Part I: Origins and Selection.

"Home is where one starts from. As we grow older
The world becomes stranger, the pattern more complicated
Of dead and living. Not the intense moment
Isolated, with no before and after,
But a lifetime burning in every moment ..."

T.S. Eliot, <u>East Coker</u>.

2: Selection in one medical school.

"To get a good crop of doctors one needs not only good soil and good cultivation but also good seed. In the past few years much has been written on the cultivation of the medical student... Relatively little, however, has been said about the selection of the seed that is to be cultivated ... [I]n the choice of medical students progress can only come from empirical studies"

Lancet editorial (Anon, 1948).

"What's more ... some blasted sociologist will dig over the facts and find that [a potential Nobel Laureate] was rejected by St. M's and accepted by St. T's and St. B's and doesn't this show how crass, ignorant and biased we were at St. M's".

Dudley (1978)

Summary.

A detailed description is given of the St. Mary's study of the selection of medical students for admission in October 1981. It is shown that the year chosen is representative of selection at St. Mary's, and that the applicants are typical of those applying to other London medical schools, Oxbridge and provincial schools in England and Wales in that year. The final destination of applicants is described, and their passage through the selection process and its timing are described.

The selection of medical students is controversial; and like any 'closed' process, it inevitably attracts criticism, from the profession itself (Cruickshank and McManus, 1975; Hoyte, 1982; Cobden, 1982: Simpson, 1972), from prospective students (see chapter 7), from headmasters (Lockhart, 1981), and from the media (Toynbee, 1978), and in so doing it creates its own mythology, which like all mythologies contains some truth, much speculation, and many absurdities (see e.g. Heap, 1982a,b; Fry, 1982). At a General Medical Council conference on the selection of medical students, one speaker commented that, "the literature on selection was meagre and he ... therefore had to be anecdotal"; Professor H. Walton, at the same meeting, "noted that selection procedures were largely not studied by the medical schools applying them, and felt that this was an important deficit which should be remedied" (Anon, 1979b). A bibliography on student selection for medicine during the years 1970-5 (Barker, 1976), had a total of only 77 references from the world's literature, many of them of only marginal interest or relevance. In the following chapters the selection system will be opened to scrutiny, questions asked about its fairness and its success, and the debate re-opened on possible methods of improvement.

Controversy over selection has increased with the growing suspicion over the past two decades that competition for admission has become much greater; "I could never have got into medical school nowadays", murmurs the well established consultant with a wry, apologetic smile' (Begbie, 1980). Indeed, while well-established members of the profession seem to have experienced little difficulty with getting into medical school (see e.g. Abse, 1978), A-level requirements for admission have been rising steadily since 1972 (McManus, 1982), and medical students are now second only to veterinary students in their academic achievement, and in the degree of competition to obtain university places. Concern has also

arisen over the fate of particular minority groups applying to medical school. Thus Thurman (1979) pointed out that only 1 in 6 graduate applicants was accepted, as compared with 1 in 4 of other applicants, and that in part this was a result of graduates having poor A-levels taken a number of years earlier.

In this chapter a single medical school, St. Mary's, is studied to see how it copes overall with the problem of selection. In later chapters particular parts of the selection system will be considered in more detail, and the more global problem of the system of medical student selection as a whole will be considered.

Results.

During the period September to December, 1980, 10810 persons applied to UCCA (the Universities Central Council on Admissions) and included medicine as their first choice of course (UCCA, 1982; Table 2-3). In October 1981, 3997 individuals were admitted to study medicine (UCCA, 1982; Table 2-5). The rejection rate is about 60%. Each applicant can apply through UCCA to up to five medical schools and on average each medical school had 13.2 applicants for each of its places. There was substantial variation between schools (see Table 2-1), but it must not be assumed that it is harder to get into a school with a high ratio of applicants to places, and easier to get into a school with a low ratio; minimal academic requirements must be taken into account, amongst other factors: it is not for example easier to gain a place at Cambridge, with 3.5 applicants per place, than at University College, London with 26.7 applicants per place.

i. 1980/81 as a representative year at St. Mary's.

Figure 2-1 summarises admission statistics for St. Mary's from 1969 to 1981. Over that thirteen year period several substantial changes have occurred. The number of applicants has risen steadily, and whilst over the period 1971 to 1974 this rise matched the overall rise in applications to UCCA, since 1974 there has been a real rise in the proportion of UCCA applicants who include St. Mary's amongst their choices (Figure 2-1b), suggesting long term changes in applicants' perception of medical schools. Applicants for admission in 1982, 1983 and 1984 were 1620, 2031, and 2137 respectively, representing increases of 9.6%, 37.4% and 44.6% over the 1981 figure. Apart from the years 1969 and 1981, the number of entrants was almost constant at an average of 92 per annum (Figure 2-1a).

The proportion of women applicants and entrants (Figure 2-1d) has risen steadily since 1969, in parallel with the national overall rise in proportion of female medical students.

