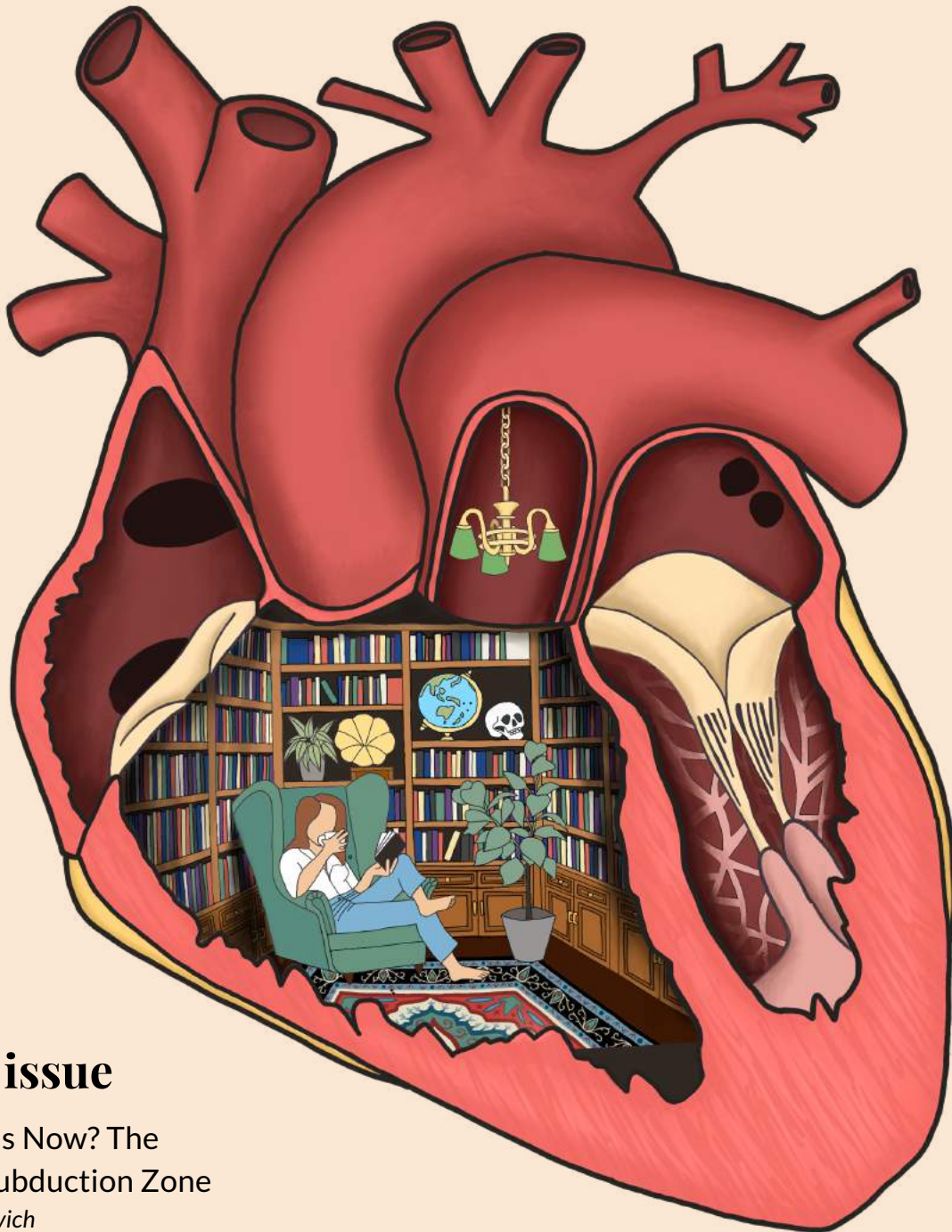


KYPHOSIS

SPRING 2021



on this issue

How Soon is Now? The
Cascadia Subduction Zone

Adriana Ukalovich

Ma dove dovremmo
mangiare – but where
should we eat?

Thomas Elphick



a word from our senior editors

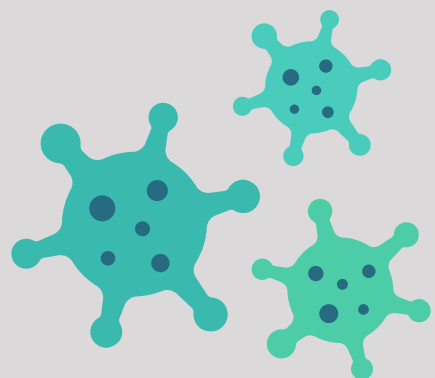
Hello to everyone reading!

We cannot express how excited we are to finally release this year's edition of *Kyphosis*. We were truly not sure if it would be possible. However, due to a lot of hard work and many generous contributors, we are thrilled to present you with this year's magazine. We would like it to be a symbol of our collective resilience and a reminder that we are all still very much part of a large Notre Dame community. We really hope that you enjoy reading through the rollercoaster that 2021 has been, and seeing what everyone has been up to.

We'd like to take a moment to thank all the incredible people who have contributed to *Kyphosis* this year. Firstly, the lovely front-cover artwork is by none other than Katie Valciukas in second year - thank you Katie! You constantly amaze us with your talent. For everyone else, we have been blown away by the creativity, thoughtfulness, and unique perspectives our Darlinghurst community have brought to the magazine this year. Without your support, this magazine would not exist so our gratitude is immeasurable! Last, but certainly not least, a huge shoutout must go to our amazing Junior Editors; Claire, Jamie, and Millicent, all of whom have been instrumental in getting this issue out.

We are so proud of this magazine, and we hope you enjoy reading the 2021 Spring edition of *Kyphosis* as much as we enjoyed creating it for you all.

Much love,
Yousef and Maddie



contents

- 03. | **dean's update**
- 04. | **president's address**
- 05. | **humans of notre dame** (first-year edition)
- 06. | **humans of notre dame** (second-year edition)
- 07. | **humans of notre dame** (third-year edition)
- 08. | **humans of notre dame** (fourth-year edition)
- 09. | **humans of notre dame** (professor edition)
- 11. | **zoom doctors** by mitchell read
- 12. | **eternity is an awfully long time** by yousef hakimi
- 13. | **how soon is now? the cascadia subduction zone** by adriana ukalovich
- 17. | **mark in time** by millicent lee
- 23. | **a beginner's guide to medical podcasts** by talia hunter-smith
- 26. | **cooking with serena: vegan edition** by serena hope
- 29. | **ma dove dovremmo mangiare - but where should we eat?** by thomas elphick
- 32. | **portraits of a med1 zoom** by daphne mcleod
- 33. | **why radiography** by sukriti jetley
- 35. | **my youngest patients** by anei thou
- 36. | **women in surgery** by nancy wei
- 37. | **day in the life of a third year** by deyan momirovski
- 38. | **the little things** by professor peter caroll
- 39. | **film corner** by yousef hakimi
- 41. | **how it started... how it's going** by victoria hadlow
- 43. | **lgbtqia+ educational resources** by stephanie zwi
- 45. | **the people of the sea** by sorren thomas
- 47. | **confessions of a medical student**
- 52. | **sub-committee updates**
- 71. | **puzzle palace**
- 75. | **pets paradise**

message from the dean

PROFESSOR CHRISTINE BENNETT AO

What a year 2021 has been already! I hope you are looking after yourselves and each other in these extraordinary times.

As you know I returned to the School as the Head of School of Medicine, Sydney in late March 2021, to work with the new National Head of School, Professor Gervase Chaney during the transition to a new National School structure, and to support the introduction of the new Faculty of Medicine, Nursing and Midwifery and Health Sciences under the leadership of Professor Aron Murphy.

Semester 2 is well and truly underway. Students across all years are knuckling down for the final stretch to the end of year exams. Our now not so new Year 1 students have settled in well, and Year 4 students are preparing for their final exams.

It is always special for our new Year 1 students to be welcomed to the School each year and this year was no exception. One of the School's special traditions for Year 1 students is the "Blessing of the Hands" which was held on 5 March and is a highlight on the academic calendar every year. This year the Most Reverend Bishop Richard Umbers, Auxiliary Bishop of Sydney helped us celebrate this very special event. We had a wonderful evening including some refreshments and drinks afterwards. Little could we predict that the "Blessing of the Hands" would become the last large gathering held on the Darlinghurst campus in 2021.

Another important date in the calendar in first semester was the International Women's Day breakfast panel that took place on 8 March at St Benedict's Hall at the Broadway campus. I had the pleasure of being invited to join the panel with some very inspirational speakers including Samantha Cook (former CEO of One Disease and current Co-Founder and CEO of Flave), Pauline Deweerdt (Director of Aboriginal Health Services at SVHS) and Rebecca Fry (Co-Founder of RYLA Oceania and President of the Rotary Social Impact Network). The breakfast was a big success and I was very proud to be part of such an inspiring group of women. A big thanks to MANDUS, the Student Association (SAUNDA) and the Nursing Society (NURSOC) for collaborating on this event.

Welcome back to our Year 2, 3 and 4 students continuing the journey through the medical program – somewhat differently because of the COVID-19 pandemic. I'd like to commend your patience and your ability to adapt and work flexibly during these challenging and uncertain times. While COVID continues to cause disruption to various aspects of the MD program, with your cooperation we have been able to meet curriculum requirements and have introduced a range of innovative approaches to address your learning needs during these various disruptions. I would like to especially thank all the tutors, Heads of Clinical Schools, Domain Heads and team members in the assessment and medical education unit that work tirelessly to ensure that we continue to deliver a high quality medical program despite these circumstances. I hope that the COVID-19 pandemic will in itself be a great learning experience for us all, including the importance of attending to our own physical and mental health and well-being. A reminder, as highlighted by Dr Carmel Mezrani, please make the time for your own 'wellbeing pulse check,' have a regular GP and make



your own health needs a priority. It's important to take a break from your studies and have time for yourself, family and friends. Enjoy a good fun read, learn a new recipe, head outdoors for a long walk enjoying the beauties of nature, and exercise regularly for a balance with your studies. We need to continue the sense of unity among staff and students that is very much a part of Notre Dame so that we are a constant support for each other.

I would like to thank the MANDUS Executive, led by Lachlan Morton, together with Van Nguyen, Adriana Ukalovich, Katarina Needham, Daniel Middleton-Clifford, Janet Mirzaei and Jolie Cullen for their amazing contribution this year. Thank you also to the many other members of the MANDUS team. These students have given enormous time and care to representing and supporting fellow students and the School in what has been a very demanding year and consistently challenging environment.

Every Year 4 student will have received a request from me to complete the 2021 Medical Schools Outcomes Database (MSOD) survey. The collection of this data is important for feedback to improve our medical program and benchmark our students' performance against other Australian medical schools. We would ask that you take the time to complete the survey to help future colleagues training.

For those students I have been able to meet in person, it was lovely seeing some of you during Rural Trauma Week in Lithgow and virtually either through my feedback sessions or bioethics sessions. We hope for different circumstances in 2022. I do continue to 'know' you all through our virtual connections and from our senior academics. We are proud and appreciative of your patience, resilience and professionalism. Thank you also for the leadership and positive role modelling to the community by being vaccinated. We are pleased to confirm that almost all students are well on the way to being fully vaccinated. Well done! Finally, as we progress toward end-of-year examinations, my advice is to stay focussed and up to date, work together well in your virtual groups, and speak to your tutors, Dr Mezrani or Year Coordinator if you have any concerns or need extra help. Eat well, exercise and get good sleep! Please stay safe and well and thank you for all you are doing to look after each other and the wider community. Enjoy the rest of the year, and make the most of every learning opportunity available to you.

Best wishes, and stay well.

Professor Christine Bennett AO
Head of School of Medicine, Sydney
Deputy Vice Chancellor, Enterprise & Partnerships

president's address

LACHLAN MORTON

What a whirlwind 2021 has been! I stepped into the role of MANDUS President on the solid foundations laid by those who previously held the position, and the teams that supported them. My intention was to focus on the fundamentals: to work with the University to resolve and improve upon student situations. I also aimed to make the Clinical Years more of a priority as they are often forgotten within a predominantly Preclinical-led MANDUS. Like a lot of the world, I was naïve enough to believe COVID-19 would have minimal impact on my year. Wow was I wrong! I had big plans to address the holes COVID-19 left and follow a "Back to Better" plan – a plan that would use the lessons learned from 2020 to better the old ways. Instead, 2021 had other plans for me.

Fees

After the end of exams, I was looking forward to a week of rest and preparing for the incoming year. Instead, I was thrust right onto the frontlines, with the University's Indicative Fees increasing by an unusual amount. Working with the School, the University Executive Management, and the support of an outstanding MANDUS Committee and the students, we managed to halve the fee increase. Special shout-out must go to MANDUS Secretary Katarina Needham for finding the 10% increase guideline which is now a policy.

Socialising the First Years

One of my big plans at the start of the year was to ensure the First Years would have adequate opportunity to get to know each other, as well as mix with the Second Years – something that was diminished in 2020 due to lockdown. With MedCamp and other annual events unavailable due to restrictions, we introduced socially isolated picnics with inter-year mingling (many thanks to the Social and Wellbeing teams). From all accounts these events were a success and opened some great friendships across the year groups that I hope continue to flourish.

Changing of the Guard

It was sad to see Professor Steevie Chan step away from the role as Dean of School of Medicine. I know many students had close relationships with him (particularly those in Clinical Years) and we wish him all the best in the future. It was quite a surprise then, when a familiar face stepped in to fill the space – Deputy Vice Chancellor Professor Christine Bennett. She has been a pleasure to work with and I will be interested to see what the next year brings.



WANDAvision

At the start of the year, MANDUS was approached to introduce an Obstetrics and Gynaecology subcommittee. This was debated amongst MANDUS and we were excited to trial it for a year. Although the committee is still pending constitutional approval at the AGM, Monica-Rose Van de Lücht has driven a tight ship and held many events under the WANDA banner. I look forward to seeing what the committee does next year following her excellent example.

The Elephant in the Room

With St. Vincent's Hospital losing student study rooms, and the Darlinghurst campus being inaccessible to both Preclinical and Clinical students due to waning COVID-19 risks, MANDUS worked with the School to open back up. As plans to enable access were beginning to take effect, the Delta struck (not Goodrem)... and here we are, locked within four walls, where time is but a construct and my PJs are now also my daytime wear. This story is more-or-less the last part of my year and most of the other subcommittees (and the University's), with big plans for Semester 2 being completely shut down or scaled back (RIP Medball for the second year in a row).

Sadly, 2021 turned my year into a reactive presidency rather than a proactive one. I must thank the excellent Executive who supported me and put me straight when I was led astray. I also must thank the teachers and staff of the UNDS Medical School (particularly Professor Brydon, Professor Kerridge, and Dr. Mezrani) who listened and worked with us to resolve unexpected issues. Lastly, thanks to the members of MANDUS. You are the reason we do all this, and I can't wait to see you on the wards with Dr. in front of your name.

Lachlan Morton
MANDUS President, 2021



1ST YEAR EDITION

HUMANS OF NOTRE DAME

My name is... Makaitaishe Idayi Pfungwa **but my friends call me...** Maka

I am... an international first-year medical student from Zimbabwe

The first thing you should know about me is... what my name means and how to pronounce it right

My favourite thing about (what I do) is... In terms of medicine, I am waking up everyday to fulfil my dream, it's crazy that I'm here. Work-wise, I get to learn a lot of new skills and work with some amazing brands and people.

My ultimate dream is to... be part of a generation that changes the trajectory of Zimbabwe, it's overdue.

My ultimate moment of indulgence... Watching the Real Housewives whilst eating sorbet is everything.

Something nobody knows about me is... I am overcoming my fear of eggplant, which was the result of the evil eggplant in an episode of Courage the Cowardly Dog

Introvert or extrovert? Introvert

A memory that defines me is... my mum always screaming "mwana wangu yeye" which is "my baby" in English at every sports race.

Someone I look up to is... Thomas Stefoulis in 3rd year, couldn't have made this med journey without him, always on speed dial.

Something I truly believe in is... God

Success to me is... being a good mum, one day.

I end every day by... praying

My star sign is... I don't believe in star signs.



WHILE YOU'RE HERE, MAKE SURE TO CHECK OUT MAKA'S YOUTUBE CHANNEL MAKAMD DIARY!



2ND YEAR EDITION

HUMANS OF NOTRE DAME

My name is... Anja Ebker-White **but my friends call me...** Anj, Anji, Nja

I am... currently filling these questions out.

The first thing you should know about me is... I love my morning run and watching the sunrise (but it usually beats me out of bed)

My favourite thing about working... in an Emergency Department is the comradery and the opportunity to connect with people in some of their most vulnerable moments.

My ultimate dream is to... grow my fur family with a dog and cow(s), have a house near the beach, a job I love, and spare time to do the things I enjoy most.

My ultimate moment of indulgence... reading a good novel on the beach with a long black in hand.

Something nobody knows about me is... I was born in Nepal! My first word was in Nepalese.

Introvert or extrovert? Introvert

A memory that defines me is... seeing the incredibly caring people who took care of my Papa in his last days and understanding what an impact it had on him and our family.

Someone I look up to is... My friend Kim, who is an Intensive Care Nurse Educator working on the frontline of the pandemic. Kim tirelessly, selflessly, and fearlessly turns up to work every day and somehow still has the me to listen to her friends and family little life dramas.

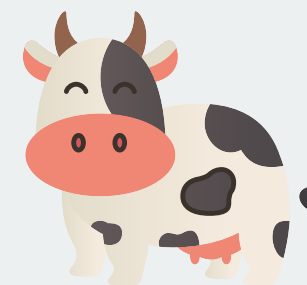
She has an energy that could mobile the masses, and during this pandemic, I truly believe it's made a big difference.

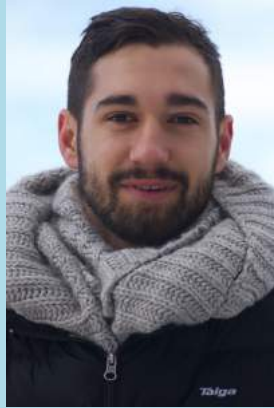
Something I truly believe in is... people don't care how much you know, until they know how much you care.

Success to me is... feeling like I have done a good job

I end every day by... having a coffee but calling it a tea so I don't feel judged.

