# THE BLACK BAG

BRISTOL MEDICAL STUDENTS' MAGAZINE

Spring Edition 2026

The University of Bristol Medical Students' Magazine
Est. 1937

Editor-in-chief (hailstorm): *Will Palmer*

**Contributors (Spring Chickens):**
Magazine Polisher CT2: *Yashvi Patel*
Ex-retiree: *Ella "One last mission" White*
Your new supreme leader: *Flora MacInnes*
Sleepy crook: *Joe "I wasn't impeached" Phillips*
Her esteemed ladyship, the mental Polish girl: *Wiktoria Kotynska*
Bready or not: *Charlotte Wood*
Her other esteemed ladyship: *Sara Hussnain*

**Special thanks to:**
*The Galenicals Committee – or at least those of them who sent me a photo and a fun fact*
*Everyone who voted for me to stay on as editor*
*Everyone who voted to re-open nominations instead*

*You (the reader) xx*

The views represented within this magazine are not necessarily the views of the editor, nor of Bristol Medical School, nor its students.

This is a satirical magazine containing cynicism and sarcasm, it is not to be taken as fact or as genuine statements.

# The Black Bag

Spring Edition 2026


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*Note from the editor: Some of you may have noticed that this "Spring" Issue is releasing on the Solstice – very arguably no longer Spring. Well… yeah… and what? We had some behind the scenes issues (eg. Major procrastination from yours truly). Just be thankful you've got this sacred script in front of you now.*

*Speaking of my procrastination… you might notice that there are some formatting issues. I have decided it is too late to fix them. So get over it.*

So here is another issue, and regrettably for you lot, I am still at the helm after yet another successful run against RON.

I promise that the upcoming year of Black Bag will be enormously ambitious. This year we have produced a staggering 4 issues (we're practically a quarterly!) and next year I plan to increase this! We'll do issues MONTHLY – wait no! – WEEKLY! – wait no! – DAILY! – Screw that, HOURLY BLACK BAGS! No longer will you need to learn how to do a MoCA, just ask your patient some questions about the latest Black Bag – and if they can tell you anything about it, then you can guarantee they're delirious!

Thankfully I won't be taking on this challenge alone, below you can meet the poor souls who will be caretaking me in my advanced age (I've recently turned 23, sadly). Little do they know what they're in for…

Beyond that, though, with a heavy heart we must say farewell to some of Black Bag's biggest hitters of all time, who are moving on to smaller, worser things, such as saving lives as F1s. Someone needs to step up and fill their shoes, that someone could be you! Have a think about it, next issue is in September (or sooner…..?).

The issue before you, though, is another instant smash hit. We have a fantastic line-up of stellar articles, including some goodbye pieces from some legends of the Black Bag and the medical school at large.

Hopefully somewhere amongst the committee fun facts, medical school retrospectives, and theoretically perfect bleeps you can find a little piece of joy in this exam season.

Good luck,
Will

**The BRAND SPANKING NEW BLACK BAG COMMITTEE**

*Name*: Yashvi
*Role*: Sorry, it's a secret
*Likes*: Writing, I guess; oranges, coconut, water
*Dislikes*: Pens, the colour orange, coconut water

So you might be thinking 'what does she bring to the table?' and to that I say: 'Chairs!'. Apart from genuinely awful jokes, I'll try to keep the magazine clean and polished (see image for proof), and of course keep up with the slightly emo, slightly sarcastic aesthetic.

*Name*: Ella White
*Hobbies*: Collecting the parkrun alphabet, being in Yeovil, reduction shopping in Tesco, sitting on public transport
*Excited for*: Creating some groovy new issues for the medics of Bristol – it'll be a movie.

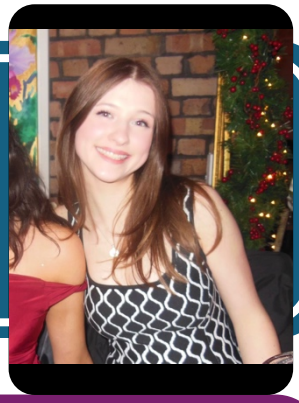
## Galenicals

What is Galenicals? Who is Galenicals? Why is Galenicals? We're only going to answer one of these questions, as much like the guidelines for asthma management, it has gone through its annual update to much confusion.

