Discipline of Paediatrics
2017–2018
<table>
<thead>
<tr>
<th>Contents</th>
<th>Page Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Welcome and overview</td>
<td>5</td>
</tr>
<tr>
<td>Academic Discipline Staff</td>
<td>7</td>
</tr>
<tr>
<td>Mission Statement</td>
<td>8</td>
</tr>
<tr>
<td>Educational Objectives</td>
<td>8</td>
</tr>
<tr>
<td>Aims of the Paediatric Course</td>
<td>9</td>
</tr>
<tr>
<td>Content of the Course</td>
<td>9</td>
</tr>
<tr>
<td>Core Curriculum</td>
<td>11</td>
</tr>
<tr>
<td>Guidelines for Clinical Examination of Children</td>
<td>12</td>
</tr>
<tr>
<td>Dress Code</td>
<td>14</td>
</tr>
<tr>
<td>Examinations and Assessments</td>
<td>15</td>
</tr>
<tr>
<td>Course Appraisal</td>
<td>16</td>
</tr>
<tr>
<td>References/Summer Electives information</td>
<td>16</td>
</tr>
<tr>
<td>Publication and Research information</td>
<td>17</td>
</tr>
<tr>
<td>Recommended Reading List</td>
<td>17</td>
</tr>
<tr>
<td>Library facilities</td>
<td>18</td>
</tr>
<tr>
<td>Appendix A Multiple Choice Examination</td>
<td>19</td>
</tr>
<tr>
<td>Appendix B Guidelines for Students at Examination</td>
<td>20</td>
</tr>
<tr>
<td>Conduct of Examinations</td>
<td>21</td>
</tr>
</tbody>
</table>
Welcome and Introduction

Discipline of Paediatrics

The Discipline of Paediatrics is based in the National Children’s Hospital in Tallaght Hospital formerly known as the Adelaide and Meath Hospital Dublin incorporating The National Children’s Hospital. The National Children's Hospital is the oldest paediatric teaching hospital in Ireland and the UK and has a long association with Trinity College, dating back to 1821 and has held the chair of paediatrics since 1960.

Paediatrics involves the medicine, surgery and psychology of the newborn, the infant, the toddler and the child up to the age of 18 years. The aims of paediatric education are to provide knowledge, skills and attitudes, with a caring, child and family centered approach in an enjoyable and rewarding manner.

Students are encouraged to develop a life-long commitment of self-learning and to become compassionate, caring, competent, and efficient doctors, with well developed communicating skills. The Discipline of Paediatrics conducts, promotes and supports many national and international research programmes.

The Paediatric undergraduate course:

8 weeks: comprises of an eight week comprehensive teaching programme, with lectures, presentations, roundtable discussions, evidence based projects and small group bedside clinical teaching. The course is provided in The National Children’s Hospital, Tallaght Hospital and in addition students have a two week attachment at Our Lady's Children’s Hospital Crumlin and a one week attachment at either the Children’s University Hospital, Temple St or Our Lady's Children’s Hospital Crumlin. A number of visits to other healthcare institutions such as Laura Lynn Children’s Hospice and PICU in Our Lady's Children’s Hospital Crumlin are also provided.

1 week: Neonatology: neonatal paediatric teaching is delivered at the Coombe Women's University Hospital
Students are encouraged to supplement the programme provided with personal study and research. All members of the medical staff are committed to ensuring that you have an enjoyable and instructive attachment. We welcome your opinions and value your appraisal of the course. If you have any queries or problems please let us know.

The care and well-being of the child must take precedence over all else.

While every effort is made to ensure that scheduled events take place as planned or are rescheduled, sometimes this is not possible due to clinical commitments and clinical emergencies.

The teaching programme is as comprehensive as our allocated time permits. However, it is not possible or desirable to cover every aspect of the vast area of Paediatrics in lectures and tutorials and so students are required to supplement the programme provided with personal study and research.
Academic Discipline Staff:

Professor Eleanor Molloy, Chair and Professor of Paediatrics and Child Health and Head of Discipline of Paediatrics  
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Discipline of Paediatrics
Trinity Centre for Health Sciences
National Children’s Hospital
Tallaght,
Dublin 24
**Mission Statement**

The aims of paediatric education are to learn the knowledge, skills and attitudes, with a caring, child and family centered approach in an enjoyable and rewarding manner. The students are encouraged to develop a life-long commitment of self-learning and to become compassionate, caring, competent, and efficient doctors, with well-developed communicating skills. The course is delivered using a caring child and family centered approach encompassing a multidisciplinary team committed to continual improvement in clinical care through innovation and research.

