



December 2006 Edition - a newsletter for RAMUS Scholars, Mentors and Alumnus members

From the RAMUS Team....

We had a great response to the last issue of Gone Fishin'. It is very gratifying that the August edition caught the interest of so many – from participants to university staff members and even to prospective applicants.

It is time to nominate your mentors for the 2006 Mentoring Awards. All scholars are invited to send nominations ...those who started this year...those completing their scholarship this year...and all those in between. Please see page 2 for more details and send your nominations and any accompanying photos of acclaimed, inspiring, outstanding mentors. Nominations are due by 15 January 2007.

Spread the word about the RAMUS Conference Placement Program. Apply online by 12 January 2007 for funding to attend the 9th Rural Health Conference in March 2007 in Albury.

At the 9th National Rural Health Conference in Albury in March 2007 there will be a few RAMUS highlights. The RAMUS Mentoring Awards will be presented during the conference. We will also be promoting membership of the RAMUS Alumnus and reconnecting with other former scholars from the scheme's earlier days.

Applications are now open for 2007 RAMUS Scholarships, closing on Monday 22 January 2007.

And a reminder that documentation from both continuing and completing 2006 scholars is due by 31 December 2006 (see page 2 for details).

In this issue we have a report from Anthony Cardin on the 2006 ACRRM Scientific Forum 2006. Anthony attended the forum with support from the RAMUS Conference Program. We continue to follow first year scholars, Phillippa Baker and Francisco Rodriguez-Letters.

Wishing you all the best for the holiday season and for 2007.

*Susan, Denisse, Janine and Peter
The RAMUS Team*

[APPLY ONLINE NOW!!!](#)

2007 RAMUS Application Round

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Community pharmacists' role in rural health

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[Recommencement of 2007 Payments](#)

14/01/2007 – Graduate Payment Schedule

06/03/2007 – Undergraduate Payment Schedule

RAMUS TRACKING PROJECT HAS COMMENCED

RAMUS mentors received a short questionnaire at the beginning of December 2006 as the first step in implementing the RAMUS Tracking project. The mentor survey seeks information on attitudes to various aspects of the RAMUS Scheme.

A separate questionnaire is being finalised for post-graduate RAMUS scholars. It is expected that the scholar survey will be sent out in early January 2007.

The survey seeks to monitor the career paths of RAMUS scholars and to glean feedback regarding:

- scholar and mentor perceptions of the RAMUS Scheme;
- degree of intention to practise in rural areas;
- extent and type of initial rural workforce participation; and
- the influencing factors in commencing/continuing/ discontinuing in rural practice

Preliminary results will be presented in a special workshop at the 9th National Rural Health Conference to be held in Albury in March 2007.

CONFERENCE PLACEMENTS FOR 2007

Don't forget there is still time to apply for funding of up to \$1000 to assist you to attend professional conferences which have a rural and remote health context or enhance clinical skills. For application forms and guidelines follow this link:

<http://nrha.ruralhealth.org.au/scholarships/?IntContId=77&IntCatId=7>

The next closing date is 12 January 2007 for conferences up to 30 June 2007.

The 9th National Rural Health Conference to be held in Albury, 7 - 10 March 2007 is an approved conference for this program. Details of the Conference program are available at:

<http://9thnrhc.ruralhealth.org.au/?IntContId=38>

Apply now for this and other conferences to extend your professional development!

For further information contact:

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RAMUS ACQUITTAL REQUIREMENTS

CONTINUING SCHOLARS

Due on 31 December 2006

2007 Scholarship Agreement
2007 Database Form Form
2007 Confirmation of Enrolment
2006 Academic Results
2006 Mentor Report
2006 Scholar Report
2005/06 Income Tax Details

Due on 30 March 2007

Proof of Rural Health Club Membership

Due on 1 June 2007

2007 Learning Plan

COMPLETING SCHOLARS

Due on 31 December 2006

Completing Scholar's Database Form
2006 Academic Results
2006 Mentor Report
2006 Scholar Report
2005/06 Income Tax Details

RAMUS Conference Program Report

Anthony Cardin

ACRRM Scientific Forum

16th -19th November 2006, Adelaide, SA

Thanks to the RAMUS Conference Program I was able to attend the ACRRM Scientific Forum held on the 16th - 19th of November. The venue was the historic Adelaide University campus and adjacent Royal Adelaide Hospital. The conference was a very enjoyable event and I met a swag of rural doctors from all over Australia, as well as many students who also share my passion for rural health.

On the first day of the conference I attended the ACRRM Education and Training day, and presented a paper titled 'Successful Recruitment of Pre-clinical Medical Student to Rural Clinical Schools'. This lead onto the Rural Clinical School (RCS) Forum, where I was a member of the discussion panel and shared my experiences of the various RCSs at Monash University with the audience. Our paper was well received and our conclusion that the perception of greater clinical experience and education at an RCS was the major factor in attracting students formed a major part of the forum discussion.