*Note from the editor: In a surprising twist this year, asthma guidelines have not been updated.*

*Name*: Anastasia
*Role*: Vice-President
*Year*: 4th year
*Fun fact*: I can speak Greek
*Excited for*: The medic family nights!

*Name*: Flora
*Role*: President
*Year*: Intercalating in functional and clinical anatomy
*Fun fact*: My Hiatt Baker flat in 1st year had 5 medics
*Excited for*: Welcoming the new first years and all the events!

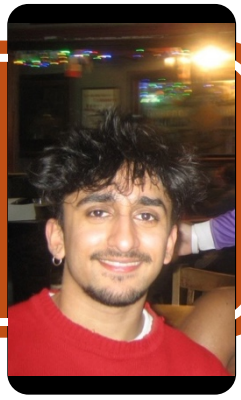


*Name*: Yasmin
*Role*: Vice-President
*Year*: 5th year
*Fun fact*: I came last in everything at sports day but I've held the Olympic torch
*Excited for*: Working with the team organizing more inter-year events and meeting people!

## HAIL TO THE CHIEF(s)

*Name*: Hugo, Emily, Kate, Niamh
*Role*: ENTs
*Year*: 3rd year
*Fun fact*: There's four of us!
*Excited for*: Running a million fun events

*Name*: Saurav
*Role*: Social Media
*Year*: 4th Year
*Fun fact*: Once I fell down a hill as a dare. It hurt.
*Excited for*: Coming back to Bristol after intercalating!

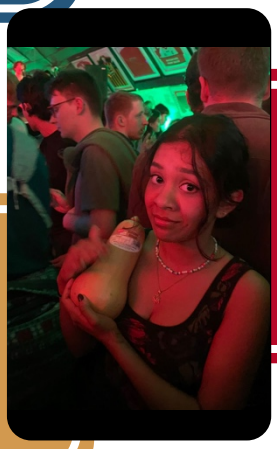


*Note from the editor: For maximum confusion, the years listed are which year the committee will be in NEXT academic year 2026-27 (assuming their exams go well).*

*Name*: Samuela
*Role*: Secretary
*Year*: 5th Year
*Fun fact*: I put my face in a looksmaxxing app and got told I have a perfect chin to philtrum ratio
*Excited for*: Helping to showcase all our amazing subsocs through the newsletter

*Name*: Tomi
*Role*: EDI
*Year*: 5th year
*Fun fact*: My hair has been every colour of the rainbow
*Excited for*: Finishing fourth year!

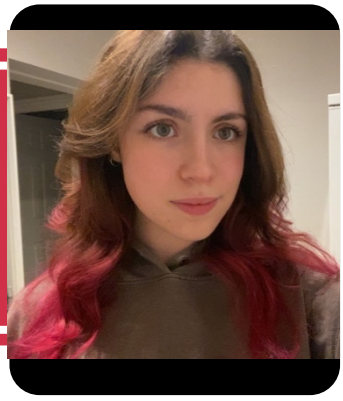
*Name*: Poppy
*Role*: Website & Merch Officer
*Year*: 2nd year
*Fun fact*: I worked in the restaurant where they film First Dates
*Excited for*: No anatomy in TB1!



*Name*: Sanskriti
*Role*: Peer-2-Peer Education
*Year*: 5th year
*Fun fact*: This squash belonged to a man on his stag do and it was a test of his ability to look after a baby – he gave it away.
*Excited for*: Not having anything to do in 5th year because 4th year is a lot.

*Name*: Charlotte
*Role*: Peer-2-Peer Education
*Year*: 5th year
*Fun fact*: Bread is my mortal enemy
*Excited for*: Defeating bread once and for all

*Name*: Ashley
*Role*: Alumni Director
*Year*: 3rd Year
*Fun fact*: I have a surprisingly enthusiastic knee reflex
*Excited for*: Not walking up any hills



*Name*: Anni
*Role*: Subsoc Director
*Year*: 3rd year
*Fun fact*: I was the unofficial Brass Pig St Paddy's Day mascot 2025
*Excited for*: Supporting all the Galenicals subsocs to get more members

*Name*: Will
*Role*: Black Bag Editor
*Year*: 5th year
*Fun fact*: You know me, you love me, you owe me £3.50
*Excited for*: Delegating every single job for Black Bag to the new committee and still taking all the glory– thanks guys!