**Educational Objectives**

Paediatrics involves the medicine, surgery and psychology of the newborn, the infant, the toddler and the child up to the age of 18 years. Your goals during the attachment are to acquire the following knowledge, skills and attitudes:

**Knowledge and Understanding of:**

Preventative Medicine and Health Promotion: The prevention of illness by immunisation, by screening tests such as the Guthrie test at birth, developmental assessment, hearing tests etc., and health promotion.

“Well child” management: Growth, development and nutrition, fluid requirements and family dynamics

Approach to the “sick” child: Assessment, diagnosis and management of acute and chronic illness.

**Skills in:**

- History taking, communication skills with children, parents and the whole family.
- Clinical examination skills to detect abnormalities and to diagnose illness.
- Management by initiating investigation and treatment.
- Problem solving and critical analytical skills.

**Attitudes:**

Students are encouraged to:

be enthusiastic, committed and efficient

show concern, compassion and respect towards the child, parents, hospital staff and colleagues

have a pride in belonging to the hospitals and university
be non-judgemental of parents, children, and adolescents of differing social backgrounds and values and to critically evaluate journals, knowledge and new developments.

Aims of the Paediatric Course

Educators Targets

- To teach the recognition of the well and the ill infant or child taking a thorough history and performing clinical assessment. Clinical examination is taught on the wards and in the accident and emergency Discipline.
- To emphasise the importance of growth and development in childhood
- To provide sound basic knowledge of childhood health and disease

Students Targets

- to communicate adequately with children and their parents
- to take a good paediatric history
- to examine the 4 ages of childhood, newborn, infant, toddler and older child
- to construct a reasonable differential diagnosis
- to plan appropriate investigation and management

Structure of the Course

The programme is full time daily from 8.30 am – 5 pm for 2 months. In view of the numbers of students in each medical year the class is divided into four groups, each attending in a different 2 month period.

Content of the Course

The course in paediatrics provides both instruction in theory and clinical practice on the following subjects:
neonatology, respiratory, cardiac, renal, gastrointestinal, endocrine, haematology, infections, neurology, rheumatology, diabetes, metabolic, chromosomal, malignancies, psychological, psychiatric, surgical, orthopaedic, and accident and emergency problems.

The emphasis of the course is to enable students to avail of their time in a paediatric hospital to develop their clinical skills. Each student is involved in daily small group bedside teaching and will spend time with parents and patients. History taking, performing physical examination and regular attendance at
Out-patients provides learning opportunities for the investigation, diagnosis and management in the full spectrum of paediatric conditions seen. Students are expected to undertake some independent reading from the textbooks recommended - a list of which can also be found herein.

Lectures:
Comprehensive series of lectures covering all major topics in paediatrics

Module breakdown
Tutorials: Bedside clinical tutorials on the medical and surgical wards and the Emergency Department. A detailed programme is given to each student on the first day of the course.

Problem Based Learning (PBL): There are regular case PBL sessions on specific areas.

Clinical Simulation: To complement small group bedside teaching and also promote self directed learning a Clinical Skills Laboratory has been developed in the Discipline which enables students to practice and refine their examination techniques in a less stressful environment. The Laerdal Sim Baby is a portable advanced infant patient simulator ideal for undergraduate teaching in paediatrics. Sim baby can simulate a wide range of breathing patterns including rate and depth and clinical signs such as sternal recession and tachpnoea. Sim baby has realistic anatomy and clinical functionality and is connected to a monitor which displays vital signs, ECG and Oxygen saturations-all can be manipulated during scenarios by the students. This provides valuable preparation and support to bedside clinical teaching which is the cornerstone of paediatric teaching. Each group of students on attachment is divided into 6 smaller groups. Each group is taken through a series of scenarios which have been devised in advance with clear learning objectives.

Emergency room experience: There is an evening and a weekend roster allocating each student an evening and a weekend in the hospital attending the wards and the Emergency Department. This will allow the student to shadow the registrar and senior house officer on duty and see a range of clinical cases. Students should also attend the post call ward round at the weekend when rostered.