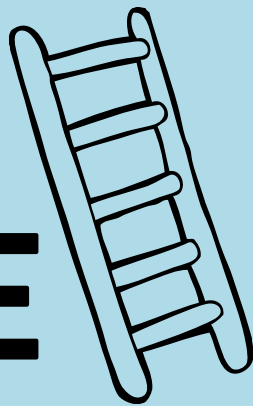
My star sign is... Virgo! No idea what that means though, sorry.





3RD YEAR EDITION

HUMANS OF NOTRE DAME



My name is... Thomas Stefoulis **but my friends call me...** Tom, Tommy, Tommo, Thombus, Ass (thanks Giselle...)

I am... Having my first (but certainly not last) coffee of the day

The first thing you should know about me is... If I see an instrument, I will probably stop what I am doing and (try to) play it

My favourite thing about (what I do) is... Alongside med, I work as a GAMSAT tutor and at a music studio. I think splitting my time amongst the three is incredibly rewarding -- I love how medicine offers constant learning opportunities but having the cathartic/creative element of music is a great escape.

My ultimate dream is to... Too many! I reckon it'd be awesome to be a ringside doctor for the UFC though

My ultimate moment of indulgence... literally anything with oreos/cookies and cream in general

Something nobody knows about me is... I own a ladder that may have the world record for most countries visited. Back when we could travel (ahhhhh), I remember 'borrowing' a fairly large ladder from some Parisian villa on a night out. Anyway -- my mates and I (stupidly) decided it would be a good idea to take it around the rest of our trip and lo and behold this ladder travelled to over a dozen countries and probably 30+ flights. From there it did a stint in NZ, Wales, Aus, and now lives in Montana, eagerly awaiting its next trip.

Introvert or extrovert? Extrovert!

A memory that defines me is... Since 2015, I challenge myself to pick up a new hobby or skill every month -- I was inspired by some TED talk I watched about how much you can improve with ~45 mins a day over that 30 day block. Anyway, when I

was living in Canada I was encouraged to enter a national film competition so I set it as the challenge. I worked tirelessly at this brand-new skill and come submission date I was so proud of what we achieved. Long story short I didn't expect us to even qualify, so I was in Japan at the time of the award ceremony. When I got a call that we won, I was over the moon. The reason that memory 'defines' me though is because it was the final push I needed to believe that I could make this career change from music into medicine and succeed -- and for that I am so thankful.

Someone I look up to is... My grandma. Not long after moving to Australia, her husband unexpectedly passed away, leaving her and three young children in a foreign country. She spoke absolutely no English, but her determination to provide a better life meant she worked tirelessly for her family. Funnily enough, on my first day of kindy there's a home video of her telling me that I'll become a doctor one day -- a career I never considered until after starting my career in music.

Something I truly believe in is... Always look for, and encourage, the best in those around you

Success to me is... a 300-day Anki streak. Lol jk (kinda). I suppose the goal posts change day to day, but I reckon... spending quality time with those I care about on a daily basis -- things external to medicine/music/etc

I end every day by... silently wishing I was better at music so I could do that full time LOL

My star sign is... Cancer



4TH YEAR EDITION

HUMANS OF NOTRE DAME



My name is... Alister Turbayne **but my friends call me...** Turbo

I am... Ready to leave medical school and live the JMO life

The first thing you should know about me is... I absolutely despise pseudo-science and absolutely love coffee

My favourite thing about working in medicine... meeting the most wonderfully strange people, learning about their lives, making a great bond with them, and then sticking an 18G in their cubital fossa.

My ultimate dream is to... Own a private practice with my brothers and work 4 days a week

My ultimate moment of indulgence... When I let 2 separate registrars, on different teams, buy me coffee within about an hour of each other

Something nobody knows about me is... St Vincents Hospital has selected me to assist them in purchasing all of their new echocardiography machines. Apparently, I have perfect cardiac anatomy and therefore I'm the ideal person to compare the different options

Introvert or extrovert? So introverted that lockdown has been a breeze.

A memory that defines me is... Getting the letter that said I was accepted into medicine. I often reflect on that moment with immense gratitude.

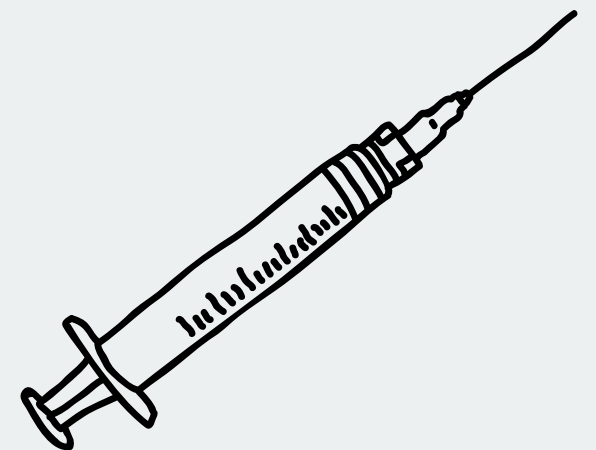
Someone I look up to is... My eldest brother, Alex. He was the first in my family to become a doctor and paved the way for me by setting the example.

Something I truly believe in is... Most of the world's problems could be fixed with better education at a young age.

Success to me is... Being content in one's self, regardless of extrinsic validation...and when the registrar uses your notes to do the consult handover.

I end every day by... Drinking herbal tea, listening to an audiobook, and ruminating on all the mistakes I made at the hospital that day.

My star sign is... The apparently neurotic one





PROFESSOR EDITION
DR SHANNON SAAD (HEAD OF CCS DOMAIN)

HUMANS OF NOTRE DAME



Is there a particular favourite thing you have about giving face-to-face lectures? It's definitely easier for me to convey enthusiasm that way. A lecture is meant to stimulate the enthusiasm in the learner; so it's meant to introduce some broad topics, and for me to try and get you to see it through my eyes... and to then stimulate you to go away and learn more... I think there is a chemistry that happens in a large group. It's like going to a good performance. It's where people come out, their spirits are lifted, they're engaged with the topic. I think especially with medical students it's about professional socialisation. I see you as my junior colleagues. It's my job to start taking you on that journey of professional socialisation. It's my job to talk out loud about how I think through some of the things I'm faced with. And then it's what's that lived experience of that look like? And I think that's the power of the anecdote, the power of the story.

Do you find any hidden utility in the Zoom environment of today? These days with telehealth, it does actually mimic what we're doing in the clinical environment. Apart from my academic work, I've also got a job with RPA virtual, which is a virtual hospital. At the moment we've switched over to looking after the health hotels. So, over 1000 people COVID positive and returned travellers who are in the health hotels in Sydney. We look after their healthcare needs. And that's all done remotely. I think the digital natives: you guys. You guys are the digital natives - like I'm a digital immigrant - the digital natives will find that they're much more at home with telehealth.

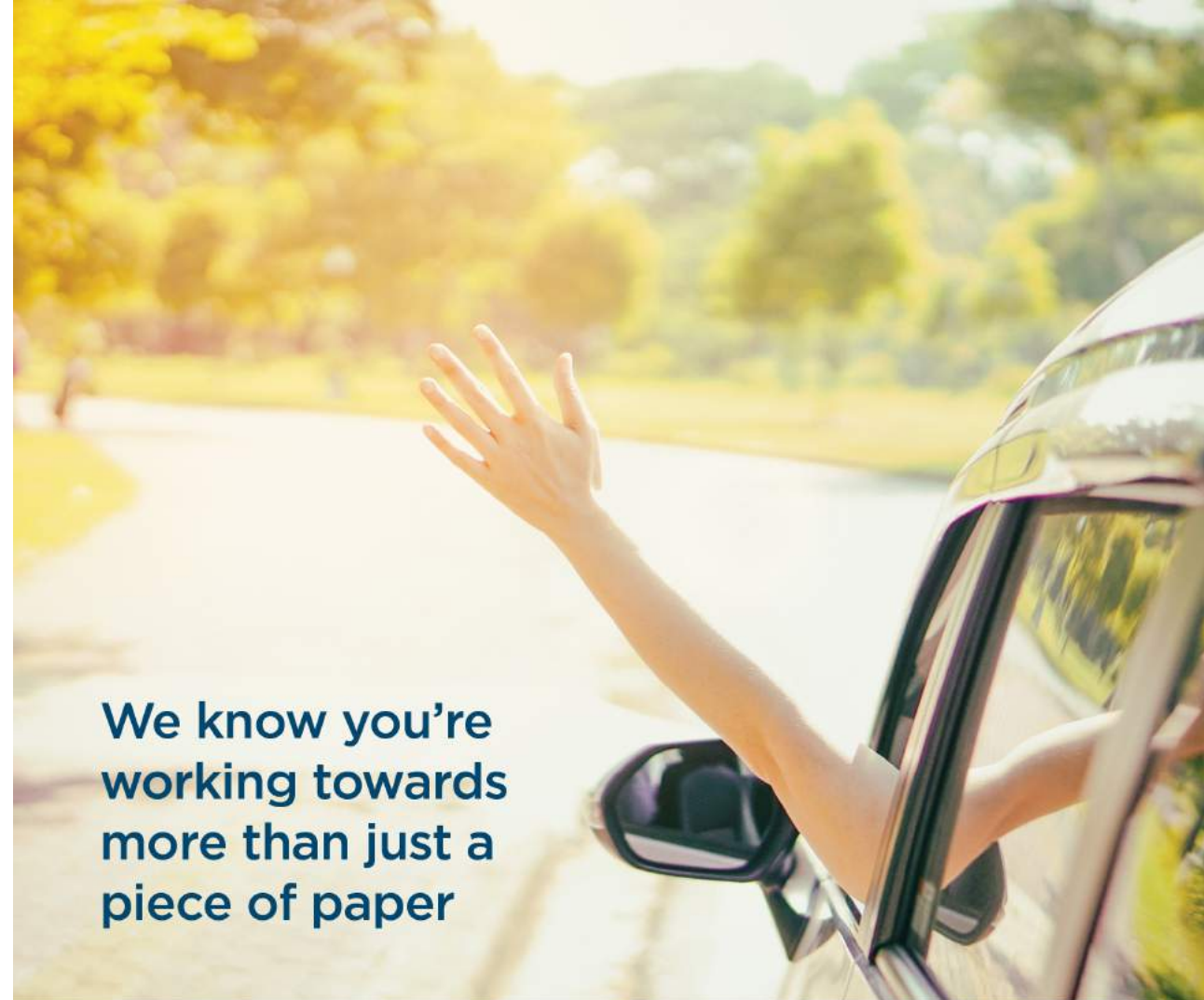
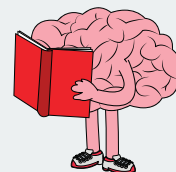
Do you have any advice for the first years? It does get very difficult in unstructured learning. In first year, the problem is coming from often heavily structured undergraduate courses into an unstructured PBL-type environment. I think the lesson for the pre-clinical students is to just keep revisiting concepts - and this is the concept of constructivism we have in education: lay down the layers. Don't try and do too much, you'll come back and do it again.

How about the older students? I think for the clinical years - the real trick is to remember what you're there for; and that you're just there to learn. It can be overwhelming, the clinical learning environment, because there's so much going on. But always the question you should be asking yourself is: 'What can I learn here?'. Prioritise your learning.

Any lockdown hobbies or projects? I'm a bit of a plant mum, as I've now been called. I do love a pot plant. I do find having greenery around really nice and refreshing. I've also taken to the TikTok noodle phenomenon. I've sent my husband off to Woolworths to buy three big packets of instant noodles, so I can try all the different TikTok variations.

What's something you try and do every morning, and what do you do to finish your day? The one thing I cannot do without in the morning-- the first thing I do in the morning is drink a very large glass of water. And I can't go to sleep without reading. I read every single night. I can't remember, since about the age of five, being without having a book to read.

Interview transcribed by Claire Ingram, M1



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Zoom Doctors

by MITCHELL READ

From this little chair I do sit,
Counting down the days of this zoom shit.
How quick this year has flown!
These dreaded cranial nerves not yet known.

I awake early from my slumber,
My heart and soul asunder,
For it is another bioethics day,
Opinions do shake the darling buds of May.

As the caffeine makes its descent,
Through my pylorus without rent,
I question my ambition,
Can zoom make thy physician?

Study medicine they said,
Unaware of what may lay ahead,
For where covid travels,
The true nature of madness unravels.

And so, I sit alone,
Here atop my mind forged throne.
Plenty of time to think,
Into lockdown I do shrink.

Lest not we forget our goals,
In troubled time we must stimulate our cerebral poles,
Think towards a brighter future,
When we may tie our first lifesaving suture.

Students I know how this may be met,
But please do not fret,
For when we can share a beer,
Peter Carroll shall cheer!



Eternity is an Awfully Long Time

by YOUSEF HAKIMI

AUTHOR'S NOTE: I wrote this piece on a train ride a few years ago. Although I've never been Christian and this story is entirely fictional, I think it raises a lot of common questions about faith that arise during adolescence.

The sun dips sluggishly behind a grassy hillock and I watch as the sky became a thousand brilliant hues of pink and aubergine. The very last dredges of daylight seem to linger behind for a while, almost as if forgotten about by the horizon. I sigh a deep sigh, my breath casting a fog upon the train window. As the train rounds a corner, sprawling fields and tangled woods slowly begin to fill my line of vision. Soon, tree brambles and thickets begin to cover the sky like a cloak, with only sporadic hints of colour seeping through the foliage to indicate the hint of a sunset that once was.

The train heaves to a halt, the conductor rasping a rehearsed list of indistinctive places from the microphone. I turn around in my seat to cast a glance at the half a dozen other passengers on my compartment. The booming sounds of what I believe to be a Nirvana song blasts from the headphones of the woman nearest to me. I think it might be 'Lithium'. I couldn't be certain though. I slump back in my seat and close my eyes.

I was nine and it was Christmas morning. My father had dragged me to the local church. I remember feeling cold; the sun fought so valiantly to establish its presence that day. It was the first time I thought about the idea of Heaven and Hell and it scared me. Eternity really did seem like an awfully long time.

"Bullaburra," calls the conductor. The woman blasting maybe-Nirvana stands up and strides quickly to the end of the compartment, leaving the train wordlessly.

I was thirteen and I found it baffling that my mother, a scientist, could believe in a God that defied both logic and reason. She told me science and religion can be compatible. Whatever.

"Wentworth Falls." I watch as two men in their mid-thirties rise almost simultaneously, the older of the two acknowledging my gaze by shooting me a puzzled sideways glance before stepping out onto the platform.

I was fifteen and I still remember the ringing in my ears when my father walked in on me reading 'Letter to a Christian Nation'. His brows were furrowed in anger and his fingers snatching greedily at the book. Its whereabouts are unknown to me even today. I began to read in the bathroom before my showers (always long, cold showers to wash away the guilt) and by night I was drowning in the words of Carl Sagan and Richard Dawkins.

"Leura." A youthful teenager, a pregnant mother, and an elderly man all stand to depart the train.

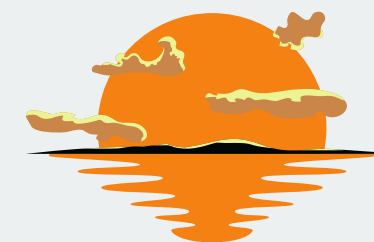
I was seventeen and my older brother asked me why I no longer went to church on Sunday. I told him I couldn't because it wouldn't be true to myself. I said that was important to me – being true to myself. He seemed upset but disguised it quite well with a look of pity. He thought I was just lost.

"Last stop, Katoomba."

I was now alone – the last passenger in the compartment. The train had reached its final destination. "Please alight here. This train will be terminating at this platform." I stand mutely, casting a momentary glance back at my seat to ensure I hadn't left anything behind though I knew I hadn't. I never do.

As I step out onto the platform, a cool evening breeze hits my face, and I watch, almost despondent, as the empty train gathers speed. And in that moment, as the head of the train disappeared into the tunnel ahead while the body of the train dragged along behind me, all I felt certain of was what lay before me. No beginning. No ending. Nothing except the eternity of now.

And maybe, just maybe, that was okay.





How Soon is Now? The Cascadia Subduction Zone

by ADRIANA UKALOVICH

The Boxing Day tsunami in Sumatra. Tohoku and Fukushima. The Pacific Northwest. Though all geographically distant, these three seemingly unrelated locations have one critical thing in common – they all sit upon subduction zones, capable of causing the biggest earthquakes known to humankind. If you're thinking the Pacific Northwest of North America seems like the odd one out, you'd be forgiven for this; given how quiet things have been in our lifetime. The geological stability of this stunningly beautiful region of the planet is on borrowed time, and that time is running out.

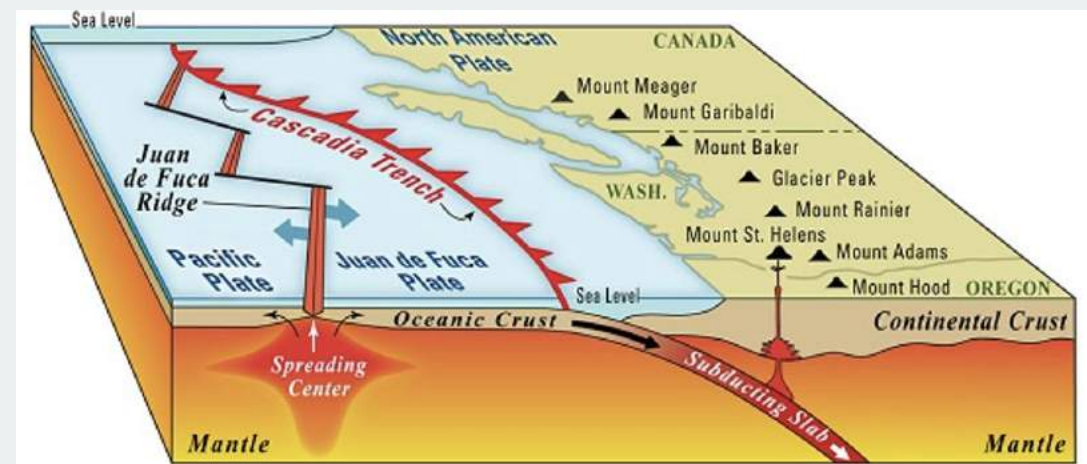
The Cascadia Subduction Zone runs from Cape Mendocino, California, to Vancouver Island, Canada, and is part of the renowned Pacific Ring of Fire. The North American continent sits on the North American tectonic plate, which is dense, geologically old, and heavy. The submerged Juan de Fuca oceanic plate is geologically very young, buoyant, and light in comparison. Where these plates meet, the North American plate pulls rank, and the Juan de Fuca plate slides underneath at a rate of approximately 4cm per year. Its journey is continuously under intense pressure and temperature as it melts away, forming molten magma beneath the continent, bubbling up to form a range of volcanos on the continental side – you may have heard of Mount St. Helens. Naturally, where plates are coming together, there's unfathomably enormous energy involved. Sometimes, plates will move underneath each other without causing too much fuss. Other times, say, two continental plates will come together, and because they're both so dense, large, and heavy, neither will capitulate and they'll push upwards together, forming the most spectacular mountain

ranges; this is how the Himalaya formed. Sometimes it's easy to lose scope of just how vast the concept of geological time really is. To demonstrate just a snippet of the scale of how long these processes have been at play, there is marine limestone on the top of Mt Everest – rock that was once on the ocean floor has been pushed up, over 8800m into the sky, because of two continental plates pushing together over hundreds of millions of years. The problem with the Cascadia Subduction Zone is that the young oceanic Juan de Fuca plate is slipping under, or subducting beneath, the North American continental plate at an oblique angle. And it's stuck. The Juan de Fuca plate is young and elastic, so it's coping with the build-up of stress well. But the North American plate is not. It is bulging at the edges, and one day soon it's going to spring forward, releasing this stored energy as an earthquake, sending its devastating shockwaves both directions, into the land and sea.