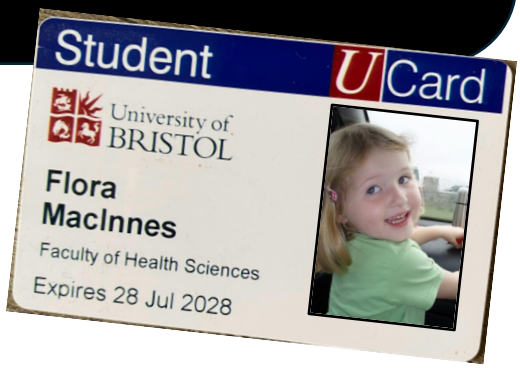
## Getting to Know Your Galenicals President

Bristol medics,

Thank you for your votes and well wishes. I am thrilled to once again play a part in making our medical school a happy and fun community! You may know me from the sports scene or Clicendales; however, for those unfamiliar with one of the only Stopfordians in Bristol (HB I love you), I've got everything here you need to know.

My plans for Galenicals:

1. Change everyone's trust badges to baby pictures (to show who they're really asking to plot the graph of eGFR against creatinine)
2. Embezzle all the money into sports
3. Develop staff-student professional relationships by making all CTFs go to the triangle every Saturday
4. Ban haikus as EC art pieces and make everyone do an interpretive dance
5. Up the northern quota to at least 50% of the cohort




A little bit about me:

1. I'm from Greater Manchester/Cheshire
2. No, I just support whichever Manchester football team is on the screen
3. I got a needle stick my first ever time in theatre
4. I've stolen in the name of guinea pigs
5. I once saw a CTF in la rocca dressed as a Wise Man

All jokes aside, I am so excited to continue advocating for everyone in the medical school and academies. We have a wonderful committee this year with great ideas. Thank you to everyone who voted and a massive thank you and well done to everyone who applied, whether you got the position or not. If there's one more thing to know about me it's that I LOVE the Black Bag, so you may be hearing more from me next year…

Please do not hesitate to reach out to med-galenicalspresident@bristol.ac.uk with any questions, concerns or suggestions.

Your humble servant,
*Flora Elizabeth MacInnes*
(pronounced muh-kih-niss)

## Galenicals President: Wrapped

*By Joe Phillips*

*Note from the editor: This article contains exaggeration and untruths from the start, including attributing to me qualifications, none of which I have at time of writing. Keir, hit me up about the Lord thing x*

*Parental guidance is advised.*

In a feat of inspired wisdom from Lord Will Palmer MBE MP MSc MVP MHomeopathy, I have been asked to recount the highlights and frequent lowlights of my time as President of the moaning-minnie-based terrorist organisation otherwise known as Galenicals. I fear this may read as the narcissistic ramblings of a boring old fart. If so, sorry not sorry.

So, the article no one asked for, here are my 100% authentic journal entries of my time as Pres. Please be warned all the below is satire and probably even a lie! Despite what your eyes will tell you in reading the below, I greatly respect: Bristol Medical School staff; Intercalation, especially mine; freshers, as a collective; the Year 3 Migrant Health Student Choice Project; and most importantly, the nightclub formerly known as Mbargos.

**Easter 2025**
Sat down for my first meeting (of many), to receive my handover - with the level of terror I imagine an F1 does when holding the overnight bleep for the first time. Considering I'd been VP for an entire year, you'd think I'd be less scared of being in charge.

Proceeded to ruin my holidays by scheduling (apparently) 40 million "brief" meetings to get to know the committee - an Easter-ruining entirely of my own creation, woe is me.

*Note from the editor: Flora has learnt from this mistake and refuses to meet anyone on the Galenicals committee at any point for any reason.*

**May 2025**
I do not do conflict. So, when, in my very first committee meeting as President, literally everyone turned against my (in fairness, crazy commie utopian) idea of abolishing memberships - let's say I didn't exactly weather my first disagreement with assertive leadership. 'Caved immediately' is probably a good descriptor? Not to worry, a year of this will surely make me more assertive... right?