The number of candidates interviewed has shown several medium term trends, with a real decline in the mid-seventies (Figure 2-la), and an increase since about 1978. The proportion of women candidates interviewed was relatively low until 1974 (with the exception of 1971 which appears to be generally anomalous); after 1974 the proportion of women interviewed reflected the proportion of applicants. Despite the disproportion over the years 1969 to 1974, the proportion of women entrants was much as one would predict from applicants.

Apart from an occasional overseas applicant offers were made only to candidates who had been interviewed. The proportion of conditional to unconditional offers shows large variation, with the number of

conditional offers being closely related to the total numbers of interviews given. From 1970 to 1978 the proportion of interviewed candidates who were <u>not</u> made offers was fairly steady, although there was a sudden increase in 1980, as the result of a policy of increased numbers of interviews.

ii. The St. Mary's Hospital Medical School Survey.

Between 1st September and 15th December 1980, 1478 people applied to UCCA and named St. Mary's as one of their five university choices. Of these, 1361 gave a United Kingdom postal address, and these were included in the main study. 1183 (86.9%) of those in the study were British nationals, and the rest were from a wide variety of countries (see Table 2-2). 19 applicants (1.4%) were applying for admission in October 1982, and the rest for October 1981. Most candidates had included five choices of university on their UCCA form, but 13 had only placed four choices on their form, and 6 had only placed one or two choices on their form. The majority of candidates (96.5%) had made all five choices for medicine, but 27 (2.0%) had made one non-medical choice, and 21 (1.5%) had made more than one non-medical choice. The subjects of these choices are shown in table 2-3.

All individuals in the study were sent questionnaire 1 (Q1) within a day or two of receipt of their UCCA form at St. Mary's. A covering letter from myself explained that the questionnaire was entirely for educational research purposes, although it had the approval of the Dean, that I was not involved in the selection of students (at that time, at least), and that the Dean would not see the data until selection was completed. It was stressed that there was no necessity for the questionnaire to be completed, although naturally we would be grateful

for as large a response as possible.

Q1 itself contained questions about social, educational and family background, reasons for wishing to study medicine, influences upon that decision, interests in aspects of medicine and particular careers within medicine, and questions about what the candidate would do if rejected for medicine. Many of these questions were based directly on those originally asked by the Royal Commission on Medical Education (1968) (the 'Todd report'). Q1 also contained the 'sylbism' (syllabus boundness) scale of the University College London Study Questionnaire (UCLSQ) (Lucas et al, 1976). Q1 covered some 9 sides of closely typed A4 paper. The final sheet of the questionnaire was left blank, and applicants were encouraged to write at length about their views on medical school selection, and many did so, often with great feeling. These comments are the subject of a later chapter.

The questionnaire was sent with a stamped return envelope addressed personally to me at the medical school, and marked strictly confidential. 1151 (84.6%) applicants completed Q1, and of these 687 (59.7%) wrote some comments on the final sheet. The majority of the questionnaires were completed within a few days of their receipt by the applicants, and almost certainly before any had received offers or rejections from any of their medical school choices. This part of the survey is therefore strictly prospective, in contrast to previous studies which have been retrospective (Johnson, 1971a,b).

Each UCCA form was read by the Dean within a few days of its arrival in the medical school (an average of about 16/day over the three-month application period). At the time of the first reading of the UCCA form, the Dean also completed a proforma on each applicant, making a number of assessments of that candidate. Later in the year, I read each UCCA form

and the statistical data (other applications, 0- and A-level results, etc.) were coded for computer entry.

On the basis of his reading of the UCCA form (on one or more occasions) the Dean selected those candidates who would be offered interviews. A few candidates, usually those who had also applied in the previous year, were made offers without interview. 338 applicants (318 British, 20 Non-British) attended for interview, and were interviewed either in the morning or the afternoon, with all candidates being offered a conducted trip around the medical school at 1 p.m..

A second questionnaire, Q2, was given to all interviewees, and was completed by 337 of them (99.7%). The questionnaire was also sent by post to those 13 candidates who were made conditional or unconditional offers without interview (and was completed by 7 of them)). Q2 consisted of nine pages of closely typed A4 sheets, and asked about previous interview experience, and about cultural, sporting and other interests, as well as about ethical, political, and social attitudes. The questionnaire also contained the Eysenck Personality Questionnaire (EPQ) (Eysenck and Eysenck, 1975), and the State-Trait Anxiety Inventory (STAI) (Spielberger et al, 1970).

As with Q1, a covering letter from myself explained to candidates the purpose of the questionnaire, and its complete independence of the selection process per se. Half of the interviewees (the first five each morning and the first five each afternoon) received the questionnaire after their interview, the rest received the questionnaire before their interview. Candidates sat in the Medical School library whilst completing the questionnaire, and thus were prevented from discussing it among themselves. As with Q1, Q2 offered candidates the opportunity for free comment, but only 153 (44.5%) availed themselves of the opportunity,

a number saying merely that they had said everything on Q1. On average candidates took 39 minutes to complete Q2 (10th percentile= 24 mins; 90th percentile= 55 mins).

