Western Clinical School
MEDICAL ELECTIVE PROGRAM

Please read the following information carefully before applying for an elective placement.

The Medical Elective Program at Sunshine or Footscray Hospitals are administered by University of Melbourne, Western Clinical School. All elective enquiries are to be directed to the Elective Coordinator; please DO NOT contact Western Health clinicians directly. Please contact the Elective Coordinator at wcs-electives@unimelb.edu.au.

CONTENTS

Who can apply for a medical elective?
When can I apply?
How many weeks are available for an elective?
How much does an elective cost?
Will you help me with a visa?
Do you provide accommodation?
What types of clinical placements are available?
What elective experience can I expect?
What assessment of my elective placement is provided?
How do I apply for an elective?
When will I hear if I have been successful?
If my application is accepted what happens next?
What additional documents are required? (Insurance and Vaccinations)
What should I wear?
Am I eligible for a student discount for public transport?
General information about visiting Melbourne
Application forms
Who can apply for a medical elective?
The Elective Placement requests will only be accepted from Medical Students in the last 2 years of their medical program/degree at the time of their elective.

If you have graduated and are a doctor, then you are not eligible for this program. Please contact the Medical Board of Australia for information about pathways for International Medical Graduates, or the Postgraduate Medical Council of Victoria.

When can I apply?
Applications can only be accepted up to 12 months in advance. If applications are received beyond 12 months in advance they will be deleted.

How many weeks are available for an elective?
Electives are available for a minimum of four weeks and a maximum of eight weeks.

How much does an elective cost?

| Elective Application Fee | One off, non-refundable payment | $AUD 100.00 |

Elective Application fees are NON-REFUNDABLE

| Elective Fee | Minimum of four weeks and a maximum of eight weeks | $AUD 110.00 per week |

Will you help me with a visa?
The University of Melbourne, Western Clinical School cannot provide information to international students regarding the type of visa required. You will not be enrolled as a student and we do not sponsor any visa applications. You will be a visitor to this hospital and observing and shadowing clinicians.

For information regarding a visa, please contact the Australian Department of Immigration.

Students are required to ensure that they have the correct visa. Elective payments will not be refunded if you are unable to obtain a visa.

Do you provide accommodation?
There is NO accommodation available at any of the Western Health Campuses. Organising accommodation and transportation is the applicant’s responsibility.

Some accommodation close to Footscray hospital includes:


Some accommodation close to Sunshine hospital includes:

What types of clinical placements are available?

Elective placements may be available in the following disciplines:

<table>
<thead>
<tr>
<th>FOOTSCRAY Hospital:</th>
<th>SUNSHINE Hospital:</th>
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<tbody>
<tr>
<td>• General Medicine</td>
<td>• Plastic Surgery</td>
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<tr>
<td>• General Surgery</td>
<td>• General Medicine</td>
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<tr>
<td>• Orthopaedics</td>
<td>• General Surgery</td>
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<tr>
<td>• Rheumatology</td>
<td>• Paediatrics (only Dec/Jan)</td>
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<tr>
<td>• Emergency Medicine (not available Nov/Dec/Jan)</td>
<td>• Neurology</td>
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<tr>
<td>• Cardiology (both campuses)</td>
<td>• Obstetrics/Gynaecology (only Dec/Jan)</td>
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<tr>
<td>• Anaesthetic and Pain Management</td>
<td>• Emergency Medicine</td>
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What elective experience can I expect?

A clinical elective placement will involve integration into the activities of the Unit (as deemed appropriate by the Head of each Unit), generally this would mean “shadowing” of the resident/registrar, attendance of unit activities (ward rounds, outpatient’s sessions and unit meetings) and hospital educational activities. This does NOT include individual tutorials or integration into the University of Melbourne medical student teaching program.

There may be opportunities to attend some teaching sessions, Grand Rounds or other hospital teaching.

A timetable is not provided prior to commencing your elective. On arrival at a Western Health Hospital on the first day of your elective placement, you will be advised what Unit activities you will be able to participate in.

An elective student placement does not correspond to that of a final year student at the University of Melbourne and as such, no documentation to that effect will be signed, "same rights and duties".
What assessment of my elective placement is provided?
At this hospital, we will provide assessment on attendance and professionalism only. However, we are unable to complete assessments of your clinical skills and medical competencies due to the large number of our own students and visiting elective students placed here.