**June 2025**
With Student Choice flopping leisurely into my life - especially leisurely considering my choice of Migrant Health (sorry Trevor, I promise I did loads of work) - I had no excuse not to have a Galenicals meeting a day. Goodness knows what about. I don't even know enough people to fill a calendar month with meetings... and yet the impossible was achieved. I suppose planning the background lighting colour scheme for the Medic Fresher's Fair counts as work… CPD points, anyone?

**Summer 2025**
Try enjoying a family holiday with Outlook notifications going off every 4 minutes. Let me tell you, Ha Long Bay (cheeky holiday boast) is a lot less magical when you're agonising over med school politics. I think I spent more time talking to David Rogers and Jo Howarth than my own parents. Not that that caused any Freudian issues…

On the plus side, got asked for an interview by BBC (*Points West* – not the big one). Maybe this President business is the ego-feeding clout that I was promised? I said yes and was promptly told we didn't make the cut. So much for my 20 seconds of fame...

**September 2025**
The freshers (*shivers*) hit the ground. I am forced to give a chipper lecture to them about Being a Medical Student. I think the med school were going for "be resilient, go to all your lectures, try not to get GMC'd". Instead, we spent an hour giving out Celebrations, warning them that Daisy's did not magically become a good club by changing its name from Mbargos, and shoving memberships down their throats. The Daisy's warnings clearly fell on deaf ears. The membership-dragooning did not (MUAHAHAH... ka-ching!).

**October 2026**
Being an intercalator now, and a lazy one at that, I didn't exactly notice the change from summer into termtime. Galenicals chugged on, somehow taking up double the amount of time as my course. I spoke in front of 95 med school staff, and apparently shocked them with the news that med students are wanting to do QIPs so they're not completely unemployed in 3 years' time. After all, why teach us how to do an audit when you can make us do a Pecha Kucha?

**November 2025**
Always a stingy penny-pincher myself, knowing how to price an event costing us £15,000 was a task way beyond me. 14 meetings later, we finally decided a ticket price for the Halfway Ball, before changing it 8 more times. Eventually, we probably ended up giving members an absolute steal. Not that I'd know, I'm awful at maths. (To anyone deeply concerned about my flippancy - please be advised my trusty VPs and Treasurer make all the actual decisions around here. I really am just a pretty face... A figurehead, kinda like the Queen, or Kier Starmer).

**December 2025**
Student-Staff Parkrun, the Christmas Ball, Bath on Ice, Sober Paint & Sip, Holiday Potluck, even anatomy teaching - any excuse not to admit it's bloody freezing and depressing as anything outside. In full disclosure, I didn't plan a single one of these events - but that's the point of

being the merciful tyrant of a committee of twenty-six, no? (I appreciate every single one of you deeply, thank you for all your hard work). Went home for a relax week of seeing fam... oh wait, sorry, no. 6 hours of med school meetings as an early Christmas present! Hey, at least we achieved the Swap Window policy... only for none of my friends to use it to swap in with me.

**January-March 2025**
A time-travel vortex of 3 months, worthy of a Doctor Who intro. Still baffled as to where all that time went. Spent most of it planning the succession of my glorious dictatorship - in other words, counting down the days like a prison inmate until the next lucky bugger would take my place (kidding, Flora!!).

No, that's unfair to the rest of committee who *actually* worked hard - we did achieve some stuff. Most shockingly, the Grad Ball team successfully hypnotised the owners of King Weston House (the backdrop to some infamous activities during a Spring Ball long long ago...) to let the loonie medics back in. We have pinky promised we're going to be angelic - don't fail us Year 5.

**April 2026**
In the blink of an eye, we're back here again. Easter at home, as if the whole year hadn't happened. To be fair, to many medics, maybe a year of my tenure, it hadn't. However, hopefully (like a public toilet) I've left Galenicals in at least as good a condition as I found it. Plus an extra Pub Crawl. And an updated website no one uses.

