an Otago Elective is accepted by the Auckland Medical Programme, the student should submit an Otago Elective Application to Phase Director and/or Chair of the Electives Committee for submission to the Otago Medical School for their consideration. The Otago Elective Application Form can be obtained from the Electives Administrator (Claudia.makgill@auckland.ac.nz).

Students should not directly contact consultants in Otago teaching hospitals unless they have been granted the appropriate approval to do so.

7.4 Elective Approval and Confirmation

Clinical placements in DHBs are considered pre-approved with the expectation that students have already discussed their elective preferences with their Elective Advisor. Students do not need to go back to their Elective Advisor for approval of DHB clinical electives.

Self-generated non-DHB electives will need final approval from the student's Elective Advisor (usually via email) a copy of which should be uploaded to the viaTRM application.

Research Electives and Research Projects with Dissertation will need final approval from one of the Research Coordinators (Prof Cris Print, Prof Chris Bullen or Dr Judith McCool)

Final confirmation for all Electives is done through viaTRM. Students can complete a viaTRM application as soon as they have approved placements for the full elective period. Students can access viaTRM at <https://go.aucklandabroad.ac.nz/>

The viaTRM application is also where the student will identify the learning outcomes for the elective and upload their Elective Risk Assessment form and Pre-elective checklist.

All Elective students should complete an Elective Risk Assessment form and a viaTRM application, regardless of the location of their elective.

7.5 Notes

1. **Placements in preferred services are not guaranteed.** The intention of the survey is to gather students' preferences and, while site-coordinators do their best to accommodate individual wishes, it is not possible in every case.
2. **There is an expectation that students accept initial offers.** It is inevitable that some students will be offered DHB placements that are not one of their preferences. As disappointing as this may be, students should be aware that declining an offer will not result in a subsequent, more preferable offer being forthcoming.
3. **Acceptance of an Elective placement constitutes a professional commitment on the student's part.** Withdrawal from an accepted DHB placement requires the approval of the Phase Director or Elective Coordinator and will only be approved under extenuating circumstances. Students withdrawing from confirmed placements damages our DHB relationships and compromises future possible placements.
4. Students should be aware that placements in the more popular services like ED, ICU, Anaesthetics, Radiology and Plastics are already very limited and it is impossible for sites to accommodate all students who preference these services.
5. Any changes to approved non-DHB electives must be resubmitted to your Elective Advisor to be re-approved. Please ensure that your supervisor(s) of cancelled electives are notified to avoid any inconvenience for them. This responsibility and courtesy is considered to be a fitness to practice issue.

6. **You must not begin your elective until after the Year 5 Board of Examiners meeting held, in the last week of the standard University semester in early-November. Do not make travel arrangements to leave before this date.**
7. All Year 6 students must be back in time for Medical Imaging week which include the post-elective interviews at most cohort sites.

8 ETHICAL AND PROFESSIONAL EXPECTATIONS OF MEDICAL STUDENTS ON ELECTIVES

The opportunity to undertake an elective is an exciting component of your medical training. Obviously, the context is important in terms of the kinds of challenges you are likely to face. Regardless of where you undertake your elective, a number of ethical and professional challenges may arise. Some of the challenges (both professional and ethical) that may arise during your elective:

- The assumption from host sites that your levels of knowledge and skills proficiency are higher than you actually possess.
- Being given experiences that exceed your level of training – perhaps without adequate supervision. For instance, being expected to run and take responsibility for a clinic or a ward
- Responding to an emergency: In the absence of suitably qualified staff, be extremely cautious in intervening. Don't intervene where you think you may make matters worse. However, if there is a reasonable likelihood that you can improve outcomes or prevent or mitigate serious harm, then it may be appropriate to assist. Try to document what happened and what you did as soon as possible after your involvement
- Witnessing another elective student 'having a go' at a procedure that they would not be allowed to carry out at home without supervision (for instance a spinal tap – LP)