A ‘Certificate of Completion’ can be provided upon request. This letter will include your name, the units and dates of your placement and that your attendance was either satisfactory or unsatisfactory.

How do I apply for an elective?
Ensure you have read this document carefully. Documents are to be in written in English
Email the following documents as PDF attachments only (not photos of documents).

- Application form
- Immunisation declaration
- Letter from your university stating that you are in your last or second last year of your course.
- Resume/curriculum vitae (CV)
- Photo ID
- Assessment form or evaluation form that your university requires to be signed off at the completion of your elective placement

You may send a Proficiency of English document if you wish. DO NOT SEND ANY ADDITIONAL DOCUMENTS UNLESS REQUESTED.

What additional documents are required? (Insurance and Vaccinations)
All insurance and vaccination documents are required ONE month prior to commencing your elective. YOU CANNOT COMMENCE YOUR ELECTIVE WITHOUT THESE DOCUMENTS

Insurance
Personal Medical Insurance that covers you in the event of sickness, accident or medical emergency. Professional Medical Indemnity Insurance ($10 million AUD per occurrence). All overseas and interstate elective students are required to provide evidence of indemnity cover for the elective period. This coverage can be provided by your University, or an alternative insurance organisation, however please note the coverage must amount to AUD $10 million per occurrence for professional indemnity insurance. In Australia, MIPS offer medical indemnity cover to medical students from Australia and overseas.

Infectious Diseases/Immunisation
Students are required to comply with The University of Melbourne School policy on infectious diseases and immunisation. Click here to read.

Students will need to complete a declaration form as part of their application and be prepared to provide documented evidence of the vaccinations/immunisations listed.
What happens next?
Notification that your Application Form has been received will be sent to you by return email along with a receipt for your application fee. Receipt of an application does not guarantee an offer of a placement.

When will I hear if I have been successful?
If the Western Clinical School can arrange a placement a Confirmation Letter will be sent out to you. If no placements can be arranged in your preferences you will be notified as soon as possible. This arrangement process can take up to 4 weeks.

• Return your Payment for Elective Placement form within 28 days of date on Confirmation Letter.

Along with your payment please include the following documents:

• Proof of Insurance cover – public liability, professional indemnity and personal health cover

• Immunisation Declaration Forms

• Criminal Record Check (International) or National/State Police Check (Domestic students)

Please note your application will not be processed until we receive all required documents stated above.

Once payment and acceptance of offer have been received, Western Clinical School will process your payment and send you a receipt.

Two weeks prior to your arrival you will receive ‘Arrival email’ which will include all details about your starting time, place and hospital information.
What should I wear?

*Dress code*

You are expected to be well groomed and professional in appearance at all times.

Please do not bring a white coat. Theatre scrubs can only be worn within designated areas and are provided by the hospital where required.

**Professional Behaviour**

As medical elective students you are expected to be polite and respectful to the hospital, university and clinical school staff as well as patients, their relatives and hospital visitors.

You should exercise great care in the material you post on social media about your private life and your hospital experiences. At no time should material be posted which could adversely affect your patients, their relatives, your teachers or the clinical school staff.

Please note: Mobile phones should be switched off or on silent whilst you are on your placement. Calls should only be answered during breaks.

**Am I eligible for a student discount for public transport?**

You will be an elective student, not an enrolled student, and therefore not eligible for a student concession. For travel in Melbourne you will need to purchase a Myki card which allows you travel on trains, buses and trams in the metropolitan area. For more details on travelling around Melbourne on public transport click here.