Each candidate was interviewed by a panel of two interviewers and a chairman. Four chairmen were used, to maintain continuity of standards, each being a senior member of the medical school; each chairman attended from 67 to 106 interviews (mean=84.3). The two interviewers were chosen from a clinical and a pre-clinical department, and each attended only a few interviewing sessions (32 interviewers; mean number of interviews = 19.75; SD=8.20; range= 6 to 38). Each interviewer and the chairman took turns to question the candidate, the whole interview lasting fifteen minutes; candidates were always invited to ask the interviewers any questions they wished. At the end of the the whole interview, each interviewer completed a short proforma giving his estimate of the candidate, and then the panel came to a collective recommendation on the candidate. On the basis of that recommendation the Chairman and the Dean decided on what offer to make to a candidate.

The final part of the survey was completed after October 1981 when the A-level results of all applicants who were pre-A-level at the time of the application were obtained from the A-level Examining Boards, and the final destination of each applicant for that year was supplied by UCCA.

iii. The students surveyed as a representative national sample.

The 1361 applicants surveyed in this study comprised 12.6% of all applicants to British medical schools in Autumn 1980, and the 517 who went to a medical school represent 12.9% of all entrants accepted to read medicine in October 1981. The final two columns of Table 2-1 show that

for each medical school the overall ratio of applicants to acceptances is very similar to that obtained by the St. Mary's applicants in this study who also applied to that medical school.

The main selection bias in this study is that all the individuals have included St. Mary's on their UCCA form, but the fact remains that the outcome of their applications showed that they were a representative sample of all applicants in terms of their success in gaining admission at one school or another.

Although representative in terms of successful application to read medicine, it is clear from table 2-1 that those surveyed comprised about 20% of all applicants to London University medical schools, and formed a much smaller proportion of applicants to provincial schools; the proportion of applicants applying to Scottish medical schools is so small that the results should be interpreted with care. Nevertheless the study contains at least 28 applicants to every British medical school (median=141), and at least two acceptances by every British medical school (median=13) (see Table 2-1)). Unless the sample is grossly atypical of applicants and acceptances, it should allow, with appropriate statistical analysis, consideration of the national selection process as a whole. It is also worth noting that some 8.3% of the applicants have named only one London medical school (i.e. St. Mary's), and a further 14.8% have named only two London schools; 37.2% of applicants selected all London schools for their UCCA application.

iv. The outcome of applications.

of 1478 applicants to St. Mary's, 94 (6.4%) eventually arrived there in October 1981. A further 436 (29.5%) went to other medical schools. One applicant who was accepted for veterinary medicine, and one applicant accepted at Cambridge for natural sciences (in both cases their first choice) were counted as 'acceptances'. Three candidates holding conditional offers re-applied to UCCA in October 1981, as a result of their high A-level grades, and one went to Cambridge and two arrived at St. Mary's in October 1982. 176 (11.9%) applicants went to university to read a subject other than medicine, and table 2-4 summarises the courses for which these applicants were accepted. 8.7% were accepted for subjects directly allied to medicine, 57.2% for biological sciences, 14.5% for physical sciences, 4.6% for maths or computing, 6.9% for engineering, 4.6% for social sciences, and 3.5% for 'Others' (English or Law). 772 applicants (52.2%) did not go to university in October 1981.

Figure 2-2 summarises how these applicants proceeded to their eventual destinations.

After their UCCA form had been read by the Dean, the candidates were interviewed (24.8%), made an offer without an interview (1.3%), rejected (72.8%), or withdrew (1.0%), the latter usually due to their having been offered a place elsewhere, or else having completed their UCCA form incorrectly (e.g. incompatible university names and code-numbers). Of those who were rejected without an interview, 5 (5.1%) were subsequently interviewed during August/September 1981 as a part of the Clearing scheme. After interview (or in a few cases without) candidates were either made conditional offers (180), unconditional offers (36), or were put on the 'waiting list' (36), the latter being used for students who could not be made a a firm offer but would be re-considered in August

1981 if they had not yet gained a place elsewhere. 104 candidates were rejected outright at the time of interview.

After candidates had been made unconditional offers they were required to make a provisional acceptance, and then a definite acceptance (Figure 2-3). Of 36 unconditional offers made, only 12 (33.3%) eventually arrived at St. Mary's, most of the remainder going to other medical schools; 10 (27.8%) went to Oxford or Cambridge. All students made unconditional offers by St. Mary's eventually entered a medical school.