Relative to other subduction zones, up until recent times, the Cascadia Subduction Zone was thought to be rather geologically quiet, compared to the constant groans and grumbles of other places around the Ring of Fire, such as New Zealand, Japan, and Chile. Not once in recorded Western history had the Cascadia Subduction Zone caused a major earthquake. And so we thought it was safe. But in the late 1980s, the puzzle pieces fell together in the most deafening of ways. Living in one of the most geologically active regions on earth, the Japanese had been keeping records of tsunamis for over 1400 years. One tsunami stuck out, however – the Orphan Tsunami of 1700, called so because it had no identifiable precursor earthquake which had caused it.

A wall of water which came hurtling in, seemingly out of nowhere. Now transport yourself to the other side of the Pacific Ocean, to the Ghost Forest, a graveyard of leafless, barkless, dead western red cedars near the Washington coast. It had been assumed that gentle rising coastlines had gradually submerged these trees; upon investigation however, soil layer chronology demonstrated that these trees died from rapid submersion in seawater. So, it seemed wise to pay attention to the previously ignored stories of the Huu-ay-aht First Nations people, and the Makah tribe, which passed their spoken knowledge down through generations. These stories told of the land shaking, the water rushing out of the bays, and back in again just as quickly, drowning families and leaving unspeakable destruction in its wake. All these moments in history lined up, and frighteningly pointed to the same single moment in time. And so, it showed that on January 26 1700, a magnitude-9.0 earthquake struck the Pacific Northwest, as centuries of built-up energy from the subducting zone finally released, causing the land to drop, and the reverberations to create a wave half the length of a continent. The subsequent tsunami crashed into the coastline of Pacific Northwest. Ten hours later, the Orphan tsunami, which had been hurtling west as it

crossed the North Pacific Ocean, hit Japan. The Richter scale is a logarithmic scale that measures the strength of earthquakes. An earthquake of magnitude-9.0 causes the ground to shake for over five continuous minutes and is said to release the equivalent energy of 30 billion tonnes of TNT. By 1980, when the geological extent of the Cascadia Subduction Zone had been uncovered, the Pacific Northwest had become populated quite densely in parts, and buildings and structures had not been constructed to withstand the earthquakes and tsunamis that the ground beneath was capable of producing. With further intensive research, the geological record showed that in the past 10,000 years, 41 subduction-zone earthquakes had occurred: that's an average of one every 243 years. However, the range is broad; intervals between earthquakes varied from a few hundred years to over 1000. It is difficult to know when the next one is around the corner. What we do know is if the last Cascadia megathrust earthquake was in 1700, we are 321 years into the next cycle. In the effort of dedicated researchers and geoscientists who have committed their life's work to this field, we know that the odds of a 'big' Cascadia earthquake happening in the next fifty years are approximately 1 in 3.

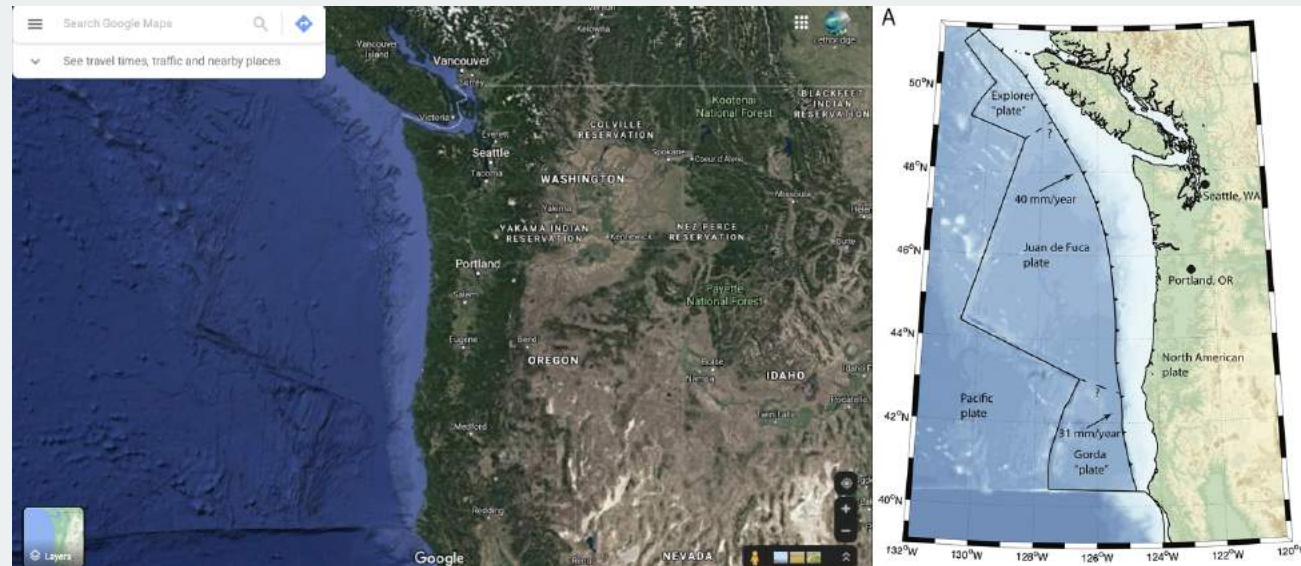


Schematic of the Cascadia Subduction Zone
USGS. Cascadia Subduction Zone Great Quakes. U.S. Geological Survey, accessed from: <https://www.kids-fun-science.com/cascadia-subduction-zone.html>

With many towns, and major cities such as Vancouver, Seattle and Portland positioned along the subduction zone, it's frightening to know that it's not a matter of 'if', but rather 'when'. Whilst the knowledge of an impending, potentially devastating earthquake has since informed new engineering design plans throughout the Pacific Northwest, for some places, the outcome will be far worse than others. Many structures throughout the Pacific Northwest have not been retrofitted or upgraded to current seismic standards. In Washington state, 200 of the state's K-12 schools are within a mile of an active fault line. Some 37 of these schools in Washington are positioned not only within the area of impact of the earthquake, but also the inundation zone of the tsunami. For some places, such as schools in Newport, Oregon, gallons of water, long-life food, tents and tarps, blankets, hygiene products and rescue kits sit in supply caches on the premises, to enable students and staff survive stranded for an extended period of time.

Hospitals, emergency services, communications, water, and electrical supplies will be irrevocably affected. Emergency response will be slow, especially in rural and coastal areas, largely due to ground failure, structural damage, and in parts tsunami flooding affecting roadways and bridges. As state governments continue to distribute seismic grants to shore up the ability of towns and cities to withstand the earthquake and tsunami and prepare for disaster, faith hinges on the hope that these actions will be enough to change the outcome.

This is merely scratching the surface (horrible pun, sorry) of the remarkable Cascadia Subduction Zone, and I hope you're interested in unearthing (not sorry) more about this. If you're interested in reading more, I suggest the article *The Really Big One*, written by Pulitzer Prize winner Kathryn Schulz for *The New Yorker*, listed in my references – no prior geological knowledge necessary; the best piece of feature writing I've read on this. Thanks for reading!



Screenshot of Google Earth Satellite (6 August 2021) compared to Birdseye View Schematic of the Cascadia Subduction Zone

Schematic from: Bartlow N. *Faults Slip Slowly in Cascadia*. *Temblor*. March 17, 2020. Accessed on August 6, 2021. <https://temblor.net/earthquake-insights/faults-slip-slowly-in-cascadia-10729/>

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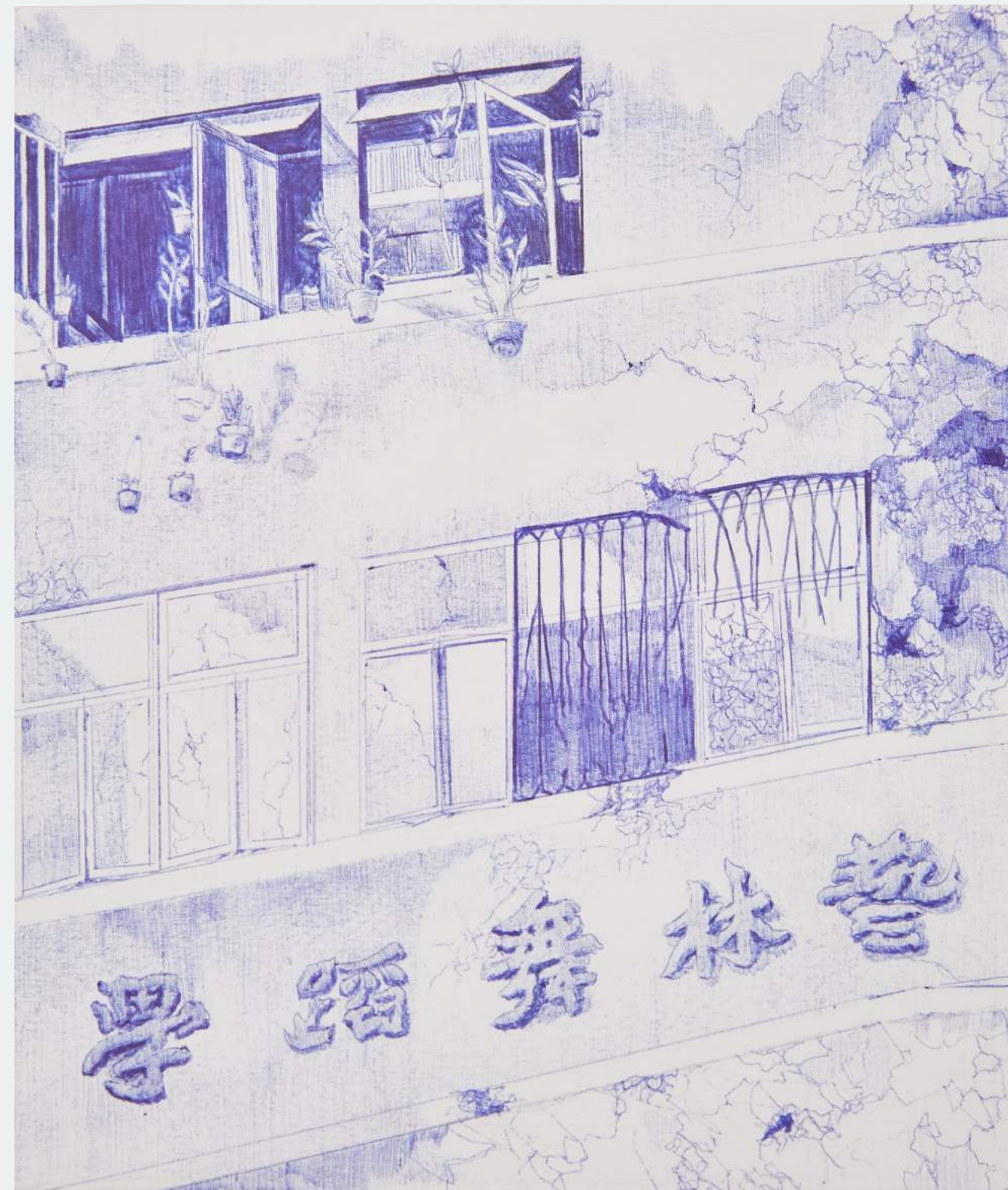
Mark In Time, 2020

Ink on Paper

The act of pen marking paper is to me a deliberate one that echoes Daoist philosophy about the imprint of being and beings. The Ink on paper cannot be erased, and in this transference of energy and my involvement in the act of marking it, both I and the paper have changed from this moment in time.

This brings up questions about the consequences of not only my imprint, but the larger imprint we as a society leave on the world that we inhabit. Daoism explores the notion that in the interactions we have with nature that surrounds us, everything is constantly in flux, in a continuum and always changing. I cannot help but wonder how nature will change in response to the destruction wrought by man, and as we make marks in this world that cannot be erased, how we too will change.

In the current climate this evokes in me feelings of loss, despair and transformation, visually manifested in melancholy and quiet shades of blue ink on paper. Doorways to abandoned towns, coins from ancient civilizations that now cease to exist, silent cities evacuated in industrial accidents, and societies ruined by colonisation, are to me a culmination of life, nature and the breath of history. With a touch of futility each line building on another becomes an omen of relentless progress, whether it is for better or for worse is up to the viewer to contemplate.







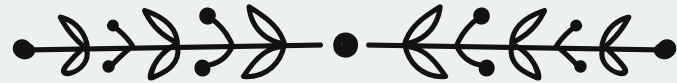


A Beginner's Guide to Medical Podcasts

by TALIA HUNTER-SMITH

If you're an auditory learner like me, going on too many walks due to COVID, or want something to listen to on your commute; then look no further! I have you covered for all your educational podcast needs. All of these can be found on Spotify and Apple Podcasts.

Podcasts made up around 50-60% of my study in second-year and I did much better in second-year than first. So, if that's not a glowing review I don't know what is!



I apologise as most of these are geared for Year 2 +. Unfortunately, the nature of medical podcasts are that they go through conditions in a clinical sense, and often neglect pathophysiology and anatomy. It's more clinical presentation to differentials to investigations to management. But that's really the best part.

Humerus Hacks - Years 1 + (mostly Years 1-2)

1 Where do I start with my love for this podcast? Everyone who knows me knows I love this podcast. Its two girls originally med students from Monash making the greatest study podcast of all time. Very good for exams, goes through conditions AND pathophys which is rare for medical podcasts. Even gives exam tips and tricks. Their glomerulonephritis episode is amazing.



RCP Podcast - Year 2 + (maybe 3)

2 From the Royal College of Physicians so you know it's legit, but surprisingly not too complicated! love this podcast. Goes through a condition, through an example case. Varied because they get an expert in that particular field to co-host and they vary. But good, clear, well educated and uptodate. More of a clinical approach less pathophys although depending on the episode some do have quite a lot! It's english so I'm hoping it is more relevant than american information.



Surgery 101 - Years 2 +

3 For all those surgically inclined ;) . Goes through conditions that then require surgery. Is very easy to follow and a great study tool for learning surgical conditions like bowel obstructions. Might be more useful for 3-4 year because we do surgical rotations but good for second year too!



The Abnormal Psychologist - Year 1 +

4 I say Year 1 because it's very easy to understand. But we don't do a lot of psych in Years 1+2. Goes through the fundamentals of presentations of classic psychiatric conditions. Doesn't do a lot of treatment beyond "therapy" or "mood stabilisers". I am interested in psych so I binge listened to all of season 1 in like 2 days. Loved it, applicable to life, everyone should know the basics of psychology/psychiatry.



Zero to Finals (Medical Revision) - Year 1 +

5 Short but sweet on all the standard stuff. Honestly I played a few in repeat because it's very robust information. He does a killer youtube channel as well. Highly recommend the murmurs video.



BMJ Best Practise Podcast - Year 2 +

6 Yet again goes through conditions, and maybe an example case. They interview a specialist for each topic so it really depends on the episode for what level and who it's aimed at. But most of them are a good level to get an overview of clinical presentation, investigations and treatment. Some will go into pathophys, some won't. But interesting nonetheless



MiniMedPods - Year 1 +

7 Audio quality isn't good but it's a great med student focused podcast. All of it is super relevant and well spoken. Episodes are a decent length around 15 mins. It's good to get some earlier year focused ones. Talk about exams and osces as well. They're a new podcast and I'm excited to see more!



MedConversations - Years 2 +

8 A solid amount of time on all the standard conditions. I spent a lot of time listening to these. Even if you don't get all the details you pick up phrases and buzzwords.



The Clinical Problem Solvers - Year 3 + (maybe 4 +)

9 A fascinating podcast that you may need to know a bit about conditions before listening. Goes through an interesting case and how they figured it out. I got lost a lot of the time. Sometimes the most you'll get out of it is that a condition exists. But hey that's something right?



Straight A Nursing - Year 1 +

10 Is a nursing podcast so it goes through the very clinical side. Practical side of actually taking care of patients. But also touches on some core concepts. Very clear, easy to understand, good to listen to for osce's as well.





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COOKING WITH SERENA

Vegan Edition

Eating a plant-based diet has many benefits for both the individual and for the planet. As someone with an interest in both sustainability and health, I encourage everyone to try eating more plants and less animal products. One way I did this was by running a #MeatFreeMeal competition during the month of May, via the @GloablHands Instagram page.

We had over 60 entries into the competition - that means 60+ meat free meals were made and submitted to Code Green and Doctors for the Environment Australia. The winner received a \$50 vegan restaurant voucher! Recipe inspiration was posted every Monday, so check it out for some great recipe ideas.

Lots of people assume that following a plant-based diet is boring and bland, but it doesn't have to be. Here are some of my personal favourite vegan recipes. Try them and see for yourself how delicious and easy it can be!