**General information about visiting Melbourne**

Tourist information is available at VisitMelbourne.
## The University of Melbourne
### Western Clinical School
### Application forms

### Name

<table>
<thead>
<tr>
<th>Surname</th>
<th>First Name</th>
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### Address


### Telephone


### Other Contact Number (fax or mobile)


### Email address


### Medical School


### Year of Course

At time of elective

### Elective Dates

<table>
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<tr>
<th>Proposed commencement date</th>
<th>Proposed completion date</th>
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### Please give three disciplines in order of preference

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### Preferred duration of each (number of weeks)


<table>
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<tr>
<th><strong>Overseas students</strong></th>
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<tr>
<td>Date of birth</td>
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<tr>
<td>Citizenship</td>
</tr>
<tr>
<td>Where will you apply for a visa?</td>
</tr>
<tr>
<td>Any other comments?</td>
</tr>
</tbody>
</table>

Signature: ______________________________

Date: ______________
### Student Personal Details:

<table>
<thead>
<tr>
<th>Name:</th>
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<tr>
<td>Address:</td>
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</tr>
<tr>
<td>Contact Number:</td>
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</table>

### Amount:

- $ AUD 100.00

### Payment by Credit Card

- **Credit Card Type:**
  - ( ) VISA
  - ( ) MASTERCARD
- **SWITCH/MAESTRO/AMERICAN EXPRESS** – **NOT ACCEPTED**
- **Name on Card (Please Print):**  
- **Card Holders Address (For Receipt Purpose):**  
- **CARD NUMBER:**  
- **EXPIRY DATE:** ___/___  
- **CARD HOLDERS SIGNATURE:**  
- **Date:** ___/___
Medical, Dental, Nursing and Health Sciences Students
‘Infectious Diseases Policy’

Introduction
As you prepare to embark on your studies at the Faculty of Medicine, Dentistry and Health Sciences, it is important that you understand the risks of infection that may occur between healthcare workers and their patients or contacts.

These risks cannot be totally eliminated, but it is essential to take all possible steps to minimise them. The Communicable Diseases Network Australia, the Australian Government Department of Health and Ageing and other bodies have recommended reasonable measures to minimise these risks. As one of the world’s leading Faculties of Medicine, Dentistry and Health Sciences, we take the prevention of infectious disease very seriously. So too do we believe it is our responsibility to actively promote the safety and wellbeing of community members and those who care for them. This policy is designed to meet the community’s expectations for the standard of healthcare it receives.

The Faculty’s Infectious Diseases Policy will govern your participation in your course. Consequently, it is important that you consider or seek medical advice regarding these important issues before you commence your course, as these issues may have an impact on your future career pathways.

Infectious diseases affect healthcare workers (HCW) and students during their training and in their professional lives in three ways:

1. HCW may transfer infectious agents (bacteria, viruses, parasites) from patient to patient.
2. HCW may become infected with infectious agents acquired from patients.
3. HCW who are incubating, ill or carrying infectious agents may infect patients or other HCW.

This policy applies to the following courses offered by the Faculty of Medicine, Dentistry and Health Sciences:

- Bachelor of Oral Health
- Master of Clinical Audiology
- Master of Nursing Science
- Master of Psychology
- Master of Social Work
- Master of Speech Pathology
- Doctor of Dental Surgery
- Doctor of Medicine
- Doctor of Optometry
- Doctor of Physiotherapy

Policy
The following requirements address general infectious diseases matters and the complex medical, legal and ethical issues relating to testing of HCWs (including all MDHS students undertaking the courses listed above or who are otherwise required by MDHS to comply with this policy) for tuberculosis or the blood-borne viruses, HIV, hepatitis B and hepatitis C, and managing HCWs chronically infected with blood-borne viruses.

In adopting this policy the Faculty has considered currently accepted guidelines, including the Communicable Diseases Network of Australia (CDNA) Infection control guidelines and the
Committee of Deans of Australian Medical Schools’ (CDAMS) Guidelines for Infectious Diseases Policies and Programs for Medical Students. Immunisation recommendations, the scientific basis for assessing the risk of transmission of blood-borne viruses and strategies for managing persons infected with blood-borne viruses may change as new evidence arises, disease prevalences change, or community expectations increase.

1. Students have a responsibility to "first do no harm."

2. Throughout their course of study students must learn and practise standard and additional infection control precautions.

3. Students have a responsibility to ensure that they are protected from infection with vaccine-preventable diseases.

4. Students have a responsibility to take measures to prevent transmission of acute infectious diseases from themselves to others.