Candidates who were made conditional offers (usually upon subsequent A-level grades, but in a few individuals who lacked subjects required at O-level if not offered at A-level, upon O-level grades, and in one case upon both), were required under the UCCA rules to accept the offer first provisionally and then definitely or else to reject the offer (see figure The standard offer for applicants sitting advanced level for the 2-4). first time was B (Chemistry) and two C grades; 129 applicants received this offer. A further 11 applicants were set higher targets depending on whether they were re-sitting immediately in the autumn or delaying until the next summer; still higher grades were asked if only one or two subjects were to be re-taken. A target of CCC was set to 32 applicants, in most cases in an attempt to attract excellent candidates who could easily out-perform their target, but in a few cases in recognition of Three applicants lacked the necessary 0-level disturbed schooling. passes in Biology or Physics and an O-level pass was included in their requirement. Two candidates were offered a place conditional on a II.1 honours degree. Table 2-5 summarises the offers made to candidates. 180 candidates made conditional offers only 95 (52.8%) were still holding them by July 1981, the majority of the rest having withdrawn in favour of

other medical schools. Of these 95, only 66 (69.5%) obtained adequate A-level grades to satisfy the condition of the offer. Of those not gaining acceptable grades, 2(6.9%) went to other medical schools, 8 (27.6%) took up non-medical courses and the rest were rejected outright. Thus of 180 conditional offers made, only 66 (36.7%) eventually arrived at St. Mary's.

Overall those in the survey were made 216 offers (which are in principle a contractual obligation), and of these only 78 (36.1%) eventually arrived at St. Mary's with, in many cases, the destination not being known about until quite late in the selection process. Figures 2-2, 2-3 and 2-4 also contain information on the average 0 and A-level grades for applicants in the various groups, calculated on the basis of 5 points for an A grade, 4 for a B, etc..

v. Timing of applications.

The timing of applications is of importance both to candidates, since it appeared to affect the chance of success, and also to medical schools, since it determines the rate at which they can make offers to candidates. Figure 2-5a shows the eventual destination of candidates as a function of the date at which their application was received at UCCA. Differences between deciles are highly significant (Chi-squared= 245.1, 45 df, p<<0.001), with earlier applicants faring far better than later applicants, this also being reflected in the lower interview rate for later applicants (Figure 2-5b: Chi-squared= 177.4, 9 df, p<<0.001). The interpretation of Figure 2-5a is, however, complicated by the fact that later applicants are less well qualified academically than are earlier applicants (Figure 2-5b), having lower 0-level grades (F(9,1222)= 13.7, p<<0.001) and lower A-level grades (F(9,1315)= 17.9, p<<0.001).

Furthermore there is a suggestion that later candidates are less well motivated, a lower proportion of them returning the postal questionnaire (Q1) (Chi-squared= 35.1, 9 df, p <0.001).

Figure 2-6 shows cumulative distributions of the times at which events happen to applicants. It can be seen that there is a large spread in the arrival of forms at UCCA, and that much of the subsequent variation is conditioned by the time of application, with there being a tendency for greater variability with later events. Table 2-6 summarises the intervals between various events in the selection process. In general delays were small, the major exceptions occurring around the Christmas period. Candidates often waited a while for rejections if they were not interviewed, reflecting the fact that their applications were often re-assessed in the light of other applications which had subsequently been received.

vi. Position on the UCCA form.

Candidates place their five university choices in order of preference, and are able to use any 'bracketing' that they desire. St. Mary's was placed 1st or 1st equal by 293 (21.5%) candidates, 2nd or 2nd equal by 360 (26.5%), 3rd or 3rd equal by 297 (21.8%), 4th or 4th equal by 236 (17.3%) and 5th by 175 (12.9%). Candidates spend much time agonising over the exact ordering of their choices. St. Mary's claims in its prospectus that it takes relatively little notice of the position it has been placed on the UCCA form (in clear distinction to certain other schools, who demand that they are placed at or very near the top of the form) and indeed it has such a reputation amongst applicants. However those who eventually arrive at St. Mary's have put it higher on their UCCA form (mean position = 2.1) than the average applicant (mean

position 2.7). Figures 2-2, 2-3, and 2-4 show the mean position of St. Mary's for the applicants in particular categories. interviewed tended to have placed St. Mary's slightly higher than those who were not interviewed (2.4 vs 2.9, t = 5.8, p<0.001). Those made offers without interview had placed St. Mary's particularly high, but often had only put St. Mary's or St. Mary's and Oxbridge on their UCCA form, having delayed entry after fulfilling the requirements of a conditional offer the previous year. Amongst those made conditional offers, those who withdrew had placed St. Mary's lower (mean=3.0) than those who accepted the offer (mean=2.0) (t=5.6, p<0.001). Similarly, those who accepted an unconditional offer had placed St. Mary's higher (mean=2.1) than those who withdrew from such an offer (mean=2.8) (t=2.3, p<0.025). Thus the discrepancy between applicants and acceptances is partly due to the medical school itself tending to interview those who placed it higher, (although there was no tendency for position on the UCCA form to influence the likelihood of an offer after interview), and partly a result of applicants who placed St. Mary's higher tending to accept the offer that it made.

Conclusions.

In this chapter I have given a broad descriptive survey of the process of medical student selection in one London medical school, and the grounds on which the population surveyed is considered to be representative of candidates to other medical schools in the University of London, to other universities in England and Wales, and in Scotland and Northern Ireland. As such no hypotheses have been tested but rather the 'natural history' of the process has been described, thereby completing an obvious gap in the current literature. In further chapters

I shall analyse in some detail those factors which determine the individual elements of the process, and will attempt to determine whether or not the system is a 'fair' one.