Presenting on the first day of a conference has its advantages. Everyone gets to know who you are and they feel comfortable coming up and speaking to you throughout the conference, and asking for your opinion on things regarding their own RCS. On the Thursday evening I was fortunate enough to be invited to dine with the CEO, President and Censor of ACRRM, one of my professors from Monash Uni, and the medical director of the Australian Antarctic Division. This was one of the highlights of the conference for me, and I learnt a lot about the workings of ACRRM, and also about working as a doctor in Antarctica and about expedition medicine.

Friday was the Scientific Day, with a morning of keynote speakers, followed by concurrent sessions of presentations on everything from rural obstetrics to using video conferencing and information technology to conduct fellowship exams. Friday night saw the Forum dinner at Hardys Wines Reynella Winery. Everyone was dressed to the nines, and there was a very informative presentation from Prof Lugg, an Australian who is now Chief Health and Medical Officer at NASA. He spoke about training and recruiting doctors for long duration space missions. The dinner was an excellent opportunity to network, and I had the pleasure of sitting with Prof Roger Strasser, a former academic at Monash, and now Dean of the Northern Ontario School of Medicine in Canada.

The next day involved the skills workshops. My first workshop was on ENT. The last thing you want to see at 9am in the morning after a night at a winery is four cadaver heads lined up on a table. Never the less it was an enjoyable workshop, and as a student the doctors let you go first and talk you through all the procedures and the different ways in which they can be performed. I learnt how to perform anterior and posterior packs for nose bleeds, as well as the various manoeuvres to treat benign positional vertigo. Next I attended the plastering workshop with the other students at the conference. We were taught how to make fibreglass casts and took turns practising on each other. In the afternoon I attended the Radiology workshop, as well a session of the England v SA cricket match at the Adelaide Oval with some of the doctors. That night dinner was at the Adelaide Zoo which included a guided tour. This was again an excellent opportunity to network and to talk to rural doctors about their experiences and what it is like to work in their particular town. All the students kicked on afterwards and it was great to hear about what was happening at other universities around Australia, particularly in terms of curriculum and rural clinical schools.

The ACRRM scientific forum was the most enjoyable conference I have attended yet. The paper Ryan Spencer and I presented was a talking point throughout the whole conference, and has set us in good stead for the future. I learnt a lot about rural health, about ACRRM, and made many useful contacts for the future. I am very grateful to the RAMUS conference program for providing the funding to allow me to attend this conference.



APPLY FOR RAMUS NOW!

The 2007 RAMUS Application Round is now OPEN!!!

The 2007 RAMUS Application and Guidelines are now available. Tell your friends to visit www.ruralhealth.org.au or contact the RAMUS team for more information.

Applications close on 22 January 2007, 5:00pm AEDST

Community pharmacists play crucial role in rural health

The Australian Journal of Rural Health is the official journal of the National Rural Health Alliance and some of its Member Bodies: ACRRM, CRANA, SARRAH and ARNM. The Journal publishes articles in the field of rural health and promotes interdisciplinary approaches to secure rural health. An article in the current issue highlights community pharmacists.

Studies have shown that community pharmacists have a very important role to play in depression management. With six per cent of Australians experiencing a depressive illness in any given year, psychological distress is now one of the most costly and increasingly acknowledged health issues experienced by the rural community. And it is likely to become worse during the current severe drought.

In the December 2006 issue of the Australian Journal of Rural Health there is the report of a study on the patient benefits of information and support provided by local pharmacists on the nature and management of depression.

The results lend support to the hypothesis that timely support provided by appropriately trained community pharmacists, working in conjunction with local doctors and mental health workers, helps to alleviate depression among people in rural areas.

Patients attach a great deal of importance to the receipt of good information about their medication – which means they are more likely to adhere to treatment. Pharmacists are excellently placed to be a ready source of this information – and because they are often the most readily accessible health professionals in rural communities, they are also in the position to provide regular patient follow-up during the first 2-3 months of drug therapy – again encouraging adherence to the treatment prescribed.

Lead author Dr. Judith Crockett said, 'The data collected show that depression sufferers demanded greater information, improved support services and, most importantly, enhanced understanding of their experiences. Where this was provided, patients were more likely to remain on their medication and, as a result, were also more likely to experience improvements in their state of wellbeing. This study highlights the importance of having an integrated model of depression treatment and management – that is, community pharmacists working in conjunction with GPs and local mental health services, allied health workers – to provide best possible care under often difficult circumstances.'