Serena Hope

Second Year Code Green & DEA representative



Pumpkin and Tofu Tikka Masala

Serves 4

Prep 10 mins

Cook 35 mins

Ingredients

- 800g butternut pumpkin cut into 2 cm chunks
- 300g firm tofu cut into 2 cm chunks
- ½ cup tikka masala paste
- 200mL light coconut milk
- Brown rice
- 200mL vegetable stock

Method

- Lightly spray non-stick, lidded frying pan with oil and heat over medium heat stir-fry pumpkin for 5 minutes or until it begins to soften.
- Add tofu and curry paste and stir fry for 3 minutes. Add stock and coconut milk. Stir to combine and bring to simmer. Cook covered for 20-25 minutes until pumpkin is tender.
- Meanwhile, cook rice according to packet instructions.
- Remove lid from curry and, using a wooden spoon, press 8 of the pumpkin pieces against the side of the pan. Stir the mashed pumpkin into the curry to thicken the sauce, then season with salt and pepper to taste.
- Serve curry on a bed of rice with green herbs as garnish.
- TIP: add peas into the curry after mashing pumpkin to increase vegetable content. Can also be served with naan bread if desired.



Image Source:
One Green Planet (<https://www.onegreenplanet.org/vegan-recipe/tofu-tikka-masala/>)

Tasty Vegan Chocolate Cake

Serves 8

Cook 1 hr

Cake Ingredients

- 3 cups all-purpose flour
- 2 cups sugar
- ½ cup cocoa powder
- 1 teaspoon salt
- 1 tablespoon baking powder
- ½ cup coconut oil
- 1/3 cup maple syrup
- 1 ½ cups almond milk
- (or other milk substitute)
- 2 teaspoons cocoa powder
- Frosting Ingredients
- 1 cup vegan butter
- 2 cups powdered sugar
- 1 cup cocoa powder
- 1 teaspoon vanilla extract
- ¼ cup almond milk (or other milk substitute)



Image Source:
Tasty (tasty.co/recipe/vegan-chocolate-cake)

Method

- Preheat oven to 190 degrees Celsius.
- Add flour, sugar, cocoa powder, salt and baking powder to a large mixing bowl and whisk to thoroughly incorporate, making sure there are no lumps.
- Once the dry ingredients are thoroughly mixed together, create a small well in the middle and add in the coconut oil, maple syrup and almond milk. Continue to whisk until a thick, lumpy batter forms.
- Grease the inside of two 9-inch (23 cm) cake tins with coconut oil or non-stick baking spray and add about 1 teaspoon of cocoa powder to dust the inside of the pan.
- Pour half of the batter into each of the cake tins and bake them for 25-30 minutes, or until a toothpick comes out clean.
- Once the cakes are finished, transfer then to a cooling rack for 5-10 minutes before removing the finished cakes from their tins.
- While the cakes are cooling prepare the frosting. Add vegan butter, powdered sugar, cocoa powder and vanilla extract to a mixing bowl and whisk using an electric hand mixer until a smooth and glossy frosting forms.
- Add almond milk and continue to mix until incorporated.
- Choose one of the cakes to be the base cake and level it off.
- Place a small amount of the icing in the middle of your serving dish and place the base cake on top.
- Using about a cup of the icing, generously coat the bottom layer of the cake using a spatula.
- Once the icing is spread out evenly, place the second cake on top and continue to frost using the rest of the icing.
- Refrigerate for 30 minutes before serving.



Ma dove dovremmo mangiare – but where should we eat?

by THOMAS ELPHICK

Few things in life are better than pizza. Even getting into medicine, still only a close second. Sydney is arguably one of the cities that boasts the best pizzas in the world. With our large Italian population and high-quality produce, we do a pretty good job. I have lived in Sydney all my life and I have made it a little passion project of mine to find the best pizzas in all of Sydney. In this article, I will list my top 11 (why be limited to 10) pizzerias of choice.

Vacanza Pizzeria Surry Hills

Surry Hills royalty. You'll end up there more than once and you know it'll always be good.

Crust: The outer rim of the crust is beautifully chewy and fluffy, but the middle is a bit too thin meaning lending itself to a saggy slice.

Toppings: Perfectly acceptable but lacks pazazz.

Authenticity: Pretty on point but nonna might have a few pointers.

Vibe: Bustling. This place is packed full to the brim on Friday and Saturday nights.

Date night: Intimate and cute. There's plenty of bars and pubs to visit within walking distance making this an ideal option for a first or fourth date.

Cost: Moderately priced. Around the \$25 mark.

BYO: Yes – a huge drawcard in my opinion.

Drawbacks: Short seating times. If you don't have more than 3 people, you are limited to a one-hour seating and they're pretty strict on this. The hour includes ordering time and service.

Via Napoli Surry Hills/Lane Cove/Hunters Hill

An absolute establishment.

Crust: A true crowd pleaser. It hits all the right notes and is really moreish.

Topping: A Godfather style infusion – the best of both Italian and American flavours.

Authenticity: Can stray from true pizza italiana but still gives you that feeling of being in the back streets of Rome.

Vibe: Celebratory. As soon as you walk in, you feel like you're at a reception for a wedding. Often booked for

larger gatherings, this place is full of cheer. Similar vibe at Lane Cove. Quieter and more restrained at Hunters Hill.

Date Night: This place is good for a second or third date but probably not for a first. If you manage to book on the same night as a larger party, you might struggle to hear one another.

BYO: Used to be but sadly not anymore.

Cost: Singles are around the \$24 mark, half-metres are \$45 and full metre pizzas \$60. Be warned, frequenter flyers of the Via Napoli chain have complained of an under-cooked middle for the full-metre pizzas.

Drawbacks: Loud and bolshy at times. Watered down cocktails.

Westwood Newtown

The new kid on the block, Westwood is already a destination restaurant for many.

Crust: Really good and approved by nonna.

Toppings: Great but overly topped – sort of like they hired someone who hasn't grasped the concept of restraint.

Authenticity: Definitely got all the nuances of good pizza making but something is missing.

Vibe: Yo-pro (young professional) minimalist with clean aesthetic.

Date night: Just off the beaten track so a great option as a starter for what else is to come.

BYO: Yes.

Cost: Varied. From \$20 - \$32.

Drawbacks: Small venue which makes tables competitive.

Gigi's Pizzeria Newtown

This restaurant is completely vegan. That's right, 100% vegan! Honestly, if you hadn't been told, you would never pick it.

Crust: I don't know how they make the crusts so good. They're everything you want and more – chewy, not overly oily and tender. Also, they don't dry out quickly which is always a hassle if you leave a pizza uncovered for more than 20 minutes.

Toppings: Unlike anything you've ever had before. Such interesting options such as cauliflower or radicchio and walnut.

Authenticity: I'm conflicted. Italians worldwide are revolting because never in history has the walnut been allowed on a pizza but these pizzas are too good.

Vibe: Inner-Westy rustic cute. Popular and #instagrammable.

Date night: Highly recommended on a less busy weeknight. Long queues on the weekend could mean you are having to make awkward small talk if you choose to for a weekend -night date.

BYO: No

Cost: \$26 on average.

Drawbacks: Long queues with no option to book ahead.

Lucio's Darlinghurst

A great choice if you're looking for a truly authentic experience without the argy bargy crowd of other places.

Crust: Oily goodness and well above average.

Toppings: Such well-balanced flavours and stays true to tradition.

Authenticity: This place is one of the 5 places in all of Sydney to have the AVPN – Associazione Vercae Pizza Napoletana (Neapolitan-Approved True Pizza) – stamp of approval. Granted, the owner Lucio De Falco, is the vice president of the AVPN Australasia but the pizzas never fail to deliver. You will be hard pressed to come by anything as good as these pizzas, even in Napoli.

Vibe: Small, cosy and tucked away. The restaurant is tucked away in the corner of a piazza-esque part of Darlinghurst and compliments the fantastic flavours with a hint of alfresco dining.

Date night: Very appropriate.

BYO: No.

Cost: \$24 on average.

Drawbacks: On a quiet night, it's really quiet and can be a bit of vibe killer. Also, situated on a bit of wind tunnel so check your weather app before booking.



Frankie's CBD

Will always end up there after a night out.

Crust: Definitely not Italian but satisfying.

Toppings: Truly slutty and delicious.

Authenticity: As Italian as I am.

Vibe: Best consumed after 10 rounds of their infamous apple vodkas.

Date night: Maybe later in the night.

BYO: Nope.

Cost: Can be as low as \$1 per slice on special nights. Usually, \$6.50 a slice.

Drawbacks: All of the same pitfalls that you'd expect from a pub.

Pizzeria da Alfredo Glebe

Not an obvious choice but would definitely recommend trying at least once.

Crust: Dreamy. Like biting into a chewy cloud.

Toppings: Classic and well executed.

Authenticity: Yep. Right on the mark. Not a foot wrong.

Vibe: A mix of family oriented and Inner West yuppie.

Date night: A fine option if you're in the area. A bit more of a show-off location if you're wanting to look outside the usual favourites.

BYO: Yes – but there is a \$10 corkage fee per bottle. Practically daylight robbery.

Cost: \$23 for singles, \$45 for half-metres and \$75 for full metre pizzas.

Drawbacks: Bad acoustics. You can be awkwardly seated adjacent to the main walkway which means your elbows are constantly bumped.

Bar Reggio Darlinghurst

Known and loved by all. The 'go-to' for large group gatherings.

Crust: Bit flat and lacks fluffiness.

Toppings: Yummy pizza americana.

Authenticity: While everyone working there is absolutely Italian, hand gestures and all, the crime against pizza itself should be investigated by the nonna brigade.

Vibe: Raucous

Date night: Nah, there are better options for a date venue.

BYO: Yes and \$2-3 a head.

Cost: \$20

Drawbacks: Super loud – en par with Italy's Euro Cup win. Always full.

Bella Brutta Newtown

Fun and a little bit fancy. It's in my list of restaurant rotations.

Crust: Sumptuous – full bodied and bellissima.

Toppings: Interesting twists on old classics. Some are more brutta than bella, in my opinion.

Authenticity: Box ticker.

Vibe: lively and enjoyable. Outdoor patio is a great summer option.

Date night: Highly recommend. At the top of King St there more pubs and bars are located.

BYO: No

Cost: Higher end - \$29

Drawbacks: No obvious drawbacks except for the cost.

Rosso Antico Enmore

Happy I went there. Would go again.

Crust: Probably the best part. Dense and makes a statement.

Toppings: Fine and delicious. Not party dropping.

Authenticity: Pretty good. Crusts are excellent but the toppings are a little underwhelming.

Vibe: Laid back and chill. Rome-styled interior.

Date night: A good option. Quiet and cute. A stack of places to head out afterwards. Close to the Dendy cinemas.

Cost: Well priced. A pizza is about \$22.

Drawbacks: Cannot book online so you may or may not be able to get a table.

Moretti Ristorante Leichhardt

Major contender for the top spot in pizza hall of fame.

Crust: Sent from the Italian heavens. There is no faulting this crust. It gives everything you want and need from a pizza.

Toppings: Having consulted an Italian on the menu, this is truly what is served in Italy. One major mistake is the addition of an egg on the capricciosa which to this day is still a mystery to me as to why it has been added.

Authenticity: *Chefs Kiss* Being situated in the heart of Sydney's Italian quarter, this place does do vera pizza italiana. Also, I have never met someone who works there who is not 100% Italian.

Vibe: A mixed bag – Italian families dine, and the Leichhardt locale all dine here.

Date night: I wouldn't recommend this for a first date, maybe if you're trying to show off your local Sydney knowledge. It is conveniently placed under the Leichhardt Palace Cinemas which hosts many of the film festival seasons. Can make for a great addition to a cultural night out.

BYO: Thankfully yes and is \$2 corkage per person.

Cost: On average, pizzas sit around the \$24 mark.

Drawbacks: A bit out of the way but well worth the journey.



Portraits of a MED1 Zoom

by DAPHNE MCLEOD





Why Radiography?

by SUKRITI JETLEY

The three most common things I say every day at work include:

1. Could you please remove your clothes, leave your underwear on, and put on a gown with the opening at the back
2. Breathe in, hold your breath, breath out
3. Sir, gown with the opening at the back please...

Although it may not seem like it to many of you, the world of radiography is a beautiful place. Chest x-rays are the bread and butter of what you will see in your day-to-day life as a doctor, and you become pretty damn good at them. A lateral knee x-ray is what we radiographers compete with each other for – no repeats! The next best thing is your CT scan, a donut ring scanner which gives you a holistic view of the patient and what is going on internally. Incredible images at incredible speeds. IV contrast, although helpful and necessary for diagnosis, means you must stay alert and vigilant. You'd be surprised at how many people have allergic reactions or are in renal distress. The number of times we have had to call the ambulance for anaphylaxis reactions and inject with adrenaline is one to none.

Passionate in mammography, my job entails me to gain as much breast tissue as possible, compress it and ensure a decent image is acquired for reporting. But more than that, it is about watching the patient's demeanour, their sense of fear, understanding why they have come in and give them support and empathy when they tell you that their great aunt or sister was diagnosed with breast cancer. Many women are so scared that as soon as they walk in, have a look at the machine, they begin to break down and become totally vulnerable. In a space of total uncertainty, they place their trust and surveillance in your technique. Sometimes the underlying fear is not so much the result, but past history and experience.

The compression of the paddle...it's not a pleasant thing to have done. Before I even touch the patient, I run through the steps of what I will do and how the machine

will move – this allows for a little bit of power to proceed to the woman stuck in the machine – she knows what to expect. I make a joke, they laugh (sometimes) and we begin undressing and getting ready with positioning.

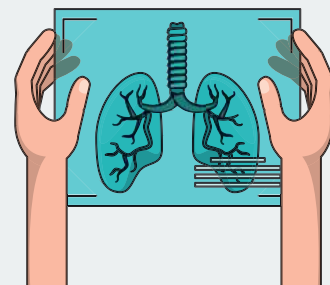
We place pressure on the breast, not to “pancake” it but to gain as much value as possible. I keep chatting – it helps them relax. The more tense the person is, the harder it is to manipulate the breast and get to the pectoral muscle.

I will never forget the time a patient came in so tense and scared, that as soon as we had compressed her breast and I was taking images she fainted, falling to the ground with a big thud. I immediately called for help, grabbing the radiologist on site and addressing her syncope state. She recovered a few minutes after, beads of sweat running down her head and she asked, “Did we get the x-ray you needed?”.

The world of MRI is another weird and powerful wonder, try lying in a narrow tunnel for 30 minutes without moving – it's not as easy as it looks folks. The physics of it is constantly outstanding, with imaging of exceptional resolution and detail.

The shades of grey although difficult to understand at the beginning, becomes the basis for identification of pathology and understanding how symptoms can manifest into disease.

When you perform a scan, before anyone else, you are the first person to acknowledge disease and recognise anything sinister. It is incredible fascinating, constantly interesting and at times a deeply emotional part of medicine.



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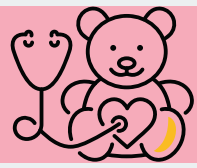
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My Youngest Patients

by ANEI THOU

Going into my first clinical year was nerve-racking, to say the least. At the beginning of the year, I had no expectations of how anything remotely in a hospital worked or what would be required of us as medical students. However, my fears were quietly and surely assuaged as the year progressed, and I got into the swing of what placement life entails. It's an interesting year for many reasons. One of those reasons is the multitude of learning that there is to do and the feeling that you are part of a multidisciplinary team.

A rotation I really enjoyed was paediatrics, which was also challenging. The patient is not ultimately just the child in front of you. The parents are just as important in the management of a child. I noticed that parents often come in and are worried about their child/ren, and sometimes they need reassurance more than anything. Assurance that they're doing the right thing: for new parents and parents who have gone through this before. Assurance that the paediatric team will do everything they can with their little bubs.

Additionally, when a patient comes in, you have to consider the environment and social context in which the family has come to the hospital. What specifically brought them in today? What's going on at home?

Does this influence the presentation of the complaint? And often, the presenting complaint isn't the underlying reason for showing up at the hospital. Nutting this out and slowly unpacking these issues does take considerable skill and manoeuvring. A skill for which I only just touched the tip of the iceberg.

I also saw a very interesting case of nephrotic syndrome. Nephrotic syndrome is pretty much a condition where you have significant amounts of protein in your urine, which causes generalised oedema all over the body. This young patient had all the expected cardinal symptoms of hypoalbuminaemia, proteinuria and generalised oedema. I remember studying about this in my second year. But actually seeing it on the children's ward ameliorates learning and consolidation.

I examined the young boy, and it seemed that I was adding an infinity stone to my gauntlet of paediatric knowledge with every identified symptom. Pitting oedema? A stone. Oedema of the abdomen, another stone. Low albumin and lots of protein in the urine? Why not? Add some more stones. The gauntlet of nephrotic syndrome was now complete!

The consultants on my paediatrics rotation were just as interested in the medical students as they were in their chosen specialty. One week after a tutorial, a consultant and I were both taking the elevator. I was asked by the consultant, "why medicine?" The question of all questions; a question that all medical students grapple with. Any medical school interview station has this loaded question. Every time I think about why medicine, just as I did before I replied to the consultant, it reinforces and strengthens the pull of my calling. I told the consultant about my country. I told them about my contribution to the puzzle of a better life for people who have known disruption, death and dissolution of life in their home country. And I told the consultant about how we should be working towards the world how it should be, not working in it as it is. How it should be is adequate medical access to all people. That's my 'why' in this pursuit.

My clinical placement year so far has been so formative. It has taught me about the nuances that come with the art of doctoring. And how this isn't a skill that is learnt immediately when you get into a clinical setting; it takes years and years of continued practice and evolution. Eventually, it appears seamless, but behind closed the art of doctoring manifests itself in how we take patients through their clinical problems. How we can improve their knowledge about their health and be active participants in their own right. There are many things to look forward to in the clinical years; just be open to opportunity and willing to be a sponge and learn all you can.

Portions of this article have been adapted from 'My Youngest Patients' from Anei's blog 'Sudo-Australian, MD'.



Women in Surgery

by NANCY WEI

Picture a surgeon. Now I don't want to assume anything, but I'm sure a lot of you pictured a middle-aged Caucasian man probably in blue scrubs. And you're not wrong to think that. Historically, surgery was a field dominated by Caucasian males in Western medicine, and much of the paternalistic overtones still exist today. More than 50% of medical graduates are female, yet women currently represent only 12.8% of surgeons in Australia, making it the specialty with the lowest proportion of females [1]. We are part of the generation where we are seeing a (rather welcome) shift away from these figures. And this is what the Women in Surgery event held at UNSW earlier this year was all about.