Figure 2-1. Summarises secular trends in selection at St. Mary's Hospital medical school from 1969 to 1981. Figure 2-la (top left) shows the number of interviews, conditional offers, unconditional offers, and entrants for each year. Figure 2-lb (bottom left) shows the total number of applications to St. Mary's (), the total number of applicants to UCCA overall (), and the number of St. Mary's applicants as a percentage of UCCA applicants (). Figure 2-lc (top right) shows the percentage of interviewed candidates who were not made offers (). Figure 2-ld (bottom right) shows the percentage of applicants (), interviewees () and entrants () to St. Mary's, and of medical applicants to UCCA () who were female.

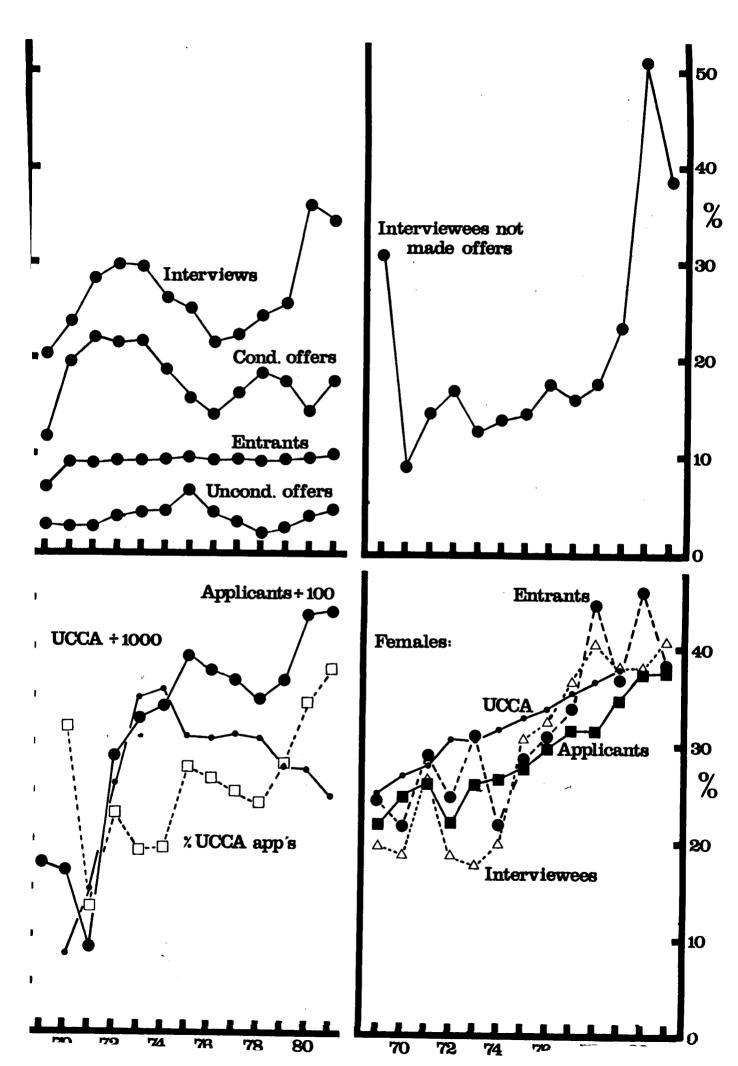


Figure 2-2. Summarises the progress of applicants through the selection process, and their eventual destinations. Figures in the boxes show the total number of individuals (N), the number of UK nationals (UK), the number of individuals who returned questionnaire 1 (Q1), the mean position of St. Mary's on the UCCA form (POS), the mean O-level grade (0-LV) and and the mean A-level grade (A-LV) of those in the particular box (see Key for the location of the various items). Figures in circles represent the numbers of individuals in particular combinations of intermediate and final destinations. Numbers alongside arrows are the numbers of individuals involved. Abbreviations: U/C OFFER: unconditional offer: COND. OFF.: conditional offer; WAIT LIST: waiting list; NON UK ADD: non- UK postal address; LOND. MED: other London medical schools; NON-L. MED; non-London, non-Oxbridge medical school; NON-MED: non-medical university course; NOT ACC: not accepted for a university course.