5. Students have a responsibility to know their infectious status for HIV, hepatitis B and hepatitis C. Medical, Dental and Oral Health students must be tested for these infectious diseases before commencing studies, and undertake ongoing periodic testing, as long as the risk of exposure to these viruses (through occupation or other activities) continues. Nursing, Physiotherapy and other Health Sciences students who will be engaged in physical patient contact are required to seek testing for blood-borne viruses before commencing clinical activities.

6. Students who are chronically infected with a blood-borne virus must consult a local specialist medical practitioner experienced in the particular blood-borne virus infection regarding the nature of the virus, extent of infection, likelihood of transmission and the student’s ability to undertake particular clinical and coursework activities within accepted professional standards.

7. Students with HIV infection confirmed by a State Reference Laboratory may not be able to perform exposure-prone procedures. HIV-infected students must seek the advice of an appropriate local specialist medical practitioner, and Medical, Dental and Oral Health students must make an appointment to discuss the issues with the Dean or his or her nominated representative on a confidential basis within 4 weeks of the beginning of their course or their receipt of a new diagnosis.

8. Students with chronic hepatitis B infection (manifest as circulating hepatitis B surface antigen) will require further medical assessment and advice, and may not be able to perform exposure-prone procedures. The degree of infectiousness of hepatitis B carriers depends on their hepatitis B antigen and antibody status, and their circulating concentration of hepatitis B viral DNA. An appropriate local specialist medical practitioner must assess these matters. Medical, Dental and Oral Health students must make an appointment to discuss these issues with the Dean or his or her nominated representative on a confidential basis within 4 weeks of the beginning of their course or their receipt of a new diagnosis.

9. Students with a positive test for antibody to hepatitis C may not be able to perform exposure-prone procedures. Hepatitis C infection is usually chronic, with persistent or intermittent presence of virus in the blood. Students infected with hepatitis C should seek the advice of an appropriate local specialist medical practitioner, as should students with “indeterminate” hepatitis C serology results. Medical, Dental and Oral Health students must make an appointment to discuss issues with the Dean or his or her nominated representative on a confidential basis within 4 weeks of the beginning of their course or their receipt of a new diagnosis.
10. Students will provide the Faculty with a signed declaration and undertaking\(^1\) that they:
   a. have received this Policy,
   b. have read and understood this Policy,
   c. agree to comply with the policies and requirements set out in this Policy,
   d. have been immunised to the standard of the National Immunisation Program Schedule (www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/national-immunisation-program-schedule) and tested for chronic infection with HIV, hepatitis B and hepatitis C (compulsory for Medical, Dental and Oral Health students before commencement of their course and for all other health professional students before commencing clinical placements),
   e. if not immunised to the standard of the National Immunisation Program Schedule or tested for chronic infection with HIV, hepatitis B and hepatitis C, undertake to complete any outstanding immunisations and testing by the relevant date prescribed by the Faculty of MDHS,
   f. if found to be infected with a blood-borne virus, have obtained advice from an appropriate specialist medical practitioner regarding the nature of the virus, extent of the infection, likelihood of transmission and ability to undertake particular clinical and coursework activities within accepted professional standards and, for Medical, Dental and Oral Health students advised the Dean or his or her nominated representative on a confidential basis of this advice within 4 weeks of the beginning of their course or their receipt of a new diagnosis;
   g. will provide their consent to the Faculty of MDHS to liaise with their specialist medical practitioner regarding the matters outlined in (f) above, and
   h. generally understand the importance of ongoing periodic testing and agree to undertake ongoing periodic testing.

**Strategies to Minimise Infectious Disease Risks**

**Infection Control Strategies:**
Early in your studies you will be taught infection control strategies known as “standard and additional precautions”. These include assessing the risk posed by persons with particular infections and clinical syndromes, hand washing, aseptic technique, disposal of sharps and clinical waste, use of single-use only equipment, aspects of sterilisation and disinfection of re-useable equipment, the use of personal protective equipment (such as gloves, gowns, masks and eye protection), and managing patients in various forms of isolation. Exemplary performance of these precautions is a key professional skill.

**Vaccination:**
Vaccination provides protection against many of the infectious hazards of health care settings. As a general principle, students should protect themselves, their patients and their colleagues by being up-to-date with all available vaccinations against infections they might encounter.