*Note from the editor: Fun fact, almost all the issues of Black Bag ever are available on the Galenicals website RIGHT NOW*

In my last meetings finishing up the year and handing over, I get a bit emotional (anyone who knows me will not be surprised). Despite the exhausted-sounding cynicism of the above journal, I have LOVED this year. I have met so many incredible people and learnt so many skills: how to not tremble when approving invoices larger than my student loan, how to end emails to thousands of medics with "Lots of love xx", and how to be a little bit less conflict averse. Well, maybe not that last one.

*An interpretive dance of appreciation is owed to everyone who got involved in Galenicals this year – either planning projects and events, or attending. But especially, to Samuela Sam-Orlu and Lakshmi Aggarwal – the universe's most incredible VPs, without whom I literally would've been a headless chicken; also, to David Rogers and Jo Howarth – who I can say are brilliant people and both genuinely care so much about improving things for all medical students. It's a common misconception that the med school doesn't listen – Jo and David do.*

**Royal College of Pathologists Science Communication Prize - £500**

Deadline for applications 27th July

More info: https://www.rcpath.org/discover-pathology/competitions/science-communication-prize.html

JOIN SEXPRESSION COMMITTEE FOR 2026-2027

Interested in **sexual health education**? Want **valuable teaching experience** for your CV? Sexpression trains students to **deliver engaging and inclusive workshops in local schools**, helping young people access the sex ed they deserve. Applications are now open to join the Bristol Sexpression Committee!

**@SEXPRESSIONBRISTOL ON INSTAGRAM**

**LIBRARY TO STAY OPEN!**
Good news for all you nerds, as, thanks to Samuela (VP) and Richard Kielb's hard work, the ASS library and the med school library will continue their regular hours for the exam period.
This is a trial so make sure to make use of it now to guarantee it stays open in future!

## Scandals, Absinthe, and OSCE stations – Five Years in the Medical Ton

Dearest Gentle Reader,

It is with a most curious mixture of sorrow and satisfaction that this author pens her final Black Bag article as a medical student. As one stands upon the precipice of becoming a Doctor of the Realm, it seems only fitting to cast one's mind backwards - to reflect on some of the calamities, tragedies, missteps, and quiet triumphs that have defined one's time in the healing arts.

Let us begin, as all great tragedies do, with this author's first night in the fine city of Bristol, Somerset.

Upon my arrival, I made the acquaintance of a gentleman by the name of Ben, who happened to also be lodging with me within the same establishment – Unite House. Unfortunately, Ben was not a fellow medical student, but a most refined physicist. He extended to me an invitation to join a soirée during the so-called "*Freshers' Week*". We met with the guests at the wonderful establishment The Mother's Ruin, where, in a misguided attempt to impress, I ordered a small glass of absinthe. Alas, fate intervened. Prior to the drink's arrival, I had managed to spill water upon myself in such a manner that I appeared to have suffered a most unfortunate accident. Mortified beyond recovery, I made a hasty exit and retired to my chambers, where I wept with all the dignity of a debutante undone.

Thus began my time in Bristol.

My arrival in the new Educational Circle ("case-based learning" group, as Professors of the institution had referred to it) was similarly fraught. Firstly, the ladies of this circle were, without exception, striking in appearance; yours truly could never compete! One could only dream of competing with ladies of such beauty; Bristol students of the illustrative arts would have marvelled at these ladies, and perhaps avoid meeting eyes with yours truly. A spinster, I believed I would become. Not to mention the ladies were formidable in intellect, and this author's hard-earned UCAT score of 3080 failed to be a fair representation of her skill.

It was not long before disaster struck again.

In a moment of catastrophic carelessness, this author sent a message intended for a gentleman caller… to the entirety of her Educational Circle. A scandal! A social death! For a fleeting moment, I considered immediate exile. And yet, a revelation soon followed: the ton, though ever eager for gossip, possesses an attention span most mercifully brief. Within five minutes, Lady Wiktoria was quite forgotten, as the ton returned to their alcoholic beverages, their digital encyclopaedia of Anki and of course gossip about more interesting nobility (such as the Lords of Rugby, Ladies of Netball, and Publishers of PubMed Articles).

Yes, perhaps the Educational Circle had thought of this author as peculiar. However, over her time in Somerset, this author had grown to enjoy being the entertaining jester from Eastern Europe at every ball, or as they presented it, "the mental Polish girl at the party". Why yes, though it might have taken your Lady longer to bloom than the other ladies of the ton, this author believes that her ability to create laughter and form connections has always been a formidable strength.