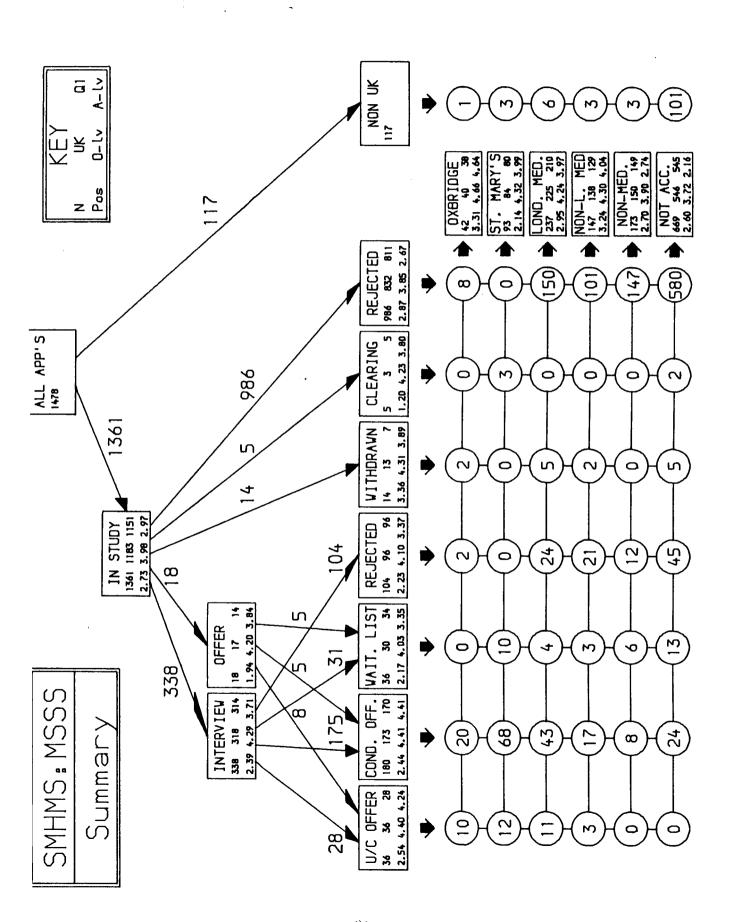


Figure 2-3. Shows the fate of candidates made unconditional offers at St. Mary's. For items in boxes see Figure 2-2. Abbreviations; PROV ACC: provisional accceptance; DEF ACC: definite acceptance. Otherwise see Figure 2-2.

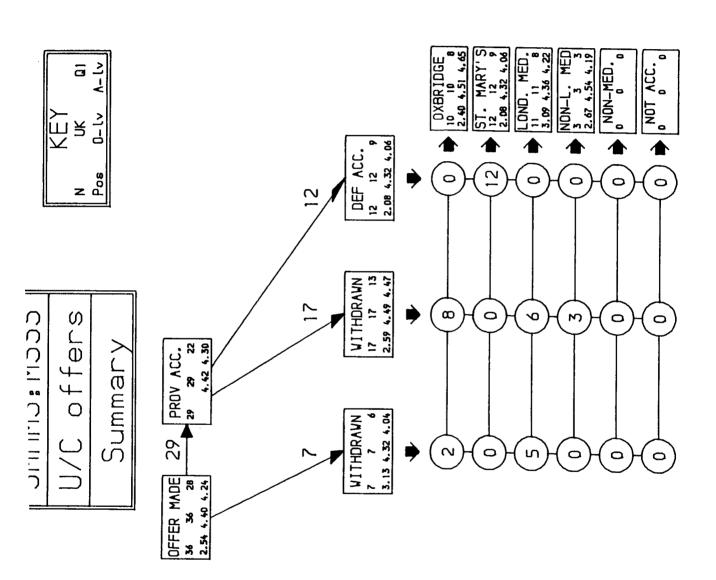
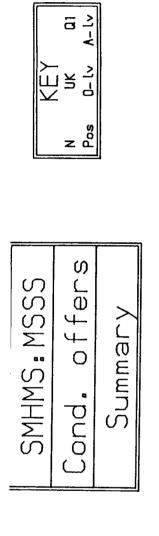


Figure 2-4. Shows the fate of candidates made conditional offers at St. Mary's. For items in boxes see Figure 2-2. Abbreviations: A-LEVELS? : candidates awaiting A-level results; UCCA 82: candidates reapplying to UCCA for admission in October 1982. Otherwise see Figures 2-2 and 2-3.



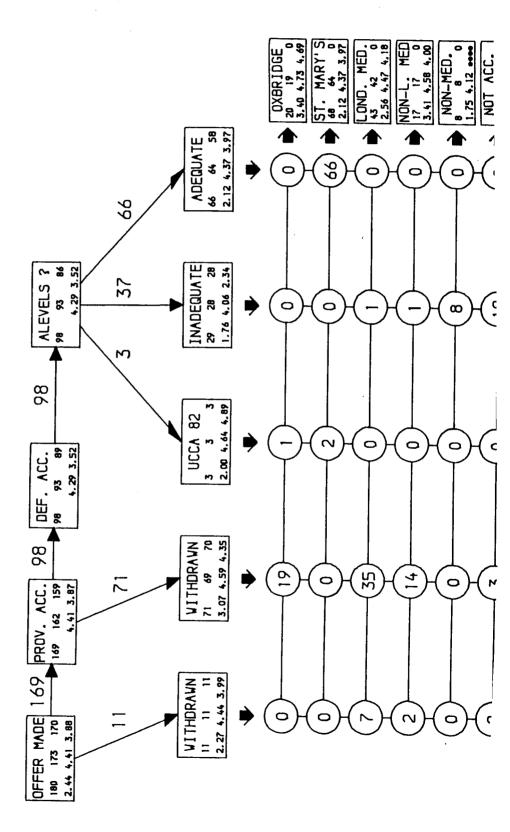


Figure 2-5. Shows (a: top) the fate of candidates and (b: bottom) the average 0- and A-level grades, and the likelihood of a candidate being interviewed or of returning questionnaire 1, as a function of the decile of time of receipt of the application at UCCA. The median date of each decile is shown between the two parts.