**Knowledge of Infectious Disease Status**
Certain blood-borne viruses such as human immunodeficiency virus (HIV), hepatitis B virus and hepatitis C virus are of particular significance in health care settings.

Following infection with these viruses, individuals may carry virus in their blood and remain infectious for many years, even life-long. Many people infected with these viruses feel completely well and are unaware of their infection.

\(^1\) The “Infectious Diseases and Immunisation Declaration Form” available at http://sc.mdhs.unimelb.edu.au/clinical-placements.
HCWs may be involved in the transmission of these viruses.

The risk of transmitting a blood-borne virus from an infectious HCW to a patient (or an infectious patient to a HCW) depends on several factors, including the particular virus, and the infectiousness of the infected person (the concentration of virus in the blood).

The procedure being performed by the HCW is the other very important consideration. An exposure-prone procedure is any situation where there is a potentially high risk of transmitting a blood-borne virus between a HCW and a patient. In particular, exposure-prone medical or dental procedures pose a risk for direct contact between the skin (usually finger or thumb) of the HCW and sharp surgical instruments, needles, or sharp tissues (broken bone or teeth) in poorly seen or confined body sites (including the mouth) of the patient.

In our society, the responsibility for minimising this risk to patients falls largely on HCW themselves. Should we not meet professionally and socially required standards, coercive laws regarding testing and clinical practice may follow. A HCW who has not minimised these risks may be judged by courts to have acted negligently in not protecting their patients.

Measures to protect patients and HCW from infections in health care settings should be compatible with existing protection available to citizens under legislation and the common law. Measures must also consider the training and expertise of HCW in addressing the risk of transmission of blood-borne viruses to or from HCW.

Requirements

Student Immunisation

Students must comply with this Infectious Diseases Policy (including the requirements relating to student immunisation) unless a written exemption has been provided by the Dean or his or her nominated representative.

It is the student’s responsibility to consult their health practitioner in order to fulfil the immunisation, testing and screening requirements of this Policy. The MDHS Learning and Teaching Unit can advise students who cannot access their own practitioner of a nearby Healthcare service. The following tests, immunisations and services are required:

- Completion of routine childhood immunisations, including a booster for diphtheria, tetanus and pertussis ("Boostrix") during or subsequent to secondary school.
- Tests for immunity to measles, rubella (German measles), mumps, varicella (chicken-pox), and hepatitis B.
- Immunisation (typically a booster dose) for any of these diseases for which immunity is lacking.
- A primary course of hepatitis B vaccination (for those not previously vaccinated).
- Tests to confirm immunity after immunisation.
- Screening for HIV or hepatitis B or C infection.
- Tuberculosis screening by two-step tuberculin (Mantoux) skin testing or QuantiFERON Gold blood test before entry to the course. Further screening may be required during the clinical years of the course. BCG vaccine is not recommended.
- Follow-up, and (if indicated) referral for specialist advice, of students who fail to respond to hepatitis B vaccination, or have unexplained positive tuberculin skin tests.

Although clinical decisions depend on the judgement of the students’ health practitioner in consultation with the student, a standard approach would be:

- diphtheria, tetanus and pertussis booster (dTpa) if not received in previous 10 years
• serological testing for evidence of immunity to measles, mumps, rubella, varicella, hepatitis B, hepatitis C, and HIV.
• a history of natural infection is an unreliable indicator of subsequent immunity; serology is required
• serological testing is NOT indicated for evidence of immunity to diphtheria, tetanus or pertussis
• measles, mumps and rubella booster (MMR) if non-immune on serology
• varicella booster, if non-immune on serology
• hepatitis B booster or primary course, if non-immune on serology
• Mantoux or QuantiFERON Gold testing for tuberculosis

It is strongly recommended that all students have an annual influenza vaccine and that this continue annually throughout their career as a HCW. It is also recommended that all students be vaccinated against the faecal-oral virus hepatitis A, especially before having contact with patients in higher risk areas such as emergency department, gastroenterology, haematology, oncology and infectious diseases. Some clinical placement providers may refuse students access to these areas unless they are immune to hepatitis A.

– Medical students
Medical students must arrange to be tested and to have consulted a local specialist medical practitioner if a positive TB or blood-borne virus result is received, before commencing first semester of their course.