It is important to remember that you are a medical student and not (yet) professionally qualified. The following guidelines apply regardless of where you undertake your elective. You:

- have a duty to identify yourself to your patients and to make sure (to the best of your ability) that your patients know you are a student doctor
- should clearly explain to patients what your involvement in their care will entail. Patients have a right to refuse to be examined or to submit to a procedure
- must ensure that where there is an indication for a sensitive examination, a qualified doctor or midwife is present. Ideally a female chaperone must be present when a sensitive examination is carried out on female patients (see The Medical Programme Policy Guide, pp 14-15)
- 'Written informed consent must be obtained before premedication for any procedure or examination that you will perform whilst the patient is under anaesthesia or sedation' (see The Medical Programme Policy Guide, pp 36-41)
- must get the written consent of any patient whose photo(s) or medical information is identified and used by you (by way of a report or presentation)
- must keep a patient's personal information confidential (unless you have their written consent to use such information)
- should respect cultural differences in any decision-making process. This may entail the involvement of family members or community/spiritual elders.

If you are placed in a situation where you are concerned about what is expected of you (in terms of your role as a student doctor), or the behaviour or competency of a peer or senior colleague, in the first instance speak to your supervisor. It may also be appropriate to speak to peers who are also concerned about the situation at hand: talking to your supervisor together will give you all support. If the supervisor is the problem, there may be someone else whom you trust and who may be able to offer help and support. It is also important that your elective

report include details about any concerns you had whilst undertaking your elective. You are also encouraged to discuss your concerns with your Elective Advisor.

You may be invited or expected to participate in activities that you consider to be unethical or unprofessional, but that your hosts do not view as problematic or troubling. Although we recognise this is difficult territory, "you should politely but firmly decline. It is recognised that speaking out can be very difficult, especially as a student, however it is important to speak up when you encounter ethical problems and concerns. Change cannot happen if you remain silent on important and potentially serious matters that concern you and your patients.

9 GRADING SYSTEM FOR ELECTIVE

You must pass the elective to pass the final year of your qualification. A satisfactory Elective Report must be submitted before the end of the elective attachment. Both the report and the CSR must be submitted online via **CANVAS**.

The Elective Committee will use the following grades for assessing your elective:

- Distinction
- Pass
- Fail

The achievement of **distinction** is characterised by the following criteria. Most, but not all criteria must be achieved:

- The Elective Report is submitted by the deadline (**midnight, last day of elective**)
- Demonstration of an excellent knowledge of medical practice/research in the student's chosen area.
- Excellent work effort and exceptional involvement in clinical practice or research.
- Acquisition of in depth understanding of professional cultural and social issues relevant to their medical elective experience.
- Development of exceptional procedural/surgical skills during elective.
- A comprehensive, in-depth excellent quality elective report from the student.
- Confirmation from the supervisor of excellence in almost all areas (>80% excellent).
- Demonstration of excellent professionalism and communication skills during Elective placement and post-elective interview.
- **Demonstration of excellent professionalism and communication skills during pre-Elective planning with Elective Advisor, rated on a scale of 1-4 (1 being minimal level of professionalism'). This will be submitted to the post-elective interview panel for consideration.**

A distinction grade will not be considered unless your Elective Report is received by the due date.

The achievement of **pass** is characterised by the following criteria:

- Demonstration of adequate attendance.
- Satisfactory participation in the activities of the Supervisor's team or unit (clinical or research).
- Demonstration of learning medical, surgical, procedural or research skills during the elective.
- Demonstration of an appreciation of professional, cultural and social issues relevant to their medical elective experience.
- A satisfactory quality elective report from the student
- Satisfactory Supervisor's report.

The grade of **fail** is characterised by the following criteria. Any of these criteria may result in a fail:

- Absent from the elective interview without due cause.
- Failed to demonstrate that adequate time had been spent on the elective.
- Failed to submit an elective report.
- Submitted an inadequate report.
- Supervisor has serious concerns about student's performance. Before failing a student on these grounds, the supervisor will be contacted to discuss the student's performance.