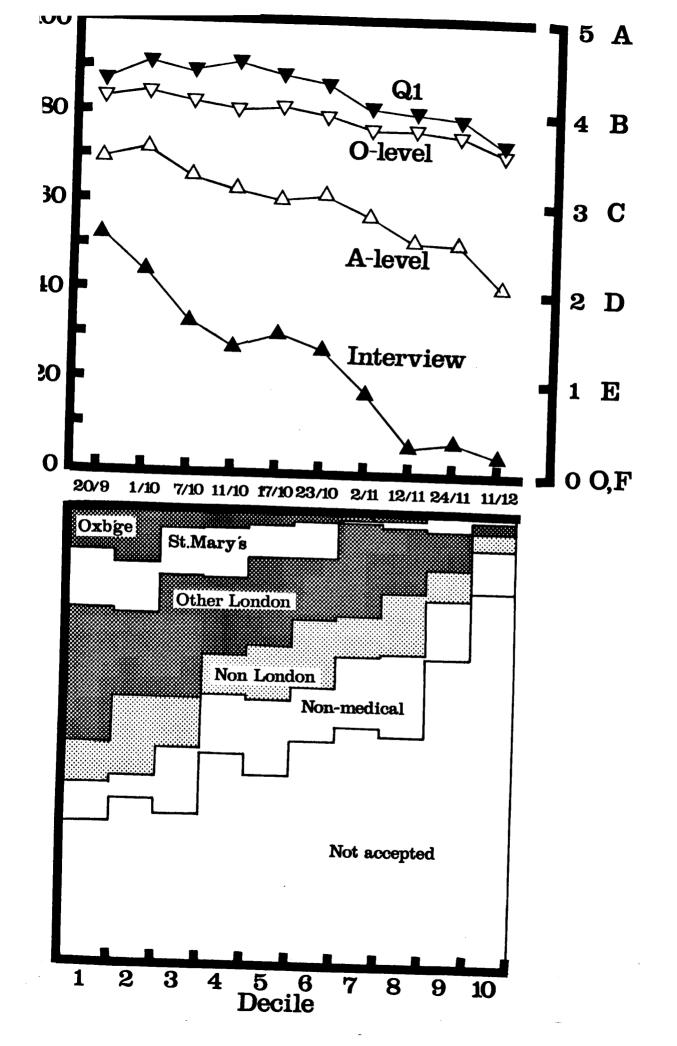
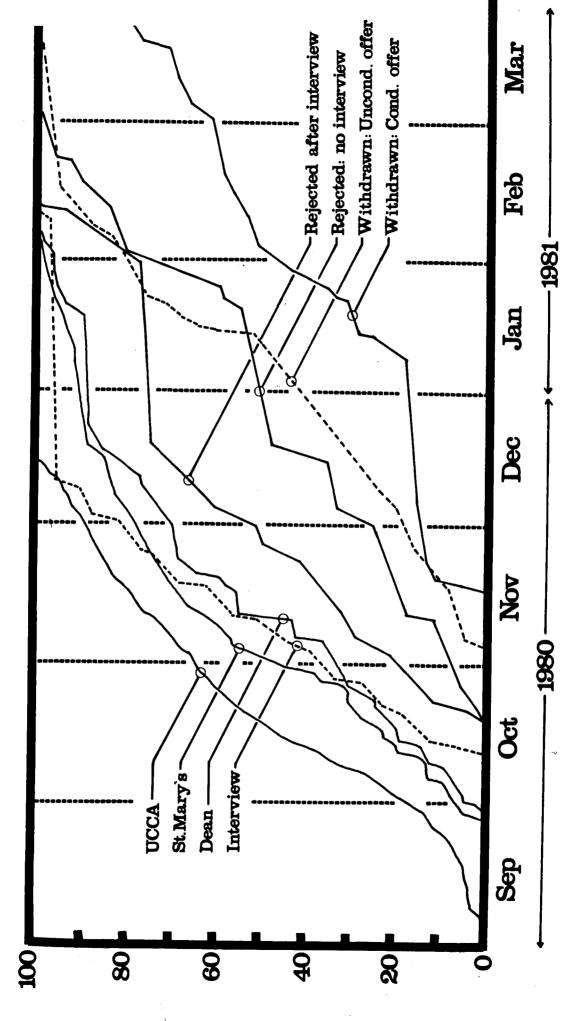


Figure 2-6. Shows the cumulative numbers of individuals in particular event categories by date. Notes: UCCA: date of receipt of application at UCCA; St. Mary's: date of receipt of application at St. Mary's; Dean: date application first read by the Dean; Interview: date interview held. Dates of rejection and withdrawal are on receipt or notification at St. Mary's.