Allow me to inform you of another calamity.

Once upon a time this author believed that she would be the Diamond of the season. I had believed that I would be lucky enough to experience my very own Princess Meredith Gray moment. In my greatest fantasies, one of the great neurosurgical Professors would pose an impossibly difficult question, and the lecture theatre would hush in anticipation. The lights in the lecture theatre would dim, and the camera would pan to this author giving a flawless answer.

All heads would turn towards me in awe, and the Professor would give me a beaming smile. From that moment, the wise Professor would take me under their wing and help me to publish 25 papers, because in that very moment, they saw something special within me.

Reader, you will not be surprised to learn that no such moment occurred.

This author is disappointed to announce that she never did live up to this dream, and was instead labelled as "very abrupt", "disengaged and like a tick box exercise", and "reasoning was not appropriate" in her 4th year practical assessments (OSCEs). And yes, even now, when a colleague casually mentions their education at Oxford, there remains in my heart the faintest ache of what might have been. But the ambitions one is denied are not so easily forgotten.

If this author could rewrite her own history, she would have liked herself much more despite her flaws. She would have embraced friendship much earlier within her studies of the medical arts, rather than trying to cut out social time for the sake of productivity. She would have released her grip on the life she believed she was *meant* to lead, and instead found joy in the one unfolding before her.

She would have realised that the joy of achieving a milestone only lasts so long, and that the important part was the enjoyment. She would have placed less value upon the opinions of gentlemen. She would understand that pain and failure are inevitable, and merely concealed more effectively by others. She would have learned to see her life not as a series of shortcomings, but as a collection of lessons.

For in the end, it was never about becoming The Diamond.

It was about doing one's best to simply become a gemstone – not necessarily as dazzling at first glance and not necessarily the exact shape that was envisioned, but the right gemstone for oneself.

And if one can find humour along the way – well, that may be the greatest success of all.

Yours most sincerely,
*Lady Wiktoria Kotynska of Stoke-on-Trent*
*An Almost-Diamond of the Bristol Medical Ton*

**Getting things Wrong at med school – an anonymous look at the MBChB**

I initially found it pretty lonely at Bristol. I could blame covid for that, but it seems my colleagues who also started in 2020 didn't have the same issue. Even when things started to open up in second year, I still felt very disconnected from the medical school- I didn't like to drink, and that made a huge difference to what events I considered attending. In third year, I had two outplacements. It was only by the end of the second placement that I started to feel like medicine could be this co-operative thing- I finally went along to the pub trips in Swindon (big up Wine Wednesdays at the Spotted Cow) and watched TV on the Hub screen with my classmates in the evenings. I never made any lifelong friends from any CBL group, though. Seeing people at whole cohort sessions in Bristol with their tight knit friends, I felt so confused. When did you have time to develop these connections? What had I got so wrong? But by that time, I had come out of my shell massively. Turns out, developing confidence on the ward also translated pretty easily into confidence socially. Fourth year in Bristol was a breeze, because finally I was in my city and surrounded by people who were on the same page. It was almost sad to meet some amazing medics at the end of fourth year or during fifth year- I felt that if we had met in first or second year we might have stayed friends and things might have been different! Now that I am leaving Bristol, against my will, mind you, for my foundation years, it's bittersweet. I finally feel like part of this city, like part of this med school, and now I'm getting dragged northwards to do this job. But at the same time, it feels like an opportunity to get things right in this new city, with my new colleagues. Nowhere is as cool as Bristol, but there are some pretty cool medics out there (I have now learned). Anyway, there are my quite serious and genuine thoughts about Getting things Wrong at med school.

## Some other reflections from 5th years on their time at Bristol

Well look, here it is: it's been really great. The best years of my life. Genuinely found myself, my passions, friends for life. I've travelled around a fair bit and no matter where I go, Bristol remains my favourite place in the world 🌍

Somehow on my first night shift on T&O I was watching Naked Attraction with the registrars. It was one of the weirdest experiences of my life.