Group Research Project: Each student will participate in a group research project during the 8 week rotation. This will develop further collaborative, team working and research skills. It will also form a significant portion of professionalism assessment.
Care of Children with Complex Needs: A visits to Laura Lynn Hospice gives the students an opportunity to experience the facilities available for children with special needs, such as physical disabilities or severe learning difficulties. Education relating to the value of multidisciplinary care is provided.

New Modules: We have recently introduced a number of new modules to the course. Students will attend the Paediatric Intensive Care Unit in OLCH Crumlin to learn about the care of a child who is critically ill. There are also modules on medico-legal issues, paediatric radiology, adolescent health, transition of care, and translational paediatrics.

Core Curriculum
Details of the obligatory knowledge and skills which you must acquire are set out below:

Clinical Skills

- How to elicit an accurate and relevant history of the patient’s problems
- How to approach, communicate with, play with, wash, feed, nappy change, give medicines to and examine infants and children
- Examination of cardiovascular system in a child (including blood pressure)
- Examination of respiratory system in a child (including ENT)
- Examination of abdomen in a child. Examination of the genitalia should only be performed in appropriate circumstances and then only in the presence of a staff chaperone. The performance of rectal examination by medical students is neither recommended nor appropriate.
- Examination of nervous system in a child (including fundi)
- Demonstration of simple developmental milestones
- Assessment of growth and puberty
- Explaining common conditions and management to parents e.g. febrile convulsions, meningitis, asthma, croup, urinary tract infection
- Counselling parents e.g. vaccination advice, nappy rash, breast feeding problems
- Recognising an ill child
- Examination of the newborn
- Examination of skin
Knowledge

- Principle paediatric medical, surgical and psychiatric problems: mode of presentation, symptoms, signs, diagnosis, etiological mechanisms and related investigations
- Principles of patient management in paediatrics
- Common paediatric medical, surgical and psychosocial emergencies & their management
- Normal development
- Normal growth and puberty
- Infant feeding and nutrition in childhood
- Immunisation
- Preventative health: lifestyle, obesity, accident prevention
- Child health surveillance including normal development
- Family health and disability issues e.g. effect on education, SIDS, child abuse

Guidelines for the Clinical Examination of Children

The care and safety of children in hospital is the key concern of those working with children. You will no doubt be aware, through media reports, of concerns regarding the safety of children in hospital. The exposure to allegations of sexual abuse or misconduct in the care of children must be considered at all times by those who are involved in the history taking from relatives/children and the clinical examination of children. It is with this in mind and for your protection that the following guidelines must be adhered to during your time in Paediatrics.

Identify Yourself: Identification badges with both name and photograph must be worn at all times by students while in the hospital or attending special visits to other institutions. These badges must be prominently displayed at the neck or lapel area. It is vital that you introduce yourself clearly to the parent and child.

Permission must be sought from the Ward Sister of Senior Staff Nurse on duty prior to the examination of any child on the wards. Parental permission and the permission of the child themselves should also be sought, where the child is old enough. Be mindful of meal times and visiting hours.
**Isolation and Hand hygiene:** Familiarise yourself with and observe any isolation procedures. Please wear a plastic apron while examining patients on infant wards. Please wash your hands before and after examining any patient. Stethoscopes or toys used while examining children should be wiped down with Alco wipes before seeing patient.

**Safety:** The well being of the child is the responsibility of the examining medical student during the examination and must take precedence over any personal learning objective. The child must be left in safety and comfort at the end of any examination. i.e. with cot sides up and changed as necessary. **NEVER** leave a cot side **UNATTENDED** and make sure the cot side is up and secure when leaving the cubicle.

**Comfort of child:** The privacy and dignity of children should be respected at all times. It is not acceptable that a child be distressed, hurt or embarrassed during a clinical examination. Unnecessary exposure of a child is not justified, especially in a pubertal child, as this causes distress and embarrassment. Certain procedures are not indicated at this level of examination and include any intimate examinations, such as palpation of the breast or examination of the genitalia in a pubertal child. Examination of the genitalia in a pubertal child, if indicated, should only be performed in the presence of a staff member with a parent present where possible. It is recommended for your own protection and from a learning point of view that clinical examination of children be performed in groups of two students. In the absence of a second student another party can be recruited to act as a chaperone, perhaps a nurse or doctor would oblige.