This initiative has the potential to alleviate some of the current burden on overstretched GPs and mental health services. In addition, the research provides the foundation for a larger research project incorporating a greater synergy among rural health services – a project including enhanced training of pharmacists in mental health and the increased involvement of local GPs.

'Such an interdisciplinary approach will definitely be welcomed by patients, their families and the communities alike', added Dr. Crockett.

A Week in the life of...

Phillippa Baker

University of Adelaide, MBBS 1

Eight o'clock starts every morning, twenty-six contact hours a week and 150 people at home avidly distracting you from work. Such is the struggle I face every week, and this is the challenge I wouldn't exchange for anything. The hectic lifestyle a first year Medical student faces is daunting, but it is true what they say- We work hard, we play hard, and we most definitely party hard!

A standard week in my life now, two weeks until exams, isn't exactly an appealing timetable for those looking at a career in Medicine. But I promise you it's not as bad as it looks, and the blocks designated for study in my timetable...well would probably be more aptly labeled procrastination.

The Adelaide University Medical course is based around PBL, or Problem Based Learning. PBL simulates actual clinical encounters with a broad history initially, followed by more details of patient history and Physical Examination results. At the first session we are presented with a sheet which details the presenting complaint of our 'patient' and we then hypothesize how their symptoms come about. In between each session we must then research our hypotheses and learning issues for the case. Each case runs for four or five sessions, each being two hours long, and at each session we get a little more information to differentiate between our hypothesized diagnoses. The first three years of the medical course have PBL every second day and our lectures are also based around the case we are studying, with about two a day. To compound our medical knowledge we also have Medical Personal and Professional Development sessions, where in small groups with a tutor we can discuss anything from personal issues to any ethics involved in our current PBL case. And an added practical side to our learning is the Clinical Skills session we have every week, where we learn physical examination and history taking skills. In first year our 'compulsory elective' is biology. Complete with eight o'clock lectures on every second day it becomes really difficult to stay awake.

Other than PBL, MPPD, Clinical Skills, lectures and biology we have two hours a week in the Anatomy Lab working with cadavers- a little daunting at first, but a valuable learning tool- as well as a learning about histology, pathology and histopathology. The rest of my day at Uni is usually filled with trips to the library as after hours there is little time for study at college.



The St Ann's College Girls Footy Team

The colleges in Adelaide compete against each other for the High Table Cup, with competition in many sports. It is an intense three weeks of training and competition followed succinctly by the next sport. Sport is a big part of my life, and I was lucky enough to be elected as Sports Representative for the college next year, consequently most of my evenings consist of training of some sort.

Regular additions to my week include AURHA (Adelaide University Rural Health Alliance) events, AMSS (Adelaide Medical Students Society) events and there are always plenty of College events. Thursday night is pub night and is exclusively never to be missed, and especially at this stage of the year we always have somewhere to be, whether that be an Awards night or Valedictory Dinner. One night a week is usually designated to spending time with family and I always look forward to a decent home-cooked meal and some time-out from college.

Looking back on the year I would say it's been a rather steep learning curve: Moving to another state, moving into college, starting University and Med School, working with cadavers and learning to scull a beer have all been hurdles I've had to overcome. However the people around me - my sisters, my friends and my college family - have made it one of the most enjoyable years yet. College, and its residents, creates such a wonderful environment for anyone looking to move to the city. There are so many people who are willing to encourage and support you, whether it be on the sporting field, in the academic field, or just trying to lure you to the pub. It is an opportunity not to be missed and I recommend it thoroughly to anyone.

With only two weeks to go, I'm looking forward to getting out of first year (fingers crossed), and spending some time away from the books and with family. My sisters are both graduating this year and moving away, so every second I can spend with them is precious. I'm also eager to spend some time with my mentor, to gain more experience and enhance my aspiration to practise medicine.

I wish good luck to everyone with their final exams and university offers - I'll hopefully talk to you all from second year.



Marina, Pip and Felicity Baker

2006 RAMUS Mentors Awards

Nominate your mentor now – deadline extended to 15 January 2007

RAMUS scholars are invited to nominate a mentor for the 2006 mentoring awards. Please send by email your reasons for nominating this mentor (up to one page). Scholars who are completing this year may like to acknowledge an inspiring mentor or a mentor's significant support over the years. Other scholars may want to highlight an impressive mentor who has opened doors to contact with special people, environments or events. Alumnus members are also welcome to nominate an exceptional mentor.

The 2006 award-winning mentors will be presented with their awards at the 9th National Rural Health Conference, 7-10 March 2007, in Albury. The awards will be announced in early 2007 on our web site, in *Gone Fishin'* and other publications. Any photos of scholars with their mentors or of mentors in their local setting are much appreciated. Perhaps you can take some photos next time you visit your mentor and then send copies to the RAMUS office.