*We here at the Black Bag wish all the best to those 5th years who will shortly be bravely facing the highs and lows of being an F1.*
*Special shout-out to anyone at Southmead who I will be bothering whenever I am bored or need a sign-off.*

## Revue Review: Wes Misérables

*By Charlotte Woods (an independent unbiased source for Revue-based info)*

This year's medics revue was an unforgettable night that started with a 40min delay (a strategic play for extra pints) and ended with faculty icons belting out Bohemian Rhapsody. It was a night to remember – or not if you were swigging vodka (row 2 on the right *cough cough*). Audience members were dazzled with show tunes and medical humour, here's what they said:

"*I never knew Joe McClafferty had so much chest hair!*" - Audience member 1

"*What else will Miles find in Joe McClafferty??*" - Audience member 2

"*David Rogers had the voice of an angel*" - Audience member 3

"*Best medical comedy since 'This is Gonna Hurt'*" - Audience member 67

*Makeup happening offstage ft. Dr Funny & The Lorax*

Musical numbers included '*Brand New MRI machine*' to the tune of '*Brand New Combine Harvester*' by the Wurzels and a finale of '*Do You Hear the Doctors Sing*'- a Les Mis classic ending with a certain health minister being impaled with a large BMA flag. This may or may not have been many Sainsbury's carrier bags taped together. It wasn't exactly the highest budget production.

*Said flag. No expense spared, as you can see.*

Aruntheny and Will pulled out all the stops co-producing the show into something truly incredible.

When interrogated, Aruntheny said "My role in revue was about as varied as the specialties found in Southmead hospital. By day (amongst other roles) I was acting as a cloaked pharmacist gatekeeping dabigatran (allegedly pronounced dajibagvam). By night, I was listening to '*Thunderstruck*' by AC/DC about 20 times and other such songs to provide audio cues (again amongst other things). Co-producing this show was a whirlwind but with the people I got to meet and work with — I wouldn't have done it any other way.". Will refused to comment, but did respond "Viva Yeo Vegas".

As with every year, revue aims to raise money for a charitable cause. This year's chosen charity was BRACE UK, funding world class research into the many subtypes of dementia (including Alzheimer's, frontotemporal, Lewy body and vascular) aiming for a deeper understanding of the condition and eventually a cure. Based in Bristol Brain Centre and the South West Dementia Brain Bank, funding from this charity has supported over 140 different projects and 50 PhD studentships. Through some guilt tripping of our audience and mild torture of one of our cast members, we raised £731- that's like 146 packets of M&S cookies, or one day of parking at Southmead.

Our cast thoroughly enjoyed acting stupid on stage for this charitable cause and described revue as 'their best accomplishment to date'. This

statement has not been verified. They did, however, say:

"*Turns out Elvis ain't dead - he was working as a CTF in Yeovil this whole time!*" - Captain Pugwash
"*That lemon skin didn't taste very nice*"- Pathologist
"*Woah there mama!.*" - Elvis
"*I'M THE REAL JOE PHILLIPS*"- Joe Phillips

All in all this was a truly phenomenal show to be a part of. Everyone worked incredibly hard in the week leading up to the show, so thank you all. Special thanks to the hard work of Will and Aruntheny for managing to wrangle this ragtag bag of moaning minnies into something that resembled a cast and perhaps even a successful show.

*Will and Aruntheny, pictured here finalising the script just minutes after the show began.*

If this sounds absolutely brilliant to you, then get involved next year! If you think it sounds like a load of rubbish, then keep your opinions to yourself!
*Cast (left to right): Charlotte, Hannah, Joe, Miles, Will, Aruntheny, Shanti, Ishan, Tiger, Archie (lying)*

## A Good Girl's Guide to Finals

When someone mentions 'finals season' most people think they're talking about the end of a long-running TV series. In all fairness, it *could* be the end of a long-running series if things don't go to plan… or the perfect setup for a very stressful spin-off called '*Resits: The Reckoning*'.