The conference was for all female-identifying medical students in NSW who are interested in surgery. It was a full day of talks, panel discussions, a luncheon, and various surgical skills workshops such as suturing, diathermy, stapling, and laparoscopic skills. They were great activities to introduce us into the exciting world of surgery.

We heard from two exceptional key note speakers; Dr Payal Mukherjee, an ENT surgeon and chair of RACS NSW, and Dr Eva Nagy, and oncoplastic breast surgeon. We also heard from an extended panel of female surgical fellows from various subspecialties including cardiothoracic, orthopaedic, and plastic surgery.

When discussing how to get onto a surgical training program there is always talk about networking, finding a mentor, how to build your CV, how much research do you need to do etc. etc. However, when discussing how to get onto a surgical training program as a woman, there are things unique to this conversation. A reoccurring topic from the speakers was how to juggle having a family as a surgeon, when or if you should have children, and how to deal with discrimination and sexism in the workplace. These are the hurdles known to all women who want to pursue surgery as a career, and they can be

extremely difficult to overcome. Despite all the challenges, the speakers all left us with positive impressions. They were able to pursue a career they are passionate about while maintaining their lifestyle and relationships outside of work. It takes a lot of commitment, perseverance and sacrifice, but when we support and uplift women, anything is possible.

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Surgeons, R. A. C. o., 2019. Surgical Workforce 2018 Census Report. [Online] Available at: <https://www.surgeons.org/-/media/Project/RACS/surgeons-org/files/reports-guidelines-publications/workforce-activities-census-reports/2018-surgical-workforce-census-report.pdf>





Day in the Life of a Third Year

by DEYAN MOMIROVSKI

In first and second year of medical school, you often hear about the clinical years from senior students about how much longer and more difficult they are. Personally, it was a shock to learn this in my first year, as I already felt swamped by the requirements of the preclinical curriculum: PBL, CDT, CCS, lectures, and labs all while attempting to balance a social life, and extra-curricular activities. I wish I can sit here and write about how this information is a fallacy or that the experience isn't so bad, but in actual fact it is true. Currently, I am in 3rd year and it is challenging. But in saying this, 3rd year is the year where those gaps in your knowledge, or that information that you didn't understand in PBL start to make sense. What's more exciting however, is you finally start to feel like a doctor (partly because you get to hang your steth around your neck all day :P).

My current rotation is centred at the Geriatric Evaluation and Management (GEM) ward at St Vincent's Melbourne. My day typically starts with a 5:45am wake up time. After making myself look presentable and packing my bag, I often stop for a take-away coffee before boarding the train at 6:45am for my hour-long journey into the city. You may be thinking, "wow Deyan, you live so far!". Yes, yes I do. However, my rationale behind living at home this year was to save money after living independently in Sydney, and of course, mum's cooking! After making it to the hospital, ward rounds with my team usually begins at about 8am. Ward rounds during a medicine rotation can be quite long, but a rather enlightening experience. There is usually a careful consideration for each patient's progress, medications, and plan, and this is where the bulk of the learning as a medical student occurs. After seeing the patients the doctors wanted to review that day, the morning is capped off with a paper round and of course, coffee as a team (are you really a medical student if you haven't already had 2-3 coffees before midday?).

I usually spend my afternoon in a myriad of different ways, depending on the tasks outlined during our paper round in the morning. But usually, we tend to get new patients every day that need to be admitted. So, I spend

the afternoon helping with admissions which includes taking a history and doing a physical examination as well as reading through discharge summaries and other documents to help outline a plan with the doctors to manage our new patients to eventually discharge them home safely. If there are no admissions,

I usually complete Mini-Mental State Examinations (MMSEs) or RUDAS assessments, or I obtain collateral histories from our patient's families or if I'm lucky, I may be asked to help with bloods or putting a catheter in. If all of this is completed or there is nothing else to do, my day is done, and I make my way home.

Although the working day is done for most, it generally isn't as a medical student. There is still coursework and study to be completed when you get home. Some days after arriving home after a full day at the hospital, all I want to do is sleep. But other days, I have more energy and I usually spend those reading up on things that came up on ward rounds that day, or something that the registrar spoke to me about. Yet, the bulk of my study occurs on Saturdays. That is when I go through the next week's learning objectives to make sure I am prepared for the short-cases and other presentations that are presented at "back-to-base". Finally, Sunday is my rest day. A day where I try to limit my exposure to medicine as much as possible to rejuvenate before the new week ahead.

The way I structure my day is not the only way to approach 3rd year (it's only the tip of the iceberg), and your day-day activities are certainly influenced by the type of rotation, so your year is constantly evolving. However, if you are pre-clinical student reading this, find a method that works for you, and try to embrace the year as much as you can by being involved and taking on opportunities, even though it can seem scary. Only this way, I think, you can learn best and enjoy your new experiences on the wards, and while 3rd year can limit how much spare time you have, try to still maintain the activities you love and enjoy and your routine for self-care to look after your mental health.



The Little Things

by PROFESSOR PETER CAROLL

I hope everyone is fit and healthy, and coping well in these Covid times. As I write this article many states and territories of Australia are in lockdown to try and stop the spread of this virus. This of course means we cannot participate in many activities which until now we have just taken for granted. Simple things such as having a coffee with friends, going out to lunch, or attending lectures at university are all prohibited.



Although lockdowns significantly restrict our movements and activities, they also present an opportunity to reflect on things that perhaps we don't often think about in our busy lives. For example, how often do you think about your work-life balance and the importance of spending quality time with your partner

and/or your family, the importance of making time to relax in order to reduce stress and anxiety, or the importance of finding time for yourself to read a book, to watch a movie, or to just appreciate the beauty in the world around you?

Ask yourself, when was the last time I looked at the beauty and colour of a sunset, when did I last look at the stars in the night sky and contemplate the wonder of the universe, when was the last time I watched the storm clouds form over the mountains or the waves crash onto the beach. When did I last look up into the trees to see the brilliant colours of the rainbow lorikeets, and when was the last time I listened to the raucous laughter of the kookaburras, or the melodic call of the magpies? So when you next go for a walk or jog please take time to appreciate the beauty in the natural things around you. Stop occasionally and look at all the different plants and trees. They are always there, but how often do you actually see them? Appreciate their enormous array of colours, designs and textures, and please always make time to bend down and smell the roses.

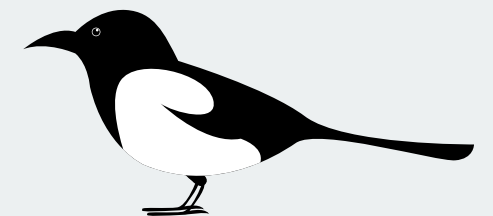
So stick it in a neuron and always remember that while working hard, helping others, and contributing to the community in which you live is extremely important, so is your work-life balance, not only for your own wellbeing but also for the wellbeing and happiness of those closest to you.

Please also remember to look after those in the community who are less fortunate or vulnerable. This is particularly so in times of lockdowns. Check on elderly neighbours and those who live alone to make sure they are coping. Have a chat with them, and if appropriate offer to do some shopping to ensure they have sufficient food and other essentials.

And in closing, can I remind everyone that life is not a dress rehearsal, you only get one go at it. So make the most of your opportunities, be the best person you can be, look after those who are less fortunate, give back more than you take, and try to make the planet a better place for you having been on it. I wish everyone all the very best for the upcoming Summative Exams, and I hope everyone has a very happy and a very safe Christmas break.

Take care, stay safe and always look after each other.

With very best wishes,
Pete



Film Corner

by YOUSEF HAKIMI

COVID-19 has impacted the film industry in a lot of ways. For the casual moviegoer however, it's meant watching new releases has been particularly challenging with cinemas being shut for months at a time. That said, as someone who loves indulging in a good film, here are my top ten recent releases (well nine films, and a comedy special!) you may have missed out on due to the pandemic, and my brief thoughts as to why you should seek them out when you get the chance.



CODA (2021) dir. Siân Heder

Wholesome, comfort watch, coming-of-age.



The Green Knight (2021) dir. David Lowery

Magical realism, haunting, medieval re-telling



Luca (2021) dir. Enrico Casarosa

if 'Call Me By Your Name' was a Disney Pixar film, light-hearted, coming-of-age.



Pig (2021) dir. Michael Sarnoski

Nicolas Cage being insane, revenge drama, action-packed yet also contemplative.



Bo Burnham: Inside (2021) dir. Bo Burnham

Darkly comedic, introspective, emotionally honest.



Minari (2020) dir. Lee Isaac Chung

Disarmingly tender, "wonderful wonderful", dream-like.



S#!%house (2020) dir. Cooper Raiff

For lonely souls, refreshingly earnest, witty.



Kajillionaire (2020) dir. Miranda July

Weird (in the best possible way), heist comedy-drama, childhood trauma explored well



Sound of Metal (2020) dir. Darius Marder

Devastating, intimate, a unique insight into deaf culture (see CODA also).



Shiva Baby (2020) dir. Emma Seligman

Anxiety-inducing (thanks to a fantastic score), surprisingly funny, short run-time.

Movies to look out for this year:

The French Dispatch (2021) dir. Wes Anderson

I mean, it's Wes Anderson. Enough said, really.

Dune (2021) dir. Denis Villeneuve

If you enjoy being baffled after a movie, this will probably be for you.



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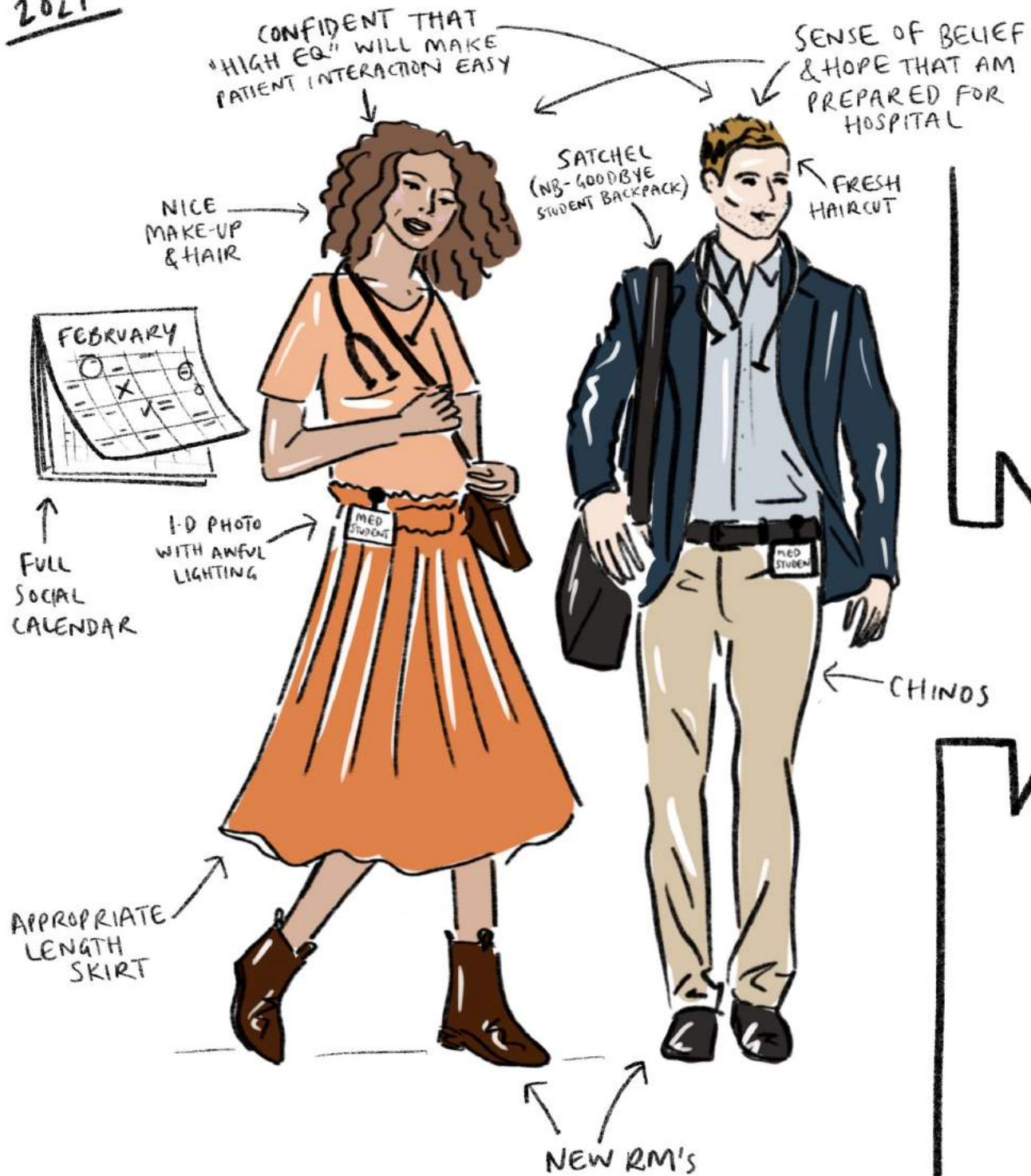
Student Member



Final Year New Grad Transition



YEAR 3 - HOW IT STARTED... 2021



HOW IT'S GOING...



The reality faced by clinical students this year!

Drawn by third-year student, Victoria Hadlow, who is currently at St. Vincent's Clinical School.

Check out @medtorz on Instagram for more of her medicine-related illustrations and study notes.





LGBTQIA+ Educational Resources

by STEPHANIE ZWI

This resource list was compiled after UNDSEM's "LGBTQIA+ Perspectives in Healthcare" speaker night in August. A key message from the night was the importance of educating ourselves about the experiences of others, so that we have a deeper understanding of our patients. Here's a list of resources to get you started!

TV and movies

- **Angels in America** (miniseries, HBO) – Set in 1985 during the AIDS epidemic, the film revolves around six New Yorkers whose lives intersect.
- **Disclosure** (documentary, Netflix) – Explores Hollywood's depiction of trans people and the impact of their stories on transgender lives in America.
- **Feel Good** (series, Netflix) – Queer love story following comedian Mae Martin, who is recovering from addiction and navigating a new relationship.
- **Holding the Man** (movie, Netflix) – Australian tale of 70s schoolboy romance that blossoms into a relationship, torn apart by the advent of HIV in the 80s.
- **It's a Sin** (series, Stan) – Set in London from 1981-1991 depicts the lives of a group of gay men and their friends who live through the HIV/AIDS crisis in UK.
- **Nanette** (stand-up comedy, Netflix) – Tasmanian comedian Hannah Gadsby explores personal revelations on gender, sexuality and childhood turmoil.
- **Rampant: How a City Stopped a Plague** (documentary, Screen Australia) – explores the contribution of doctors, politicians, LGBTQIA+ people, drug users, prostitutes and nuns and their effort to avert the AIDS crisis in Sydney.

Sexuality, health, and gender diversity resources

- Australian Human Rights Commission: [Face the facts: Lesbian, gay, bisexual, trans and intersex people](#)
- Australian Human Rights Commission: ['Sexual orientation, gender identity and intersex status discrimination information sheet'](#)
- Australian Medical Students Association (AMSA): [Policy document on LGBTQIA+ Health](#)
- Australian Psychological Society: [Lesbian, gay, bisexual and transgender \(LGBT\) parented families](#)
- Beyond Blue: [Families like mine – Resources for families with LGBTIQ children](#)
- Bouverie Centre: [Inclusive and sensitive care to same-sex attracted parents and their children](#)
- [National LGBTI Health Alliance](#)
- [NSW Gov STI/HIV Testing Tool](#)
- [Rainbow Health Victoria](#)
- Transhub: [Information for Clinicians](#)



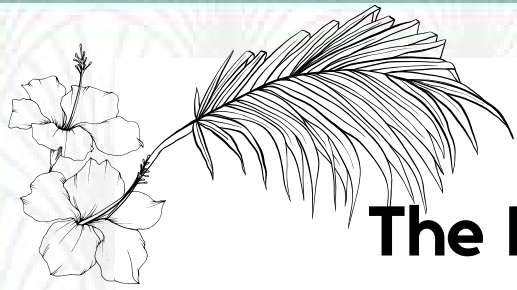
Academic resources

- Positive Life NSW: [Trans and gender diverse people health and social needs assessment: a community survey](#) (Nov 2020)
- Private Lives 3: [A national survey of health and wellbeing of LGBTQIA+ people in Australia](#)
- McNair R, Hegarty K, Taft A, [Disclosure for same-sex-attracted women enhancing the quality of the patient–doctor relationship in general practice](#). *Aust Fam Physician* 2015;44(8):573–78
- RACGP: [Sex, sexuality, gender diversity and health contextual unit](#)

Useful resources for LGBTQIA+ people

- [ACON](#): Aids Council of NSW
- [Gender affirming doctor list](#) from ACON/Transhub
- [Doclist](#): Doctors and health professionals recommended by lesbian and bisexual women
- [Genderqueer Australia](#): Support for Gender Questioning, Gender Queer and Trans people
- [QLife](#): Counselling and referral service
- [QUAC](#): Queensland Aids Council
- [Transcend](#)
- [Transgender Victoria](#)
- [Transhub](#): Resource for trans people, their loved ones and allies in NSW.
- [Twenty10](#): services for young people





The People of the Sea

by **SORREN THOMAS**

Hi there. My name is Sorren, I was born and raised on Darumbal country, Rockhampton, and through my mother I am a proud Torres Strait Islander woman. I was raised by my mother, Katherine (Kitty) Abednego, whose family descend from the Mualgal tribe of Moa Island (Sempol). My uthe (grandfather) and aka's (grandmother) name was Koko and Napiau Abednego.

Before I begin this article, dear reader, how much do you know or what has been your interaction with the Torres Strait Islands, their native people and their culture? I don't mean to criticise or make you uncomfortable. If you're reading this article, I see you as a friend and am hopeful that I may bring something of value for you to take away and share with others. Rather, I ask to shine a light on the harrowing obliviousness of the Torres Strait Islander people, and so I'll use the next few paragraphs to fill in some gaps before we proceed together.