**Documentation:** It is required that after taking a history or examining a child on the wards that you sign your name and student ID number in the patient’s chart. Confidentially is of paramount importance and care should be taken not to discuss patients on public corridors or within hearing of non staff members.

**Barrier Nursing:**
- Open cubicle with elbow
- Wash hands and dry on paper towel
- Put paper towel in foot-operated bucket
• Put on plastic apron and examine patient
• Remove plastic apron and wash as before
• Leave cubicle by opening door with elbow

Dress Code

Dress Code is an important aspect to professional practice and is part of your training in becoming doctors. It also forms part of your responsibilities as described by the Irish Medical council.

Professional: Patients should be confident that the student is part of the professional team involved in their care.

Respectful: Patients should never feel that their personal, ethnic or religious convictions are compromised because of inappropriate dress.

Safety: Dress must conform to the local health and safety regulation. This is to protect both the student and the patient.
Paediatrics 2017/2018:
Assessments and Examinations

<table>
<thead>
<tr>
<th>In Course Assessments and Feedback</th>
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<tbody>
<tr>
<td><strong>Clinical Examination 40%</strong></td>
</tr>
<tr>
<td>Observed history taking, clinical examination and case discussion bedside Week 8</td>
</tr>
<tr>
<td>Students <strong>have to</strong> pass this clinical component in order to sit their final Clinical Skills Exam and MCQ paper</td>
</tr>
<tr>
<td>(students that do not pass will be re-examined in May of that academic year)</td>
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<tr>
<th>Logbook Formative/Mandatory</th>
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<tbody>
<tr>
<td>Individual Guidance and Discussion Meetings Week 4</td>
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<tr>
<td>Individual written feedback to be emailed to student after the rotation is finished Weeks 8-9</td>
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<tr>
<th>Group Research Project</th>
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<tbody>
<tr>
<td>Group Guidance and Discussion Meetings Week 4</td>
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<tr>
<td>6 minute presentation of research with discussion Week 8</td>
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<tr>
<th>Professionalism</th>
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<tbody>
<tr>
<td>Group Project Participation</td>
</tr>
<tr>
<td>Individual Guidance and Discussion Meetings Week 4</td>
</tr>
<tr>
<td>Unsatisfactory individual performance will result in additional project work being allocated to those students</td>
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<tr>
<td>Attendance (daily sign in sheet)</td>
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<tr>
<td>Conduct Weeks 1-8</td>
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<table>
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<tr>
<th>End of Year (June) Assessments</th>
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<tbody>
<tr>
<td><strong>Clinical Skills Assessment 40%</strong></td>
</tr>
<tr>
<td>Examination Stations to include:</td>
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<tr>
<td>Assessment of Communication Skills</td>
</tr>
<tr>
<td>Neonatal examination</td>
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<tr>
<td>Clinical scenarios</td>
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<tr>
<td>Practical Skills End of Year</td>
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<table>
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<tr>
<th>MCQ 20%</th>
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<tbody>
<tr>
<td>200 questions negatively marked -0.5 End of Year</td>
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<table>
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<tr>
<th>Viva Voce</th>
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<tr>
<td>Vivas in certain cases (10mins) End of Year</td>
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Awards

Professors Prize in Paediatrics
A medal is awarded to the student with the highest mark in the final medical examination in paediatrics.

Board of Governors Prize
A separate voluntary examination takes place for those students who wish to participate in this examination. This is an open competition for the Board of Governors Prize and takes the form of written paper and slide interpretation.

Prize for Best Group Project
One group project from each attachment will be selected on merit and the four best group projects of the year will be presented in both oral and poster format to the whole class in June. There will be a prize for the best group project.

Course Appraisal
The Discipline of Paediatrics of the University of Dublin, Trinity College is committed to excellence in its Paediatric training. It is proactive and constantly seeks to improve the quality of its programmes by exploring new technologies and teaching methods. Student feedback is encouraged by the provision of detailed course appraisal questionnaires to each student on completion of their Paediatric attachment. The resulting appraisals are analysed and a report compiled and discussed within the discipline. Continual course review is practiced within the discipline.

Reference Requests
All reference requests are centrally managed.
If you require a reference please email your request to Sandra Kenny at s.kenny@tcd.ie.
Please give a minimum of two weeks’ notice and please supply a postal address with your request.
Requests must not be made to individual members of staff directly as these will not be processed.