Please email nominations and images (jpg files) to ramus@ruralhealth.org.au by Monday 15 January 2007.

A week in the life of...

Francisco Rodriguez-Letters

University of Queensland, MBBS 1

Focus: giving a snapshot of life nearing the end of the year

The medical programme is an extremely busy one. The expectations of our lecturers and clinical tutors are high, and so the end of the term is a particularly stressful time for us all.

I start class on Monday at eleven o'clock. This is a real luxury, as the rest of the week is peppered with eight o'clock starts and long evenings. The medical course at the University of Queensland is case based, and we have 'PBL's'- Problem Based Learning tutorials. This commences our week. We sit around a whiteboard in a group of ten students and a tutor. The 'PBL buddies' have by this time become great friends, as we have been through many ups and downs together throughout the year. Our tutors are excellent, and help us to direct ourselves in our learning in a passive and discrete manner.

As an example of the PBL process, we are given a theoretical scenario where, for instance, an elderly woman falls over and breaks her hip. This raises many medical issues: anatomy of the lower limb, the biochemistry of osteoporosis and calcium homeostasis, ageing in general, and various other psychosocial issues related to ageing, such as aged care, the fears of loss of a spouse or incapacitation and its impacts on the primary care giver (in this case, likely to be the elderly husband). These are all considered throughout the week, and various experts come to lecture us. We might have an anatomy lab, where we examine a cadaver and a histology lab where we learn about bone remodelling under the microscope. Later on during the week we visit the Royal Brisbane Hospital, where our group will visit an A and E doctor to explain us the methods of clinical examination relevant to the week's topic. We get formatively examined regularly.

There really is not much time either during the week or on the weekend to get back to nature. I long for the end of the year when I will once again be able to relax, go camping, hiking and, quite frankly, sit in front of the TV and watch the cricket with a carton of beer and do nothing for once! Having said that, I would be a liar if I said that I never went out and had a few (or more...) with my mates. It is, however, becoming rarer by the day...until after exams I expect!

This seems far away, for we have 2000 pages of notes to remember, a whole lot of stress and a month elective at a hospital straight after our exams (which I am sure will be very fun!)

This year has by no means been a walk in the park. Far from it: Coming from a non- biomedical degree background, I have found it rather challenging to keep abreast of all the anatomy, physiology and biochemistry. But it has been very rewarding, and a fascinating and useful experience. I found the people in our course to be absolutely lovely, generous with their answers to questions, and supportive. The staff, by and large, have been excellent and approachable.

The only thing left to do is pass!



9th Rural Health Conference
7-10 March 2007
Albury, NSW

Register now!

www.ruralhealth.org.au



The opinions expressed in 'Gone Fishin'' are those of the contributors and not necessarily of the National Rural Health Alliance and its individual member bodies.

Meet the New RAMUS Manager

Susan Magnay

Susan Magnay started as the new RAMUS Manager on 11 December. Susan's background is in libraries, having worked in a variety of management, service delivery and policy roles at the National Library of Australia, the State Library of New South Wales and most recently at the Australian Library and Information Association, the national professional association for the library industry, based in Canberra.

When not in the NRHA office in Canberra, Susan lives on a small acreage in the beautiful Bega Valley on the NSW south coast. Susan was born in country South Australia, but her family left there when she was very young and she grew up in Papua New Guinea. Since then she has lived mainly in Sydney and Canberra and also lived in England before moving to the Bega Valley.

Susan is looking forward to getting to know the RAMUS scholars, mentors and alumni and to supporting the scheme and all its participants. She hopes to meet many of you at the National Rural Health Conference in Albury in March.



3, 2, 1!

Dr Jack Sloss

RAMUS Alumnus

3 *Top tips about ...*

Making the most of internship
Making the shift from uni to work is often earth shattering. Beautiful sunny days outside and you are in the hospital from 7.30 to 6.30. I railed against it after a few weeks. I made a paradigm shift about week 6 and have enjoyed my time immensely since then.

1. Realize this is what you did the past 7 years for.
2. Make the most of learning opportunities - You are assistant to the consultant or registrar, closest to all the information as it arrives and is processed.
3. Enjoy your time with your peers. They are the ones that will help you most to keep your sanity.

2 *If I could I really would . .*

1. Travel down the Sepic river in a canoe.
2. Spend a few months in South America. Why? - Both areas are wild, energetic country allowing a sense of freedom and discovery.

1 *One great passion I have is ...*

Maintaining a full life while being a doctor.
It is important to know the science and to be involved with your patients. However your physical and emotional health are enhanced by being involved in the whole world around. Sports, camping or community projects add greatly to your compassion and empathy and allow you to be rounded and I advocate for all of these.