The Torres Strait houses eighteen islands grouped into five traditional island clusters: Central, Inner, Eastern, Western and Top Western Islands. Named after Spanish captain Luis Vaez de Torres, who sailed through the strait in 1606, the Torres Strait lies between the Cape York Peninsula of Queensland and Western Province of Papua New Guinea. Fun fact, the strait was formerly a land bridge which connected the Australian continent with Papua New Guinea, which become submerged by rising sea levels some 8000 years ago. For this reason, the Torres Strait is considered the "dugong capital of the world", containing the largest dugong habitat thanks to the most extensive seagrass bed in Australia. These ties to Papua New Guinea ultimately mean that Torres Strait Islanders are also of Melanesian descent, which includes Papua New Guinea, Fiji, Vanuatu, and the Solomon Islands, explaining the similarities to other Pacific Islander cultures.

The geography of the strait and island clusters was the inspiration which gave rise to the Torres Strait Islander flag, designed by Bernard Namok of Thursday Island:

- The green stripes represent the lands of the Cape York and Papua New Guinea
- The black stripes represent the Torres Strait Islander people
- The blue stripe represents the sea, or the Torres Strait
- The white Dhari (pronounced *dth-ari*) headdress is a symbol of the Torres Strait Islanders
- The five-pointed star beneath symbolises peace and the five island clusters (one point for each cluster) as well as the navigational importance of stars to the Torres Strait Islanders as seafaring people.



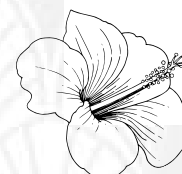
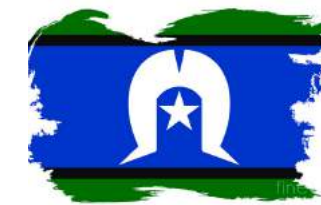
If you'll indulge me, I'd like to share my personal thoughts and feelings with you. As I've gotten older and strayed further south along the Eastern Australian coastline, I've witnessed the awareness of my culture slim to almost nothing. My flag is flown, as per decorum, but often goes unrecognised. I acknowledge this may be in part to most Torres Strait Islander people residing in Northern and Central Queensland, but I can't help but find this explanation to be outdated and devastating. We are routinely acknowledged as Traditional Custodians of Australia before all significant gatherings but rarely mentioned beyond this act of protocol adherence. I've heard ill-informed opinions or beliefs that Aboriginal and Torres Strait Islanders are one in the same. Worse still, that Torres Strait Islanders are not true Indigenous Australians. Ultimately, the fault of ignorance lies not exclusively with the individual, but also within the greater governance and institutions that themselves may not be familiar with the culture of the Torres Strait Islander people, perpetuating a cycle of misinformation and neglect.

In recent developments, the podium has justly been given up for the voices of Indigenous Australians to be heard, but more work and interest is needed before we hear from the otherwise forgotten Torres Strait Islanders. To my Aboriginal brothers and sisters, uncles and aunties reading this article, from the depths of my heart I mean no disrespect. Aboriginal health and awareness must be discussed, and the custodians of the land upon which these lectures and yarns are shared should be at the forefront of the discussion. In lieu, I urge that while our cultures, language and customs may differ, we are all traditional custodians of Australia. To my friends and colleagues, I implore you, next NAIDOC week, Immersion Day, or during your next Aboriginal and Torres Strait Islander Health lecture, remember the 4,500 Torres Strait Islanders north of Cape York - whose culture and livelihood are linked to the sea, stemmed from Melanesian roots, and celebrated through song and dance to this day.

The beauty of the Torres Strait Islands and their native custodians go unnoticed by the rest of the world, together we can ensure this no longer includes their neighbours on mainland Australia.

Big esso, love and well wishes

-Sorren, proud Zenadth Kes woman and your MANDUS Indigenous Representative





CONFESSIONS OF A MEDICAL STUDENT

Have you ever said or done something in class, over Zoom, or on placement that you later spent hours kicking yourselves about? Perhaps you've wanted to drop hints about a certain crush for a while now, or just unburden yourself of some juicy gossip? Well, in the spirit of Catholic confessions, Kyphosis is here to act as your confession booth by proxy...

If you don't see your confession here, it may have been a little too juicy, but we truly appreciate everyone's contribution nonetheless - thanks for helping us injecting some fun into the magazine!



1 I sleep with an anatomy textbook under my bed in the hope that it'll make me remember it better. I know that's not how it works. I'm a scientist. But like, I'm still gonna do it.

2 I went to respond on anatomy that the pinned label corresponded to the vaginal canal, but when I turned my mic off my mate said loudly: "Oh! That's the pleasure palace!"

3 I straight up confessed to a guy I was about to freeze a wart off that I was terrified.

4 I jokingly made my PPH research proposal question "where do wet dreams come from" and submitted it to PRAXIS, not knowing that every response is actually checked...

5 I found one of my PBL group member's twitter alts. They're into weird stuff....



6

I started dating my first year tutor's favourite student for brownie points

7

Ever since we learned about pernicious anaemia I've started taking Vit B12 supplements.

8

One time my tutor asked me what the tachycardia could mean and I replied with "maybe he's happy to see me" - it went down better than expected.

9

I have a not-so-secret crush on Dr Weiss but I already have a boyfriend.

10

A doctor on one of my placements said "despite what the newspapers say (or the fact he was convicted by a court of law) I still really like [a certain disgraced Cardinal] and I've even met him a few times" ... awkward...

11

You ever get pimped over Zoom and then get called out for panic Googling because your tutor can see the reflection of the screen on your glasses? Because same.

12

I feel like I'm really falling for a student in our grade and I think about them all the time but I don't think they know...

13

Coming off mute during an anatomy tutorial to answer "clitoral hood" in the NSW public library copped a few strange looks.

14

The worst bit about Zoom PBLs is it's so hard to focus on what everyone's saying because I'm so distracted by how nicely the sunlight hits my face and I stare at my video window the entire time.

15

PBL Tutor: "Why is the kidney more resonate on percussion than the spleen?"

Me: "... because it is... hollow...? You know, with all the nephrons..."

Yeah, so apparently that wasn't correct...



16

Had a sex dream about someone from my year...

We all know that full days on Zoom are hard... virtually impossible to concentrate for endless hours behind a screen. So recently I've taken to jigsaw puzzles. I simultaneously listen in while I puzzle away. It's been wonderful EXCEPT when fellow students giving their presentations randomly call on individuals to answer questions. One day I was concentrating really hard on the puzzle and got caught out of the blue, having absolutely no idea what they were asking. In my panic, I unmuted myself and stopped dead still, waited about 5 seconds until they realised I was 'frozen' and moved onto pick on someone else! Surely can't get away with that again!??

17

My PBL and I were on Zoom discussing gynaecological histories. My PBL tutor proceeded to talk about common reason for women presenting to ED, leading to this exchange:

PBL tutor: "What is the most common thing a woman puts in her vagina?"

Me: "A sex toy?" **Everyone else:** "Tampons."

Me: "You can tell I'm a pad girl!"

I was MORTIFIED!

19

Marnix Bakker in a dress makes me question my sexuality.

20

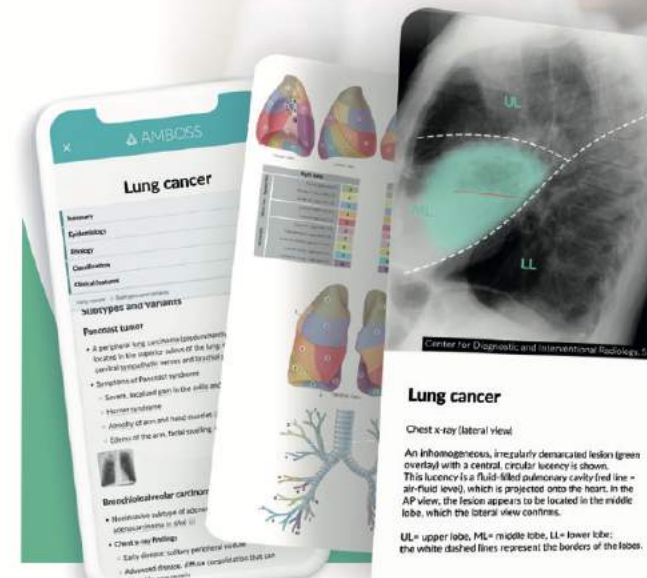
One time Dr. Sinha asked what the cause of thenar eminence atrophy was. I replied a brachial plexus injury and he subsequently grilled me exclaiming that that was the equivalent of saying my grandfather's name if I was asked for my father's name.



21



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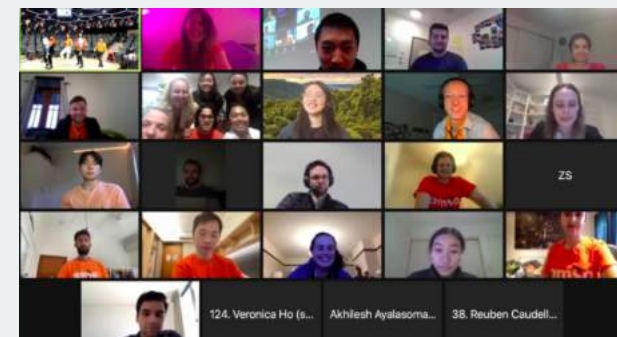
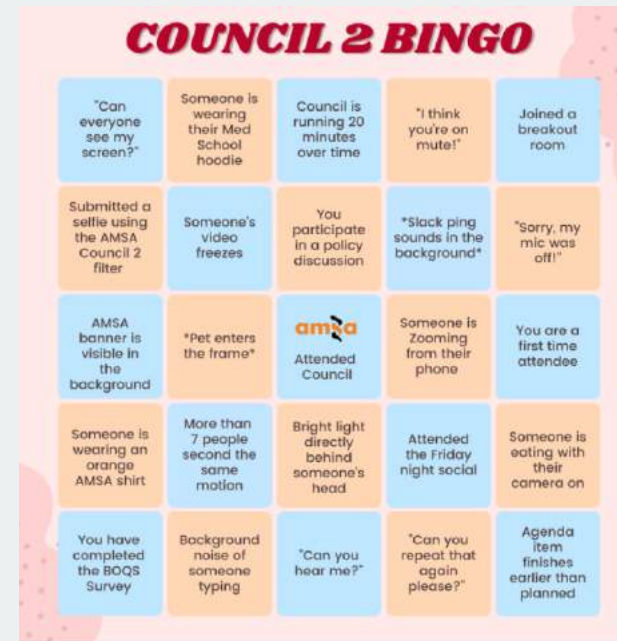
Friday 9th July marked the first day of AMSA's Second Council for the year. Due to a last minute lockdown in Sydney, the event that was scheduled to be held in-person for the first time in a while had to be moved back to Zoom which made all of us quite disappointed. I am halfway through my term as UNDS' AMSA representative, and all of the perks of the position that had convinced me to apply for the role, such as attending National Convention, National Councils and AMSA social events in-person, have unfortunately all had to be cancelled, postponed or moved online. It has been even more devastating for all the hard-working AMSA volunteers who had worked hard to organise these in-person events, such as this year's National Convention organisers from Adelaide, who had to cancel the event that they had worked on for over 2 years, just several days prior to the start of Convention.

It has been a rough year to say the least. But despite all these setbacks, the enthusiasm and radiance from these spectacular volunteers has not diminished in the slightest. Although we spent nearly 24 hours behind a screen for the entire weekend of Council, it was an absolute joy and privilege to be able to represent UNDS and speak with all the incredible participants who attended. It was a jam-packed agenda with a variety of sessions including:

The discussion and voting upon the adoption of policies (with a massive shoutout to Ella Clarke who worked on the Aboriginal and Torres Strait Islander policy and Jessica Oakley who worked on the Social Prescribing policy - both of which were accepted!), upskilling workshops on gender equity and LinkedIn, online yoga, the adoption of reports from this year's National Executive, special groups and projects teams. The election of next year's AMSA core National Executive (with a huge congratulations to Jasmine Davis, Guy Jeffery, Terra Sudarmana and Haseeb Riaz for getting elected!). Updates from events teams including the promotion of National Convention 2022 which is to be held in Newcastle wool!

Overall, it was a super fun weekend which I was able to share with a bunch of inspiring, hard-working, and just all-around amazing people who made the online event better than I would've expected.

I would highly encourage anyone who has an interest in meeting new people, wanting to learn new skills, and wanting to get involved in a project - no matter how big or small - to check out the AMSA Facebook page to receive updates on upcoming events and join along next time! My AMSA family has taught me that geographical restrictions won't get in the way of us having fun together, it is the people we spend our time with that matters the most.



After a pretty sad year on the sports front in 2020, we were super excited about what could be offered in 2021. Unfortunately, however, organising events turned out to be a little more difficult than we anticipated! I bet you can guess what the problem was; it's a virus that's been around for a while. Yep, you got it in one - USYD.

Pretty hard to get sports events going with a uni that has one Sports Rep that has moved to Dubbo and another that doesn't respond to messages! Despite a false start due to the Sydney floods in March, we eventually got the swimming carnival away in balmy April. We had a great turnout from UNDS, and there was good competition between us and the USYD Sports Rep and her 8 friends who came along. (Apparently, they only advertised the event the day before?).

A couple of highlights from the day include: the UNDS team looking divine in their MANDUS budgies and our medley relay team of 4 just pulling through to beat the singular USYD swimmer (who swam all 4 legs by herself). And no better way to cap it off than enjoying team dinner and drinks at The Rose afterwards.

We were really keen to introduce netball into the Notre Dame sporting calendar in 2021, and boy did it enter with a bang. Thanks so much to the 70 who came along, and we look forward to it returning in 2022. (The second-year boys are still spewing about our 1 point loss and looking forward to redeeming ourselves). The first vs second-year games were meant to be social affairs, but you wouldn't know it by the physicality and skill in both games. Not to mention the skin impression Erika left streaked on the court following a brutal collision.

And while COVID may have had its say in which sporting events could go ahead in semester 2, it was fantastic to see the buy-in for the AFL and Olympics tipping competitions. It would go down to the wire in both, with Marnix coming home to pip Dan Sheehan on the very last day of the Olympic competition to nab gold. In the footy tipping, at the time of writing, with only 5 games remaining,

DMC is clawing onto the lead he has held for the whole year. Let's hope someone can run over the top of him!

Special mention must go to Gen de la Motte. Despite not contributing to the group chat for the first 3 months of the year, she somehow managed to spam us with the same Ace Ventura gif. Sent 12 times on repeat. In the space of 30 seconds. And finally, to close the year in style, Rory has got us all prepped for hot boy/girl summer with his 45-minute lockdown torture sessions. Those MANDUS budgies are going to be looking even peachier this summer!



We can't wait to finally see ND sporting teams returning to the courts and fields in 2022. Thanks to everyone who got involved at some point throughout the year! It's been a pleasure.

SOCIAL

by Sabrina Delgado, Dan Mezrani, Olivija Tomas, & Tom Elphick

The Social Team at MANDUS is always trying to bring some fun into the busy lives of med students. Orientation picnics for the first years was a highlight of 2021. It took place in Centennial Park, and the cohort was split into 3 groups to stay COVID safe. Everyone brought their favourite snacks and got to meet their fellow colleagues over some drinks and games! We thank everyone for being part of this memorable day!

Before the lockdown in July, the Social Team has also had the opportunity to host events for both first and second years. The first years managed to get in an entertaining night at Cork and Canvas with an afterparty that saw more than one broken glass come morning light. For first years, the other big event was our pre-formative trivia night held in conjunction with RANDA at the old faithful Unicorn Hotel.

Our two most successful events were our pre-clinical combined Semester 1 mixer and end-of-formatives drinks! Both events were a massive success and built a great connection between the year groups.



Unfortunately, one or two neurons may have been killed in the process and apologies to The Veronicas must be made for our butchered rendition of Untouched. The Social Team is currently working behind the scenes to wrap up the year with an end-of-year party, depending on how the restrictions unfold. Unfortunately, our plans for Med Ball 2021 have been put on hold. We had this, and many other great social events in store, such as medicine and nursing mixer drinks.

We thank the entire Notre Dame community for their ongoing support and involvement in our events and truly hope that 2022 can bring the many wonderful events that we have been waiting for!

Your 2021 social team,
- Sab, Dan, Liv & Tom x





WELLBEING

by Katie Valciukas & Alexandra Miller-Brock

At the moment, 2021 is turning out to be another shocker of a year that will be added to our therapy discussion list when life opens up again. It's hard to reflect on the year that was, when the past two and a half months make us want to crawl back in bed with a bottle of [insert chosen beverage here] but here it goes....

We thought 2021 would be a better year for Wellbeing with the easing of restrictions and life slowly turning back to normal but wow, were we wrong. At the start of the year, the Wellbeing team released its first Activity book for the child inside all of us, with colouring pages, crosswords, and word finds. We also paired each fresh-first-year student with a slightly-less-lost second year to help soften the shock to the system that is med school. Feedback included 'wow, I feel slightly more confident knowing that nobody knows what they're doing here either', 'what the f*\$k is Anki', and 'dear lord, is ethics really that bad?' - the answer is a resounding yes. Medical memes were released each week(ish) on the @manduswellbeing insta to provide a much-needed weekly giggle, while also providing Katie with a weekly anxiety attack. Is it that f**king hard to send it as a square?!

In March, Wellbeing collaborated with Sport to start a Laps for Life team raising money for ReachOut Australia that provides mental health services to Australia's youth. Each member aimed to smash their own personal goal distance over the month and gather sponsors. As a team, we managed to raise \$1995.72 and swim a total 133.44km. In March, we had our first 'Pulse Check Picnic' to check in with first and second years back when medical school was the biggest stress in our lives. It was the MOST WHOLESOME of days with baked goods, friendship bracelet making, sports, games, and dogs. We were also joined by a new member of our wellbeing team,

Brenden, who has been an absolute gem and supported our crazy ideas with actual genuine enthusiasm (we think). Brenden has been an invaluable asset with weekly tips on how to boost your own wellbeing through exercise, healthy study routines, and financial tips. We love him.

On the 22nd of May, Katie (who at this stage we are convinced has an addiction to chlorine) convinced another bunch of second year med students to join her for the 'MS Mega Swim' to raise money for MS Australia by swimming for 24 hours straight as a team. The team absolutely smashed their goal and raised \$5606, while also experiencing the fun that is night shift.