The Committee's grading of your elective will be made following the interview and consideration of your supervisor's report. A provisional grade will be sent to the Board of Examiners.

10 ELECTIVE REPORT

There are two occasions on which you are given the opportunity to report back to your colleagues concerning your elective experience.

10.1 Elective Report

This is a formal account of your elective experience required as a condition of your qualification. **You are advised to write your report no later than the last week of your elective.** Many students keep a diary while they are away detailing their experiences throughout the placement.

Your report will be loaded on the Elective Report Database accessed via the MBChB Portal. It should be written with this in mind i.e. in a professional manner. The report should be 10 pages, including a 200-word abstract. Please complete the Post-Elective Student Evaluation and Recommendation Form. Appendices may be attached.

The report should give a concise account of what you did, whether you achieved your goals and emphasize the highlights of the elective. It should be reflective of your medical experiences, providing details of practical knowledge gained and lessons learnt, using the domains of the medical programme as subheadings*. It is not a Lonely Planet travel guide. Sometimes interesting case histories may be included. If you have carried out a project, the write-up of this should be in the form of an appendix (including tentative or conclusive findings) attached to the elective report. Data on social activities, accommodation and useful advice of interest to other students can be placed in an appendix. Comments, criticisms or recommendations which you feel may assist future elective students would be welcomed.

Your report must be submitted by Midnight on the last Friday of your Elective and submitted via Canvas.

This is an important deadline for two reasons. The Elective Committee has to assess it prior to the Elective Interview (see section 10.2) which you attend with them on a date during Medical Imaging week (to be advised) and for your report to be considered for a Distinction (see section 9).

- Clinical and Communication Skills domain: You may find that aspects of this domain are different in the setting of your elective. Take this opportunity to reflect on these and compare and contrast your experiences on elective with those you have experienced so far.
- Personal and Professional Skills domain: It is highly likely that you may encounter some personal and professional challenges during your elective as you will be working in an unfamiliar environment that may be outside your usual experience. This is a good opportunity to develop some insight into how you respond in different situations. You will be expected to reflect on the three PPS components included on the Elective CSR i.e. Professional Qualities; Engagement in Team; and Health and Wellbeing. You may wish to include this content in your PPS portfolio.

- Applied Science for Medicine domain: You may wish to reflect on the development of your knowledge in this area and/or the differences that exist between your experiences on elective and so far in your training.
- Hauora Maori domain: Please reflect on the listed components of this domain. On those electives overseas use this opportunity to reflect on cultural/ethnic differences appropriate to your setting.

Students who are working in a country where there are indigenous populations should critically reflect on the differential status, or otherwise of indigenous populations health status. In addition, students should reflect on the historical, political or other determinants of these inequalities and how they are being addressed, or otherwise, in the host institution (e.g. are there specific policies, practices and ethical considerations for how indigenous populations are managed). Provide concrete examples if possible. Reflect on how these issues are managed in the New Zealand healthcare context.

- Population Health: Please use this opportunity to comment on disease prevention and health promotion as relevant to your elective.

Students need to provide a profile of their host country burden of disease (morbidity and mortality risk factors) and reflect on how this is represented, or otherwise within their host medical / healthcare clinic. What are the emerging concerns for the country and the health care system (workforce retention etc.)?

Students need to provide evidence of their reflection on the broader social, cultural, economic and where relevant political drivers that underpin the health system of their host country. Where possible, students should present concrete examples of how these factors influence patient presentation and health provider responses.

Students should reflect on how the above dynamics are expressed in New Zealand and where the differences and commonalities lie. What are the key learning / messages that capture this experience?