4th Year Summer Electives
All summer elective requests must be made before the February deadline which can be accessed on the School of Medicine website. All requests must be centrally made to Sandra Kenny at s.kenny@tcd.ie
Publication and Presentations of Research

Presentation and/or publication of any work completed as part of the group research project in paediatrics must be directly supervised by an academic member of the discipline. Please approach us in advance of any submissions.

Recommended Reading List

Basic Titles

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<tr>
<th>Title</th>
<th>Author</th>
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<tr>
<td>1. Essential Paediatrics</td>
<td>Hull and Johnston</td>
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<tr>
<td></td>
<td>(The most current basic text)</td>
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<tr>
<td>3. Illustrated Textbook of Paediatrics 5th Ed</td>
<td>Lissauer &amp; Clayden</td>
</tr>
<tr>
<td>4. Lecture Notes on Paediatrics</td>
<td>Smithells &amp; Meadow</td>
</tr>
<tr>
<td></td>
<td>(alternative basic text)</td>
</tr>
<tr>
<td>5. Paediatric Physical Examination</td>
<td>Gill &amp; O’Brien</td>
</tr>
<tr>
<td></td>
<td>(A handbook for the clinical attachment)</td>
</tr>
<tr>
<td>6. Paediatrics and Child Health</td>
<td>Rudolf/Lee/Levene</td>
</tr>
<tr>
<td></td>
<td>(Wiley Blackwell Publishers)</td>
</tr>
<tr>
<td>7. Clinical Paediatrics for Postgraduate examinations</td>
<td>Stephenson &amp; Wallace</td>
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Recommended Texts

1. Colour Atlas of Paediatric Dermatology                   | Verbov                                           |
|                                                            | (Essential to see the full range of skin conditions no longer seen as in-patients) |
| 2. The Normal Child                                         | Illingworth                                      |
3. From Birth to Five Years Mary D. Sheridan
   (Children’s developmental progress)

Reference Texts
1. Textbook of Paediatrics Forfar & Arneil
2. Nelsons Textbook of Paediatrics Vaughan & McKay
3. Recognisable patterns of Human Malformation Smith
4. Essentials of Paediatric Surgery Nixon & O'Donnell
5. Paediatric problems in General Practice Robert Boyd & Michael Modell

Library Facilities
Students may avail of the facilities of the Tallaght Hospital library which houses an extensive range of paediatric textbooks and journals. Students may also use the libraries in St. James’s University Hospital, Trinity College and Our Lady’s Children’s Hospital, Crumlin.
Appendix A  Multiple Choice Examination in Paediatrics

UNIVERSITY OF DUBLIN

Before filling in a multiple choice sheet, you should read the following

The sheets are not corrected by hand. They are processed through a machine called an optical mark reader. All it recognises are marks, so there’s no point in writing comments; this could invalidate an answer sheet.

As it is a machine that processes the forms, the marks you enter must be good - see a good mark below. If you enter a bad mark, then humans may realize the intended answer but the optical mark reader won’t. A good mark is a dark, horizontal stroke, filling most/all of the box.

In light of this, the following points are vital:

- Always use a good sharpened pencil.

- Never use a biro. A blue or black biro will produce marks that will be pocked up, but they can’t be erased. Red marks will not be picked up at all.

- Have a good clean eraser. Mistakes should be rubbed out completely. Don’t leave smudges as a smudge may still be determined as a mark.

- Have an extra pencil and/or a sharpener. May be the examiner could have some extra pencils and a sharpener.

- Ensure that only machine recognisable marks are entered.
• You can not enter more than one mark for a particular question. If you do, the optical mark reader will reject it and will enter a blank mark for that question.

• Always enter your name, subject and student number (legibly) where asked at the top of the sheet - although the exam sheet calls this “EXAMINATION NUMBER” what is required is you student number. If you are using a T/F (true/false) form, and both sides of the form are being used, your student number must be entered on both sides. As your student number and name are the only means of identification please ensure that your number and name are correct.

Remember: A bad mark will be rejected
An answer sheet without a Student Number will be rejected.