During the stress of exams, we celebrated Crazy Socks for Docs day and gave away some killer socks as prizes (still to be delivered... thanks lockdown). Our greatest achievements of semester two so far include getting out of bed, not eating a whole packet of TimTams for brekkie and not using lethal force on inanimate objects. In happier news, we do have regular Monday Yoga meets and knitting sessions on Zoom to try and trigger that pesky dopamine release.

It hasn't all been fun and games. Despite the prevailing belief, Wellbeing does focus on mental health too. We promoted face-to-face Wellbeing workshops on campus. We signed up a record-breaking number of second year students to the online Mental Health First Aid course - we only had to bribe them with lollies and stickers and the ol' 'we're not angry, just disappointed' routine. Our glorious, not at all communist leader 'El Presidente' Lachlan Morton had a brilliant campaign to bring face-to-face counseling to the Darlinghurst Campus which was an amazing achievement.



WELLBEING

by Katie Valciukas & Alexandra Miller-Brock

But Wellbeing still isn't finished! Yoga sessions are continuing weekly and the inaugural 'Pet Pageant' begins this September. September will also see the beginning of our 'Lift' program. This series will be run weekly by an incredible positive psychologist who will teach us actual techniques and hacks for dealing with stress, imposter syndrome and work-life balance as well as building self-confidence and efficacy. On October 14th we have a financial wellbeing workshop with Dev from Dev Raga personal finance podcast; how else are we going to know what to do with all our doctor dollars? And that's the 2021 update on Mandus Wellbeing. Let's hope for a better rest of 2021 and that COVID finally gets out of here. Special thanks to all the huge supporters of Wellbeing - those who entered our comps, submitted some memes, like our posts, attended our events, and appreciated what we do. We do not say this as often as we should, but we love you all very much.





SANDUS

.....
by Anna Stewart

It has been another exciting year for SANDUS. The team was working hard to adapt to the COVID climate to pull off successful in-person and online events. This year's SANDUS team has consisted of Co-Chairs Andy and Zelda, Events and Communication Representatives Tim and Steph, Treasurer Nick, Social Media Representative Anna, and First Year Representative Jett.

SANDUS began the year with a Suturing Masterclass for Med1s and Med2s, co-hosted by the wonderful Dr Gavin Levy. Following a comprehensive Zoom demonstration of suturing techniques, students could practise their skills from home or in person where permitted. This proved to be a successful event, with a high engagement rate from both year levels, which helped catch students up to the expected standard of suturing for their level. We also must give a special mention to our limited-edition SANDUS pen torches developed by our team as a fun(ctional) project to kick off the year. These proved a great success and have been seen in many CCS classes to date.

Our next major event in Semester One was the Women in Surgery Speaker Night. This took place on Zoom with four fantastic speakers - Dr Lauren Daneel, Dr Alex Stathis, Dr Lynne Mann and Dr Vivien Wong. Each speaker offered unique insights into their field of surgery, followed by a Q+A. In these, we discussed issues specific to women in surgery, such as casual sexism and the challenges involved in balancing a career with parenthood.

Our flagship event for Semester Two was the Surgical Specialties Speaker Night. We heard from a stellar line-up of speakers, including A/Prof Charbel Sandroussi, Dr Laura Fong, Dr Amir Kalanie and A/Prof Payal Mukherjee. We were able to hear valuable commentary on the inner workings of surgical specialties and their pathways, including detailed advice on how to enter programs and the processes involved. We were sad to announce the cancellation of the annual Surgical Challenge due to the pandemic; however SANDUS has a few more things to look forward to in the remainder of

the year. Particularly our Anatomy Trivia Nights scheduled for September.

Finally, we'd like to say a big thank you to everyone who has participated and engaged in our events this year. Thus far, it's been a pleasure to be at the helm of SANDUS, and we hope you've enjoyed this year; as much as we have!

Happy Suturing,
Your SANDUS Team xx



PANDA

.....
by Lily Davis & Emily O'Shea

After a quiet 2020, we are so excited to report that we were mostly able to get back on track with PANDA events this year! We organised custom merchandise for the first time, conducted Teddy Bear Hospitals, and a zoom speaker night.

Our major triumph of the year was organising Teddy Bear Hospital incursions at primary schools around Sydney and conducting 3 of the 7 before the lockdown in June. Our visits to Marie Bashir Public School, Forest Lodge Public School and Redfern Jarjum College were extremely enjoyable. The infectious smiles, excitement and giggles that could be heard down the hallways after the sessions were testament to their success. What's more, I know we medical students enjoyed the sessions just as much as the primary school students. It was a sense of fulfilment that we had contributed to helping young children become familiar with medical themes, first aid and nutrition.

In May, we held a speaker night collaborating with the Notre Dame Nursing Society (NURSOC) about paediatric oncology. Our expert paediatricians and nurses shed light on hard-hitting, unique topics. It captured the interests of over 100 medical and nursing students, and the night was a huge success despite the last-minute switch to zoom.

With the help of our friends at Cottage Printing, we were able to create our first batch of PANDA merchandise, comprising a hoodie and a T-shirt with our coloured text logo. It was fantastic to see this merchandise worn at our Teddy Bear Hospitals and around campus and receive so much support, especially from first-year students.

Finally, acting as co-chairs of PANDA during the second year of the pandemic has called on us to contextualise what this means for paediatric health and what PANDA stands for. Children and young people globally have suffered a great deal – from contracting COVID-19 or the impact of losses, lockdowns, isolation, and general deprioritisation in the health sphere.

Our role and the role of future PANDA members is to champion the rights of young people and advocate for paediatric health more than ever. We look forward to seeing what 2022 holds for PANDA!





RANDA

by Aidan Baron, Julia Lim, Tess Hunt & Stell Goutzamanis

Here at RANDA, we are passionate about medical research. An appreciation and understanding of research contribute to robust and meaningful clinical practice. With the hope of inspiring some budding clinical researchers, we asked Twitter: "what is the best part of being both a clinician and a researcher?"

Here are some of our favourite responses.

"I hope that as a result of my research, patients in the future across the world will have a better chance of surviving childhood cancer than in the past, and that if they do they will have fewer long term adverse effects." - **Dr Mark Gaze**, Consultant in Paediatric Clinical Oncology at University College London Hospital and Great Ormond Street. Researcher in Paediatric and molecular radiotherapy with a focus on paediatric neuroblastoma. @MarkGaze

"Clinical work gives me research questions, and application, research gives me clinical questions and application." - **Dr Catherine Lovegrove**, NIHR Academic Clinical Fellow in Urology Oxford University Hospital @CELovegrove

"The fusion of science and compassion." - **Dr Segun Olusanya**, Senior Fellow in Intensive Care Medicine, London. Research focus on Point of Care Ultrasound and Advanced Sonology in Critical Care Medicine. @iceman_ex

"When I am puzzled with the clinical case, I have the skills to understand what's really going on..." - **Prof Ognjen Gajic**, Professor of Pulmonary and Critical Care Medicine, Mayo Clinic. Senior intensive care medicine trialists and chair of the Multidisciplinary Epidemiology and Translational Research in Intensive Care, Emergency, and Perioperative Medicine (METRIC-ePM) group. @ogi_gajic

"Watching new residents discover something they are passionate about." - **Professor Matt Sztajnkrycer**, Professor and Director of Emergency Medicine, Mayo Clinic. @NoobieMatt

"Pushing the boundaries of the profession and developing policies and skills that are patient outcome orientated." - **Aaron Turner**, Intensive care and HAZMAT paramedic, Christchurch. Resuscitation Physiology Research Scholar.

"It never gets boring" - **Dr Kasia Sculling**, Registrar in Vascular Surgery Research Fellow in neuro-immunology

2nd Year Reps: Aidan Baron and Julia Lim

1st Year Reps: Tess Hunt and Stell Goutzamanis



SSUNDA

by Areeb Athar

Hey all! It has been a big year for SSUNDA with the launch of our new podcast (SSUNDA: Conversations with a Specialist) and star-studded speaker nights. I also had the pleasure of welcoming first-year reps Matt and Ryaan to complete our dream team.

We began the year with our Pathways After Medicine Night featuring three Notre Dame Sydney alumni detailing their journeys into various specialties. We heard from speakers who are currently pursuing the RACS, RACP, and psychiatry pathways. It was interesting to compare the requirements for different pathways and to get a heads up on what life after medical school might look like.

After this, we had the debut of our new podcast with specialist guest Professor Gordian Fulde. It was a privilege to learn about emergency medicine from one of the founding fellows of the Australasian College of Emergency Medicine, Australia's longest serving ED director, and the star of Kings Cross ED. The next podcast episode was no less exciting! Our academic rep Jolie Cullen interviewed ND alumni royalty Armando Hasudungan. Dr Hasudungan is a medical educator with 1.87 million youtube subscribers. He provided us with insight into life as a basic physician trainee, his experience with online medical education, and some evidence-based study tips.

Following this we had our Critical Care Medicine Careers Night. We were ecstatic to have 140 of you tune in on zoom to hear from our esteemed speakers. We had Professor Ken Hillman, one of the founders of the MET call, a system that revolutionised critical care medicine globally, speak about a career in ICU medicine, difficulties with the COVID pandemic, and end-of-life care (a topic he's authored books on). The bubbly Dr Tanya Selak, councillor for ANZCA, then told us about why she thinks anaesthesia is the best medical specialty and future developments anaesthesia. We finished the night with Professor Randall Greenberg, chief medical officer of the Royal Flying Doctors Service, who provided us with insight into a career in retrieval medicine along with some fascinating personal cases and photos.

Overall, SSUNDA has had a productive year and we look forward to releasing podcasts on dermatology and cardiology very soon to round off the year! Be sure to follow us on Instagram @ssunda_unds to see our cool specialty infographics.



WANDA WANDA

Women's and Obstetric Health Association of Notre Dame Australia

by Monica-Rose Van de Lucht

The Women's and Obstetrics Health Association (WANDA) is super excited to be the latest experiment of MANDUS. As a society, WANDA aims to engage students in everything 'women and obstetrics health'-related. With a rising interest in the field of obstetrics and gynaecology, WANDA hopes to inspire and network students to improve their successes of making it in such a competitive specialty. WANDA is also inspired by the gap in women's health outcomes that we see in modern society, and we hope to advocate and raise awareness of these issues, helping to break down various discrepancies in women's health.

WANDA welcomed its founding committee members which included two co-chairs Monica-Rose Van de Luecht & Erika Mendes and our very special first year members Vanessa Diab (Sponsorship Officer and Secretary) & Alessia Ferri (Year 1 Representative).

This year, WANDA hosted an array of speaker and skills nights which was kicked off by a 'Pathway to Obstetrics and Gynaecology Q&A Speaker Night' with two incredible alumni and current O&G trainees Dr. Helena Obermair (from the infamous Helena's Notes) and Dr. Jane McDonnell. This was followed by an epic 'Case Study Night' with Dr. Shavi Fernando. Lastly, WANDA presented a 'Rural Women's Health Speaker Night' exploring the challenges and benefits of working in women's health in a rural setting.

We've launched an Instagram @WANDA_UNDS which provides an avenue for WANDA to advocate for various women's health issues throughout the year and keep our colleagues engaged and up to date with what's happening within WANDA and the world.

Our proudest achievement this year was designing and selling our very own WANDA socks which have proven very cosy for winter days in lockdown and helps those Zoom sessions feel shorter!

This year flew by and while WANDA is very proud to reflect on its achievements in its first year, it is bittersweet.

We are both very sad yet excited to be handing it over to its future leaders who will continue to take it further and reach even wider audiences. We can't wait to see what WANDA is capable of!



UNDSEM

by Yousef Hakimi

UNDSEM kicked off the year with the launch of our International Women's Day breakfast panel on the Broadway campus, an inaugural collaboration with SAUNDA, as well as NURSOC and WANDA. Our amazing panellists Prof Christine Bennett AO, Samantha Cook, Rebecca Fry, and Pauline Deweerd provided incredible insights into this year's theme #choosetochallenge. Key takeaways included intentionality with hiring diversely, the importance of men stepping up, confidence in approaching leadership positions, and the importance of having mentors and champions along the way.

This was followed by our charity drive with the Women's and Girls' Emergency Centre. Soon after, we also collaborated with NURSOC and organised a crafts table to celebrate Harmony Week. Seeing how diverse our Darlinghurst campus, and by extension, our future healthcare workforce was so encouraging!

Possibly our biggest achievement of the year to date has been our LGBTQIA+ Perspectives in Healthcare night, where LGBTQIA+ identifying students (Tom & Rosie) and healthcare providers working in the space (Dr Portia Predny, Dr Catriona Ooi, Dash Gray) came together to discuss questions like how to better foster trust between doctors and our future patients. Spearheaded largely by Steph Zwi and the Events committee, the feedback we received from students was incredibly positive, with many calling it their favourite speaker night of the year.

We also welcomed 3 amazing first years; Maggie, Daphne and Sanjna to the committee, which already included Katherine, Farah, Steph, Julia, and myself. The cohesiveness of our team this year, from the finance team to the social media team was critical to our success.

We have big plans for what remains of the year, including a trivia fundraiser event for Afghanistan with Global HANDS, as well as events around Mental Health awareness, and future advocacy work. Watch this space!



"You need a little bit of knowledge, and a lot of openness"
- Maggie Bester, MS1



by Aparna Atresh

Global Hands have had a wonderful 2021 so far! We welcomed a new committee of first years (Kim Do, Lara McDonald, Olivia Taylor & Beck Pesiah) along with our second-year reps, who have come together to organise creative and meaningful events around global health for medical students at UNDS.

Did you know Australians throw out 1 in 5 bags of their groceries (300kg/person/year)? Well, the Code Green Team from Global Hands sure did, and rightly decided to tackle the concept of food waste one herb at a time! Led by Serena Hope, our Code Green Team kicked off our year of events on the 24th of March by hosting a Sustainability Workshop around creating DIY herb gardens, in collaboration with Doctors for the Environment Australia. This event aimed to encourage and educate medical students on how easy it is to be sustainable at home! The Code Green Team didn't stop there, on the 17th of May, they organised a poster-making workshop to create punchy signs to advocate for a greener future. These signs were shared with pride on the 21st of May, where Global Hands and several UNDS medical students took part in the Climate Strike held in Sydney CBD. It was a great opportunity for us to show solidarity for those who have already been and will be affected by the climate crisis and to advocate for the Morrison Government to invest in renewable energy sources and First Nations solutions that care for country. Together, we can all make a small difference through our actions, and this is exactly what we did!

The Code Green Team have also injected some healthy competition at UNDS through their Meat Free Monday cooking competition on social media. Some stand out recipes we received from our medical students include: Indian-style butter carrots, Sichuan eggplant, homemade pumpkin dumplings, and spanakopita. Congratulations to our lucky competition winner, Meg Morbey for her delicious entry!

Our Global Hands AMSA Co-Chair, Claire Adams, and I had the pleasure of attending the AMSA global health forum held online at UNSW on March 27th. We heard from some nationally and internationally recognised speakers including Saad Alkaasab, a former refugee, humanitarian worker and medical

student at The University of Melbourne, on topics such as refugee and asylum seeker health, advocacy in healthcare and international aid. It was a great opportunity to meet other medical students and we look forward to further inter-university collaboration around Global Health initiatives. Claire has also continued to engage in AMSA forums online and will soon be presenting to her AMSA colleagues on her project @42kwithclaire (be sure to check it out!), where she raised funds for the Love Mercy Foundation and travelled to Uganda to support the provision of clean water to those with limited access.

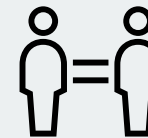
Red Party 2021 was the highlight event for Global Hands and was seamlessly organised by the Gender and Sexual Equality team, led by Lily Claringbold. Held at the Burdekin Hotel on Oxford Street, our first- and second-year medical students celebrated the completion of their formative examinations and raised money and awareness for an incredibly important cause; HIV/AIDS. The donations totalled over \$1500, which were donated by MANDUS to the St Vincent's HIV Future Fund. All guests wore a splash of red to show their support for HIV/AIDS. Thank you to all who attended and donated to the cause!

Our Refugee and Asylum Seeker team, led by Aalia Siddiqui have used our social media platforms to share informative insights on Refugee stories during the year. Global Hands also took part in the online Detention Harms Health march on Palm Sunday the 28th of March. The fact that there are refugees on our shores being treated so appallingly is shocking, so we are very proud of our students who stood up for the right to medical care and the rights of refugees and asylum seekers worldwide.

by Aparna Atresh

The Maternal and Child Health team, led by Bahia Chawan, are currently liaising with a local Women's refuge, Lou's Place, to assemble care packages to assist women seeking support during crisis.

I am so proud to be a part of this group of inspiring women! But Global HANDS isn't done for the year quite yet (we hope) – so keep an eye out for an upcoming speaker night on Women's Health, a possible 'sip and assemble' care package evening (restrictions pending) and a Refugee & Asylum Seeker Health trivia fundraiser night!



GPSN kicked off the year with the General Practice First Steps event at the University of Sydney. Here, first and second-year medical students from New South Wales got together to practice suturing, reviewing OSCE exams and listening to speakers share their experiences in general practice. Not only this, but students from different medical schools including Sydney University, University of New South Wales and Notre Dame were able to mingle, connect and exchange learning experiences, whilst finishing the day with some pizza! There was a great turnout from the University of Notre Dame with around 10 first year and 10 second-year students in attendance. Events that involve multiple universities are rare experiences and the students who got involved seemed to thoroughly enjoy it. Pencil it in your diaries for next year!

In the second semester, GPSN Notre Dame hosted their premier event – the GPSN Careers Evening. The night, which was organised with support from GP Synergy, was nothing less than a gem of an event, with approximately 120 students from the first and second year in attendance. Wow! We had three incredible speakers, Dr Thomas Dethlefs, Dr Rosie Clements and Dr Amy McCorkindale who spoke about their experiences from medical school to becoming general practitioners. Discussions also touched on the differences between practicing in metropolitan, regional and rural locations, which was very informative for students considering their options after graduating. In true GPSN style, the night involved some great prizes including a T2 prize pack, Murtagh's general practice handbook, uber eats food vouchers and the big prize, a Welch Allyn otoscope. A big thank you to GP Synergy for their help in organising this event and hopefully, we can continue to work with them in the future.