Students must complete the appropriate declaration and undertaking and lodge it with the Faculty before commencing first semester of their course. If a positive TB or blood-borne virus result is received, a student must make an appointment with the Dean or his or her representative by the end of the first four weeks of the first semester of their course to discuss this result and any relevant considerations on a confidential basis.

Medical students who test positive for a blood-borne virus may not be able to participate in exposure-prone procedures but adjustments may be made which may nonetheless enable them to complete the course.

Medical students should however note that some specialist professions are not able to accept students who test positive for blood borne viruses. Students may want to approach the Medical Board of Australia for further information in this regard.

– Dental and Oral Health students
Dental and oral health students must arrange to be tested for, and must consult a local specialist medical practitioner if a positive TB or blood-borne virus result is received, before commencing the first semester of their course.

Students must complete the appropriate declaration and undertaking and lodge it with the Faculty before commencing the first semester of their course.

If a positive TB or blood-borne virus result is received, a student must make an appointment with the Dean or his or her representative by the end of the first four weeks of the first semester of their course to discuss this result and any relevant considerations on a confidential basis.

Dental and oral health students who are held not to be able to participate in any exposure-prone procedures because of their blood-borne virus status may not be able to complete their course. Students who would like advice on career opportunities should discuss their concerns with the Dean or his or her representative.
– **Nursing students**
Nursing students are required to seek testing for blood-borne viruses before commencing clinical activities.

Nursing students may not be able to participate in exposure-prone procedures unless they have recently been tested and shown not to carry a blood-borne virus.

– **Other Health Sciences students**
Physiotherapy, Psychological Sciences, Social Work, Audiology and Speech Pathology professional entry students are required to seek testing for blood-borne viruses before commencing clinical activities.

Students in these programs may not be able to participate in exposure-prone procedures unless they have recently been tested and shown not to carry a blood-borne virus. Students should check with their local course coordinator for the further information.

**Disclosure of Blood-Borne Virus Status**

In the course of routine clinical care, disclosure to patients of the blood-borne virus status of a HCW is not recommended. In the absence of any clear exposure to blood or body substances, patients are at an extremely low risk of acquiring blood-borne infections. Mandating the "right" of a patient to be informed of the blood-borne virus status of a HCW may mislead the public about the risk of transmission of blood-borne viruses between HCW and patients. Appropriate infection control practices will protect patients (and HCW). Further, there is no onus on the patient to reveal their own infectious status.

HCW should respond to questions about their own health by stating that infection control procedures are in place to protect both HCW and patients, and that HCW are not excluded from their employment or clinical functions where these are able to be safely performed under various policies and procedures in place in the facility. Such questions can also be referred to designated institutional personnel, such as infection control staff.

**Conclusion**
The information contained in this policy concerns important questions of public health which affect you as a student and may affect patients with whom you come in contact. You are encouraged to discuss this policy with the Dean or his or her representative if there are any matters in it which require clarification. All enquiries will be welcomed and treated on a confidential basis.

Students are required to read, understand and comply with this policy because of its importance in relation to certain procedures in circumstances where a student carries a blood-borne virus. Students are required to be vaccinated against certain infectious diseases and are further required to attend a medical practitioner for the purpose of undergoing blood tests.

The policy sets out in detail the reason for the steps students are required to take in order to comply with Faculty requirements in relation to students who are infected with a blood-borne virus. Compliance with the policy is of the utmost importance. Students are assured that their communications with the Dean or his or her representative will be treated in confidence.

The immunisation requirements stated in this policy are the minimum required for enrolment in the Faculty’s health professional courses as specified in the introduction to this policy. Some clinical placement providers require specific immunisations (such as against hepatitis A and influenza) before students are placed in certain higher-risk environments. Students may be required to undergo these immunisations at their own expense before commencing these placements.
It is recommended that all students are immunised against hepatitis A and influenza as part of their professional responsibility to patients, colleagues and self.

References


Contact
For all queries relating to this policy contact:

MDHS Learning and Teaching Unit
Email: mdhs-ltu@unimelb.edu.au
Phone: +61 3 8344 5890

University Health Hub
Level 1, Brownless Biomedical Library
The University of Melbourne VIC 3010