Appendix B  Guidelines for Students at Examinations and Conduct of Examinations

Guidelines for Students at Examinations

1. The onus lies on each student to establish the dates of examinations by consulting their MyTCD portal for their written examination dates and times. No timetable or reminder will be sent to individual students by any office.¹
2. You are expected to familiarise yourself with the location of every examination venue to which you have been assigned.
3. Once you have entered a venue, complete SILENCE must be maintained at all times.
4. Each student must be in possession of their student ID card for each examination session. You should place your student ID card on the right-hand side of you desk for the duration of each examination.
5. A ‘clean-desk’ policy applies for all official examinations. In addition to pens, pencils, rulers, ID card, etc. only materials permitted for an examination may be placed on the desk. Invigilators will be instructed to request students to remove any non-permitted items from their desk.
6. You should check the title of the paper on your desk to ensure that it is the correct examination paper for your course and read carefully all the instructions given.
7. Your attention is drawn to the ‘CONDUCT OF EXAMINATION’ which is reproduced overleaf and appears at http://www.tcd.ie/Senior Lecturer/teo/teopdf/notexam.pdf.
8. You will not be admitted to the examination after the first half-hour and will not be allowed to leave during the last half-hour. If you arrive after the first half-hour, contact your College Tutor or his/her replacement as a matter of urgency. If your tutor is not available, contact the Senior Tutor’s Office.
9. You are not allowed start you examination until instructed to do so by the invigilators. Please use any spare time at the start to fill in your answer book cover. Write legibly in ink - pencils are only allowed for OMR forms.
10. You will be advised of the time ten minutes before the end of the examination.
11. At the end of an examination, you will be advised that:
   a. it is your responsibility to hand in everything you wish to have marked;
   b. you should ensure that all of your answer books are labelled correctly with your examination number (where appropriate), seat number and all other relevant
information required and also complete the section at the bottom right-hand corner as requested before sealing the flap on every anonymous booklet used; fasten securely with a treasury tag;
c. you must immediately stop writing and hand up your booklets when instructed to do so by an Invigilator
d. you must remain in your seat until all scripts have been collected
e. you must not remove from the examination venue answer books, rough work or other materials supplied.

12. If you wish to leave the examination venue at any stage during the examination you must be escorted by an Invigilator. If necessary you will be accompanied to a bathroom by an Invigilator.
13. If you wish to leave before the end of the examination you must hand your booklet(s) to an Invigilator
14. If you are taken ill just before an examination and are unable to sit it, immediately contact your tutor or his/her replacement. If your tutor is unavailable, contact the Senior Tutor’s Office. If you feel unwell during your examination, please inform an Invigilator - you will be asked if you wish to go to the Student Health Centre and will be accompanied by; an Invigilator.
15. Smoking breaks are not allowed during examination sessions.
16. No mobile phones are allowed in examination venues.

STUDENTS MUST FOLLOW THE INSTRUCTIONS GIVEN BY THE INVIGILATOR AT ALL TIMES

1While every effort will be made to give due notice of major changes, the College reserves the right to amend the examination timetable.

Conduct of Examinations

Except as provided for below, candidates for examination are forbidden during an examination to do or to attempt to do, any of the following: to have in their possession or consult or use any books, papers, notes, memoranda, mobile phones or written or electronic material or any nature, or to copy from or exchange information with other persons, or in any way to make use of any information improperly obtained.

Where the examination is of such a nature that materials are provided to the candidates, or where the candidates are allowed by the rules of that examination to have materials in their possession, then candidates may of course make use of such materials, but only of such materials, and the general prohibition above continues to apply in respect of any and all other materials.

Where candidates have the prior written permission of the examiner(s), of the Senior Lecturer, or of the Disability Officer, to have materials in their possession during an examination, then candidates may of course make use of such materials, but only of such material, and the general prohibition above continues to apply in respect of any and all other material.
Where candidates are allowed to bring personal belongings into the examination venues upon condition that such belongings are stored in an area - such as the back of the venue - away from the area in which the candidates are sitting their examinations, then candidates may bring personal belongings into the hall, provided that they are placed in the indicated area and *are not returned to by the candidates* until they have finished their examinations and are leaving the hall.

Any breach of this regulation is regarded as a major offence for which a student may be expelled from the University.

Students must not leave the hall before the time specified for the examination has elapsed, expect by leave of the invigilator.

Examinations or other exercises which are part of continuous assessment are subject to the same rules as other College examination. Where submitted work is part of a procedure of assessment, plagiarism is similarly regarded as a major offence and is liable to similar penalties.

**Senior Lecturer**

**TCD**