GPSN didn't hold back despite COVID related issues this year – still delivering the very helpful masterclasses for first-year students in an online format. This included several sessions covering OSCE practice sessions, on topics like ECG's and Cardiovascular exams to name a few. A big thanks to the Academic reps for helping organise these events which received a lot of praise from first-year students. Similarly, the GPSN team will finish off the year with the GPSN PPD/PPH Trivia night. This is an excellent chance for students to revise these topics before summative examinations and we are very proud to continue the tradition of offering these to first and second-year students.



The GPSN Team for 2021

- Chair: Aaron Manuell
- Vice-Chair: Jack McLean
- Secretary: Allison McKinnon
- Treasurer & Sponsorship: Bronte Nikolic
- Events Coordinator: Jonathan Chan
- First-year reps: Connie Malliaras & Kiahla Arnold

We kicked off the year in February with our annual Nursing and Medicine Amazing race challenge. ROUNDS members and fellow students were positioned at locations all over the city, teams had to decipher clues, solve riddles, take team selfies and navigate their way around some of Sydney's famous sites to reach the final destination. All teams battled through the february heat refreshments & chippies at the final checkpoint

The annual Wagga Wagga visit made a triumphant return in 2021. A cohort of 38 first and second year students made the journey out to Wagga and got a taste of what life is like out west. We were able to take a tour of the Wagga Wagga Clinical School and see what might be in store for some of us in 3rd and 4th year. Hometown hero Kate Hurst led the charge into Wagga's nightlife and winery scene before again leading us into some high school visits and workshops. The trip was run perfectly from start to finish and ROUNDS will be looking to maintain the same energy for next year's Wagga trip.



ROUNDS also made an appearance during May at the Pymbles Ladies college for a rural health night. Medical and nursing representatives taught high school students basic first aid skills like manual BP and crepe bandaging.

Following the National Reconciliation Week and in the lead up to NAIDOC week, ROUNDS and MANDUS hosted a screening of 'In My Blood It Runs'. Students were welcomed to the Darlinghurst campus to watch the powerful story of hope and be reminded of the strength of First Nations people, their families and communities.

While Covid may have stopped face to face meet ups, ROUNDS persevered and hosted a collaborative zoom session for nursing and medical students. Participants took part in analysing emergency scenarios based in a rural and remote environment, enhancing communication skills with different members of the multidisciplinary teams. Even with Covid still around ROUNDS are not going anywhere. We are excited to hold more zoom sessions that will be announced via our facebook page!

See you all there,
Love ROUNDS Xoxo





MANDUS INDIGENOUS



.....
by Sorren Thomas



Seingapa/Maiem ND Pamleh (Hi ND family),

This year saw the release of the inaugural MANDUS Indigenous Polo Shirts! These beauties were designed to encourage pride in our ND Indigenous mob and increase cultural representation throughout the ND SoM. Together with the help of the wonderful Vice President, Adriana Ukalovich (left), we sought permission from the Torres Strait Islander Regional Council to use the Torres Strait Islander flag and reached out to our friends at Clothing the Gaps to use their “Free the Flag” logo in place of the regrettably copyrighted Aboriginal flag. We believe representation is fundamental and stand in solidarity with the Aboriginal people to again wear their flag with pride.

A special thanks is owed to our very own second year medical student, Benjamin Hodge (middle), who designed the pride of the polo, our MANDUS Indigenous logo as well as the beautiful flags above.

Donned on the left sleeve is this year’s NAIDOC Week theme ‘Heal Country’ which was included with intention. True recognition is ongoing, and with each new year, a new wonderful and important NAIDOC theme is celebrated to highlight the steps we as a community must take to close the gap and achieve unity. As the themes change each year, so too shall our polos.

In celebrating NAIDOC week, MANDUS Indigenous was joined by our friends Neenah and Warren to have a yarn about this year’s theme. We were also incredibly fortunate to be joined by Yessie Mosby, a Kenadth Kes

man from Masig island, and one of the #TorresStrait8 claimants to share his journey fighting for the protection of his island home against climate change. We pledge our support to the communities impacted by these impacts, and to those at the forefront of the Our Islands Our Home Campaign (artwork: *Torres Strait 8* by Violet Cully).

Esso everyone, stay safe!



HEAL COUNTRY!
4-11 July 2021



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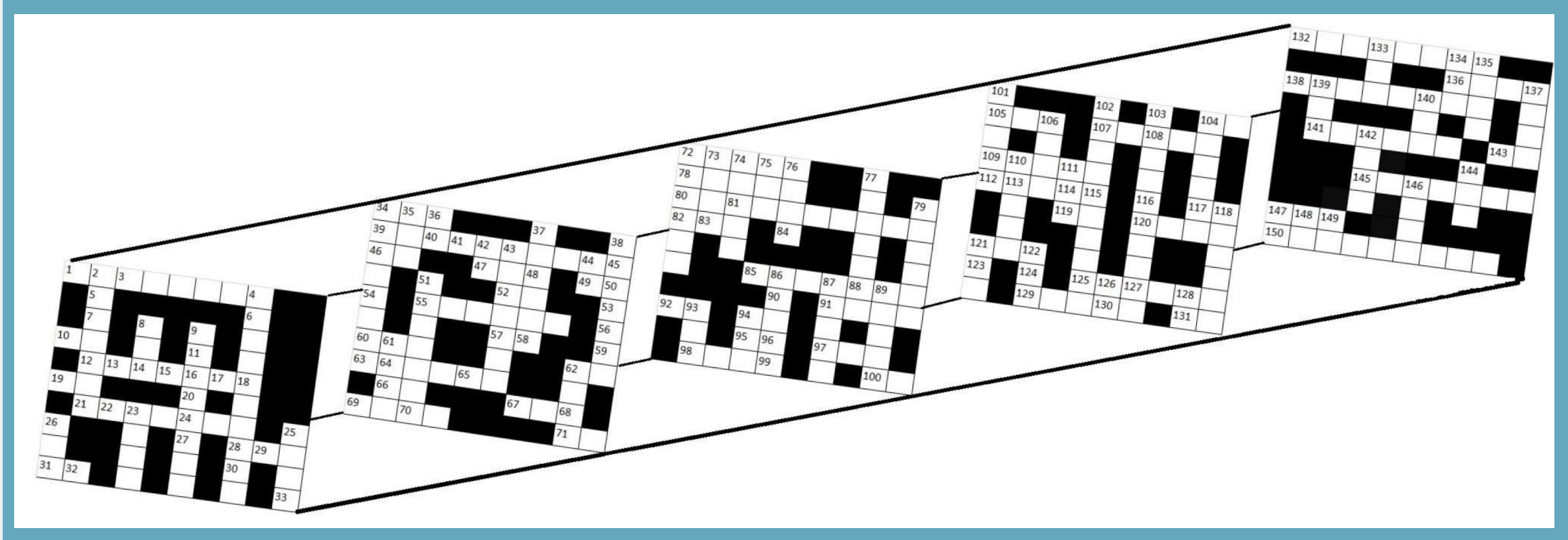
¹ Subject to the terms and conditions of the Policy. ² The Doctor in Training Grants Program was suspended during 2020 & 2021 due to COVID-19 and the resultant international travel and Australian State border restrictions. Whether the Doctor in Training Grants Program can be offered, in whole or in part, in the near future will be contingent on the easing of travel restrictions to enable Doctors to reach their desired destinations. ³ A business must be a Qantas Business Rewards Member and an individual must be a Qantas Frequent Flyer Member to earn Qantas Points with MIGA. Qantas Points are offered under the MIGA Terms and Conditions at www.miga.com.au/qantas. Qantas Business Rewards Members and Qantas Frequent Flyer Members will earn 1 Qantas Point for every eligible \$1 spent (GST exclusive) on payments to MIGA for Eligible Products. Eligible Products are Insurance for Doctors, Medical Indemnity Insurance Policy, Eligible - Midwives in Private Practice, Professional Indemnity Insurance Policy, Healthcare Companies Professional Indemnity Insurance Policy. Eligible spend with MIGA is calculated on the total of the base premium and membership fee (where applicable) and after any government rebate, subsidies and risk management discount, excluding charges such as GST, Stamp Duty and ROLL. Qantas Points will be credited to the relevant Qantas account after receipt of payment for an Eligible Product and in any event within 30 days of payment by you. Any claim in relation to Qantas Points under this offer must be made directly to MIGA by calling National Free Call 1800 777 16 or emailing clients@vossmiga.com.au. Insurance is issued by Medical Insurance Australia Pty Ltd (MIFA) 155004. MIGA has not taken into account your personal objectives or situations. Before you make any decisions about our policies, please read our Product Disclosure Statement and consider your own needs. Call MIGA for a copy or visit our website. © MIGA September 2021



3D Crossword created by Jamie Rickward, M1

First to finish the crossword wins a prize!

Send in your completed crossword to our Pubs team for a chance to win some goodies!



Need a hand?



I dont think I've lost my mind but I have had to chase it a few times.

CLUES RUN IN THE TRADITIONAL ACROSS AND DOWN DIRECTIONS.. THE ADDITION OF THE "BACK" AXIS REALLY ADDS SOME DEPTH TO YOUR MORNING COFFEE.

sudoku page

Easy

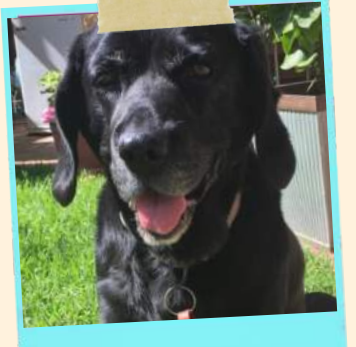
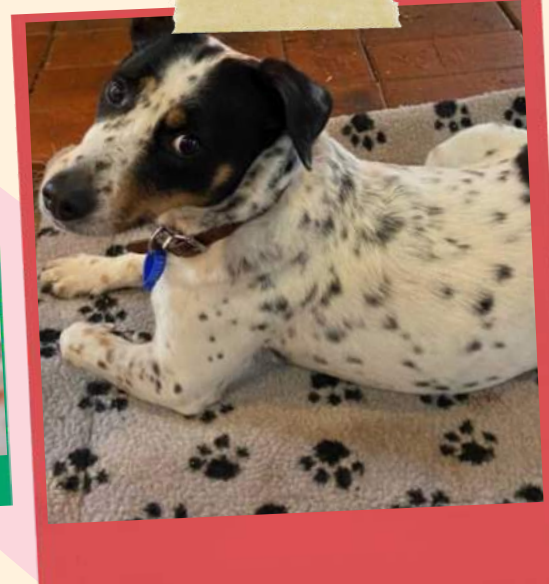
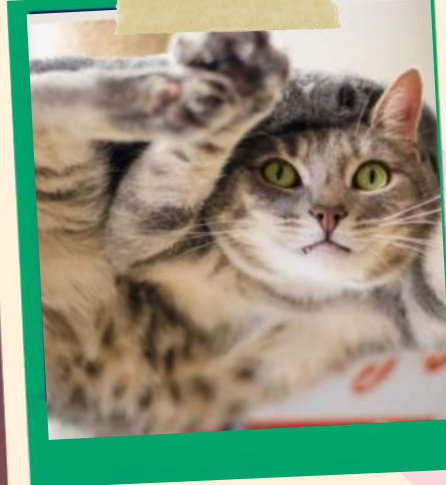
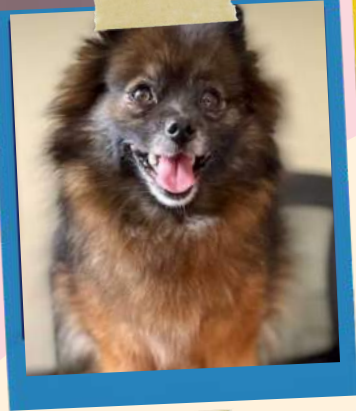
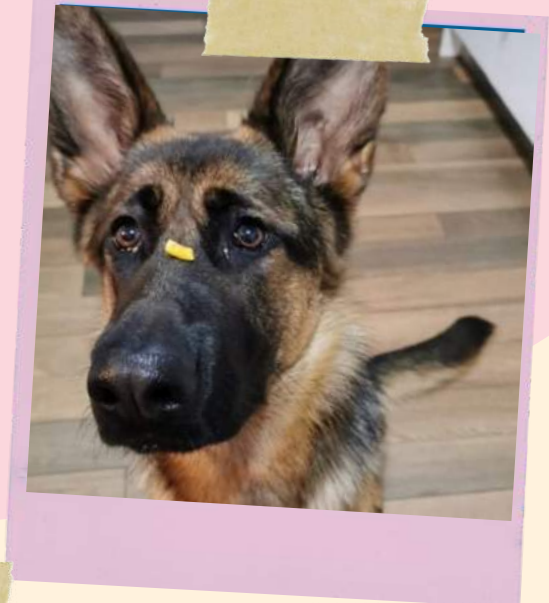
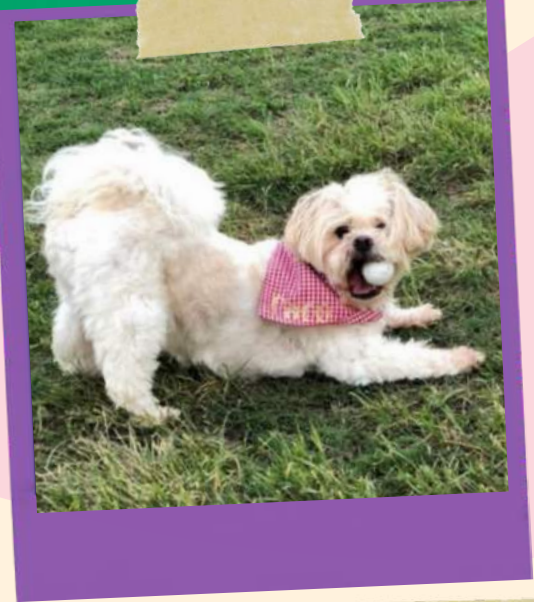
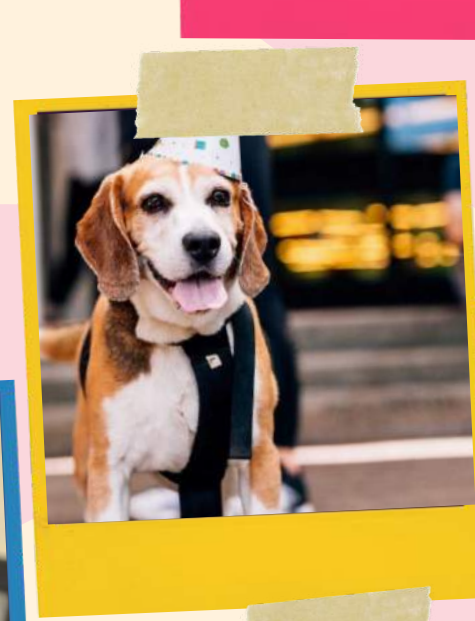
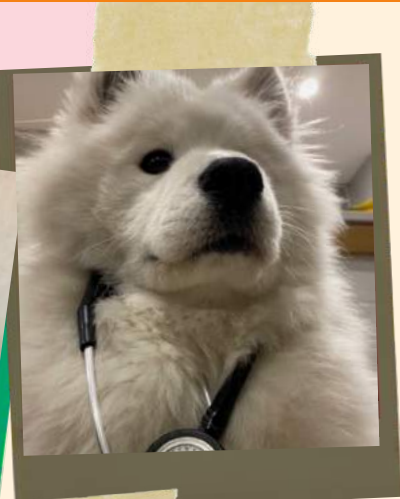
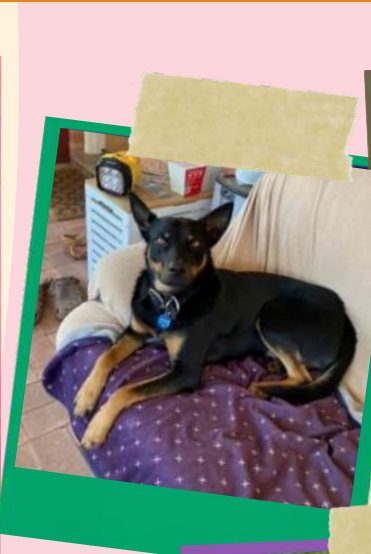
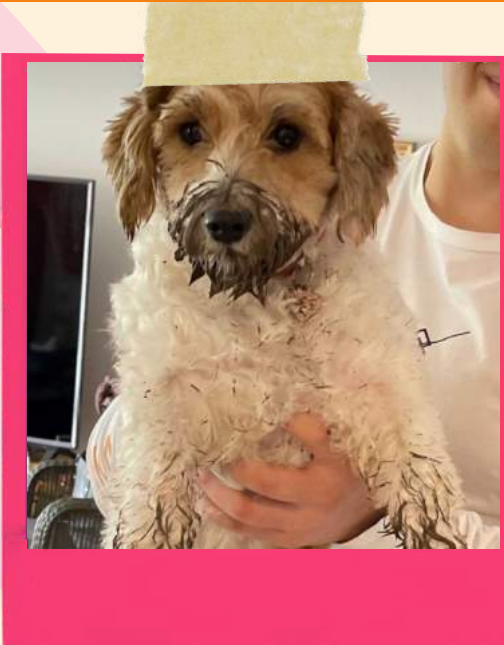
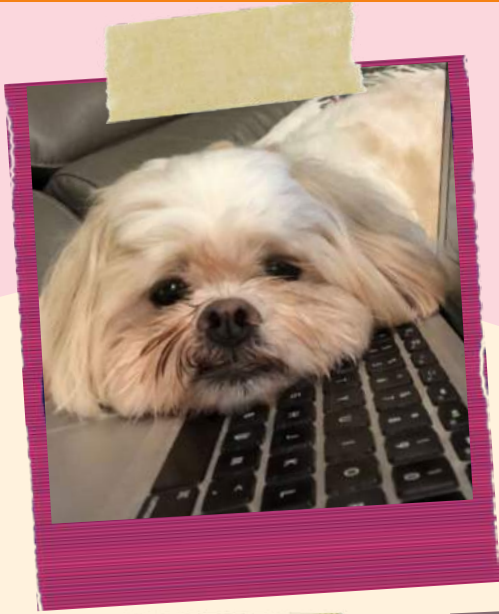
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