Uctober 1981, and the numbers of those applicants and acceptances who were included in the St. Mary's Medical Student Selection Survey. applicants

licants	piace school	1 In survey	2.9 Cambridge 3.5 Oxford		19.0 Charing Cross 8.9 Guy's 21.6 King's 13.6 The London 25.6 The Middlesex 28.6 Royal Free 9.6 St. Barts	5.0 St. Mary's 9.5 St. Thomas' 7.6 University 2.2 Westminster		7.0 Birmingham 7.7 Bristol 9.9 Cardiff 15.0 Leeds 13.8 Leicester 8.0 Liverpool 11.8 Manchester 24.6 Newcastle 14.0 Nottingham 12.4 Sheffield 19.4 Southampton		16.5 Belfast 10.7 Aberdeen 5.3 Dundee 7.3 Edinburgh 14.0 Glasgow 5.0 St. Andrews	
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Table 2-2: Shows the nationality of non-British applicants.

Bangladesh	2	Cameroon Republic	2
Canada	2	Colombia	2
Cyprus	3	Eire	8
Ethiopia	1	Germany, West	2
Ghana	3	Greece	1
Grenada	1	Hong Kong	2
India	25	Indonesia	1
Iran	8	Iraq	1
Jordan	2	Kenya	2
Kuwait	1	Lebanon	3
Libya	1	Malaysia	38
Malta	1	Mauritius	1
Netherlands	1	New Zealand	1
Nigeria	11	Norway	1
Pakistan	7	Phillipines	1
Poland	3	St. Vincent	1
Sarawak	1	Sierra Leone	2
Singapore	2	South Africa	1
Spain	1	Sri Lanka	12
Sudan	1.	Syria	1
Taiwan	1	Thailand	2
Trinidad	1	U. S. A.	7
Zambia	2	Zimbabwe	2
Stateless	3		

sle 2-3: Non-medical courses specified on their UCCA form by St. Mary's applicants.

dical' subjects.	26	
Veterinary science		16
Dentistry		
Medical biology		6 4
logical Sciences.	31	4
Biochemistry		_
Pharmacy/pharmacology		3
Physiology/Immunology		13
Biology/Microbiology/Zoology		4
Genetics		9
Agricultural science		1
vide regret activities		1
sical sciences	7	
Natural Sciences		
Physics		5
•		2
nematics and computing	5	
Maths		5
ineering	6	
Engineering/Electrical		
Engineering/Electronics/		
Civil Engineering		
		6
lal sciences	_	
	2	
Psychology		_
		2
ers	•	
	1	
Law		•
		1

Table 2-4: shows courses studied by those candidates who were not accepted for medicine.

'Medical' subjects.	15	
Medical biochemistry Medical cell biology Medical physics Medical biology Medicinal chemistry Nursing		5 1 2 2 1 2 2
Dentistry		2
Biological Sciences. Physiology with Anatomy/pharmacy/biochemistry Pharmacology/pharmacy Pharmacology with biochemistry Biochemistry Biochemistry with chemistry Biology Biology with geology Applied biology Human biology Zoology Zoology with Marine zoology Plant science Genetics Genetics with cell biology Genetics with biophysics Microbiology Agricultural sciences	99	8 6 13 1 29 1 18 1 1 2 4 1 3 3 2 2 2 4
Agricultural sciences Physical sciences Chemistry Chemistry with education Chemistry with administration Colour chemistry Industrial chemistry Physics Physics with maths Natural sciences	25	14 1 1 1 1 4 1 2
Mathematics and computing Maths Computing	8	4
Engineering Engineering Mechanical engineering Civil engineering Chemical engineering Electrical engineering Electronics Ergonomics	12	2 1 1 4 2 1
Social sciences Psychology Psychology with philosophy Anthropology Archaeology Economics	8	2 1 1 1 3
Others Law English	6	5 1

Table 2-5: Shows offers made to candidates with conditional offers.

A-level grades	O-level grades	N
A	-	2
С	_	2
BB	_	. 3
BC	- -	1
BBB	-	2
BBC	-	1
BCC	-	129
BCC	С	1
ccc	-	31
CCD	-	1
-	A	1
-	В	3

e 2-6. Shows the interval in days between various events during processing of an application (to nearest half day).

	То	Median
ral at UCCA	Processing in St. Mary's Office	15.0
ssing in St. Mary's Office	Dean's initial assessment	3.5
s initial assessment	Interview	13.5
view	Notification of unconditional offer	3.5
view	Notification of conditional offer	4.5
ssing in St. Mary's Office	Date of rejection if candidate not interviewed.	41.5
view	Withdrawal from unconditional offer	71.0
'ication of u/c offer	Withdrawal from unconditional offer	66.5
view	Withdrawal from conditional offer	93.5
ication of cond. offer	Withdrawal from conditional offer	85.5