

University College Dublin

**THE DOCTOR OF MEDICINE DEGREE REPORT**

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| **SECTION A: Candidate & Research Degree Details** |
| Candidate Name |  |
| Student Number |  |
| Thesis Title*(Please include full title)* |  |
| Principal Supervisor |  |
| UCD College |  |
| UCD School |  |
| Date of viva voce |  |

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| **SECTION B: Examination Committee Recommendation[[1]](#footnote-1)** |

***Award Degree****: no corrections required*

***Award Degree****: corrections required*

***Award Degree****: revision without re-examination*

***Revise thesis and submit for re-examination***

***Do not award Degree:*** *recommendation that the candidate transfers to an appropriate graduate programme*

***Do not award Degree***

**Is the thesis worthy of publication as a work of serious scholarship?**

Yes, in whole Yes, in part only No

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| **SECTION C: Examination Declaration** |
| **Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***Internal Examiner***Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***(Internal Examiner 2 – for a candidate with pre-2006 PhD registration)***Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***Extern Examiner***Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***(Extern Examiner 2 - where required)***-----------------------------------------------------------------------------------------------------------------------------------------------**I confirm that the thesis examination and the viva voce have been carried out in accordance with the UCD Academic Regulations, and that the report, unless otherwise stated, is a joint report submitted on behalf of all the examiners.**Print Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Chair of Examination Committee**Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

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| **SECTION D: Examination Committee Report***Minimum 500 words, all sections of the report form must be completed. The report must be submitted as a joint report – written in the plural – and refer to the collective analysis of the examination committee.* |

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| **Brief summary of the thesis:***Please include a brief summary, in non-technical terms, of the thesis and an outline of its principal conclusions and indicate whether any academic papers have been published arising from the research.* |

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| **Strengths of the thesis:***Please outline the strengths of the thesis and indicate if it merits the award of the degree based upon an analysis of the strengths and the academic quality of the thesis.* |

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| ***Weaknesses of the thesis:****Please outline any weaknesses of the thesis with a high level summary of any corrections that may be required by the candidate.* |

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| **Recommendation of examination committee and rationale for recommendation:**Please provide a clear rationale for the outcome of the examination and the recommendation to award the degree or otherwise. |

**APPENDIX**

**Examination Committee Recommendation Definitions (see section B)**

**Award degree***– no corrections required*: this option should only be selected when the thesis can immediately be printed as the final hard-bound copy.

**Award degree** *– corrections required*: this option should be selected when only typographical, grammatical or formatting changes are required. The internal examiner should confirm that the corrections have been carried out when they have been completed to the satisfaction of the examiners.

**Award degree** *– revision without re-examination*: this option should be chosen when changes are required to the thesis which involve additions to or re-writing of the text and the examination committee is happy that these revisions can be overseen by the internal examiner.

***Revise thesis and submit for re-examination* -** this option should be chosen when the examination committee agrees that both examiners must examine the revised thesis and make a judgement as to whether the thesis is worthy of the award of the degree or otherwise.

**Do not award degree** *– recommendation that the candidate transfer to an appropriate graduate programme*: this option is chosen when the examiners are agreed that the thesis is not eligible for the award but that another graduate award may be more appropriate. It is important that the joint report of the examiners clearly justifies a recommendation not to award the degree. This option requires that the Graduate School considers the recommendation to transfer to another programme and implements this decision where appropriate.

**Do not award degree** - this option should be chosen when the examination committee is agreed that the research is not worthy of the award. It is important that the joint report of the examiners clearly justifies the recommendation not to award the degree.

**MD Degree Report Submission**

Please submit completed report to acce@ucd.ie or ACCE, Assessment Unit, Tierney Building, UCD Belfield, Dublin 4, Ireland.

Further information including the Policy on Theses in Graduate Research Programmes is available at:

<https://intranet.ucd.ie/registry/assessment/acce.html>

1. Please refer to the definitions of the examination committee recommendations in the appendix [↑](#footnote-ref-1)