10.2 Elective Interview

- A formal 15-minute interview with members of the Electives Committee at the end of your elective attachment. In regard to Year 6 students allocated to Waikato, Rotorua, Tauranga, Whangarei and New Plymouth, your interviews will be held on site by local Academic staff.
- The place, date and time for this interview (held during clinical imaging week) will be emailed to you prior to the aforementioned week. Your Supervisor will be required to submit a report on your elective for consideration by the Committee.

10.3 Format for the setting out of your report

- A template for the report that includes the Post-Elective Student Evaluation and Recommendation Form will be available on Canvas.
- This report must be produced using Microsoft Word document. Pdf copies will not be accepted.

REMINDER: The completed report must be submitted to CANVAS no later than Friday on the last day of the Elective.

You are reminded that Qualification is dependent on the completion of a satisfactory elective and report by the specified date.

THE PHASE 3 (YEAR 6) ELECTIVE

FRONT PAGE	Elective Title	What your Elective is about
	Elective Dates	Start and end dates of your elective
	Institution	Name(s) of the institution(s) or organization(s) where your elective was based
	City	Name of the town or city where your elective was based
	Region/State	(Only complete if applicable). Name of the region or state country where your elective was based (e.g. North Sulawesi; New South Wales; Tennessee)
	Country	Name of the country where your elective was based
	Last Name First Name(s)	Your family name (last name, surname) Your first name(s) in full please
	Supervisor(s)	Name(s) of your supervisor(s)
	Associates	Name of any associates
	Keywords	Words and/or phrases describing the topics covered in your elective. <u>Examples:</u> For an elective in a Canadian ski area, you could use keywords like; Skiing; Orthopaedics; Emergency Med. For an elective in a GP with some delivery of babies, you could use the following keywords: General Practice; Obstetrics
File Name	This is made up of: Year (4digits) underscore (_) Elective Quarter (1, 2, 3 or 4) Family (last) Name Initials e.g. 2001_2SmithJB.doc <u>Other examples:</u> Your family name is Holley, first names are Rose Jane Louise; you did your elective in the 4 th qtr of 2001 and you have saved your report in Word (.doc) format. The File Name would be: 2001_4HolleyRJL.doc Your family name is Wang, first names Chang Shieng; you did your elective in the second quarter of 2000 and you have saved your report in pdf format. Your file name would be: 2000_2WangCS.pdf	
2ND PAGE (1)	Abstract	Approx. 200 word typed in a central box (10 x 15cm). This abstract is to be a factual summary of activities, achievements and conclusions and not merely descriptive.
PAGES (2-10)	Report	Report providing a full account of your elective activities with acknowledgements and references. Please use the domain of the medical programme as subheadings.
LAST PAGE (11)	Checklist	Post-Elective Student Evaluation and Recommendation Form

11 POST-ELECTIVE STUDENT EVALUATION and RECOMMENDATION FORM

It is **compulsory** for students to complete the following form by ticking the appropriate box and include any specific comments and should be submitted with your final elective report as the final page.

Aspect of Elective	No	Yes	N/A	Comment / Recommendation
Would you recommend your choice of country / city for your elective?				
Would you recommend your choice of hospital for your chosen elective?				
Was hospital/ institution accommodation available?				
Was the standard of hospital accommodation acceptable?				
Was alternative acceptable and affordable accommodation available?				
Was the general cost of living acceptable?				
Was there adequate transport between accommodation and hospital ie safe and affordable?				
Was access to the nearest city / town acceptable?				
Did you encounter any threat to your personal safety?				
Did you encounter any problems with theft?				
Did you travel with a fellow medical student?				
Would you recommend traveling with another student?				
Was access to personal medical care available / acceptable?				
	Poor	Satisfactory	Excellent	
Do you feel your supervision adequate?				
Did you consider your elective to be a worthwhile experience from a medical perspective?				
Did you consider your elective to be a worthwhile experience from a personal development perspective?				
Did you consider your elective to be a worthwhile experience, overall?				
Any further comments / recommendations:				