If you listen closely, you can almost hear David Attenborough narrating:
'Here, we see the fourth-year medical student in their natural habitat… Bristol. Fuelled by caffeine and severe delusion, the creature appears to be awaiting… a miracle'
As you begin to lose your grip on time and reality itself, here are some (supposed) words of wisdom from your predecessors who miraculously survived:

1. ***You can't remember everything***
   Unlike 1st year where your notes were colour coded or 2nd year where you spammed Anki so hard they even considered sponsoring you! Now, you open Passmed, recognise one word and instantly go 'Yeah feels like that one'. This is formally recognised as vibe-based medicine. This is not GMC approved!

2. ***Sleep is more of a concept than a lifestyle***
   The only time you've heard about sleep recently was during that OSCE station on sleep hygiene—where you confidently advised the patient on consistency while running on 2 hours sleep! You weren't counselling them; they were counselling you!

3. ***Coping Mechanisms ft. Delusion***
   Imagine that last exam when you're all done! A Consultant walking to the front of the Biomed Building, bending down on one knee, holding up Passmed on a screen and everyone breaking out into song… 'Goodbye, goodbye, goodbye… you were bigger than the whole sky!'
   The control, the freedom… (which in reality does not last as you instantly check your answers with friends, realise you've created a new branch of medicine and frantically search for the resit dates.

4. ***Your standards have shifted***

   You came to Medical School aiming for a distinction. Now you're aiming for a 'minimally competent to graduate'.

5. **I think I've seen this film before...and I didn't like the ending...**

   'I think I recognise this question.'
   You do. You've got it wrong every single time!

6. ***'I'm almost done' becomes your new catchphrase***

   You repeat it like clockwork, but its effects are actually unclear. Studies have shown the cycle is Passmed→ wrong answer → breakdown→ short break → long break → identity crisis → Taylor Swift → one more question; and then the cycle repeats itself (improvement is variable and boosts in morale are rare).

7. ***To be or not to be?***

   No one knows less and more at the same time than a 4th year medical student in finals.

8. ***It's a temporary setback, it's a momentary lapse***

   During the exams themselves you don't even have time to breathe, just the slow realization that you've spent years learning medicine and it all came down to guessing between two answers that both looked fake.

*Note from the editor: The UK MLA is a respected process for assessing the competency for medical students. Whilst it does have its flaws, those who pass are trusted medical professionals who have earnt their place, not least through passing 5 years of medical school and various other assessments throughout those years.*

9. ***Guess who's back... back again***

   Finally, when it's over, you won't recognise yourself. You'll be able to open your curtains and emerge from your study cave like you're waking from hibernation. You experience something called 'fresh air' for the first time in your entire life!

You'll celebrate the biggest achievement to date, well until someone says the words 'final results,' and your soul briefly leaves your body!

*By Sara Hussain*

*Note from the editor: In a nod of respect to years of non-digital exams, this space has been left intentionally blank.*

## Dr Nigella Lawson's medical recipes 1st edition 2026

*By Charlotte Woods*

Untried and untested recipes, consume at your own peril. The black bag holds no liability for any adverse sequelae of the following. The pictures are definitely not AI generated.

**Orthopaedics:** *Protein packed portions for popping periosteum perfectly*

Ingredients:

- 5 dozen eggs
- 1250ml milk
- 250g protein powder

1. Mix 1000ml of milk with 250g of protein powder flavour of your choosing, give it a good shake- working those biceps. Set aside for later.
2. Boil 1 dozen eggs for 7 minutes, salting the water if you're feeling fancy. Set aside to cool.
3. Mix 1 dozen broken eggs with the remaining 250ml milk for a perfect scrambled egg portion.
4. Crack another dozen eggs into a pan individually and place a lid on top for 2 minutes for 12 perfectly fried eggs.
5. Mix the final 2 dozen eggs into a pan and allow to cook for 5 minutes, flipping halfway- this is your omelette.
6. Assemble the hard boiled eggs, scrambled eggs, fried eggs and omelette into the shape of a femur on a chopping board. Enjoy your protein shake alongside.

**Dermatology:** *Vit-C Collagen Boosting Salad for Eternal Youth*

*Ingredients:*

- A handful of spinach
- 1 carrot, shredded
- A handful of sliced cucumber
- 1 avocado
- 2 tbsp sunflower seeds
- 1 orange, peeled and sliced
- 125g blackberries
- 80ml lemon juice
- 60ml orange juice
- 2 tbsp olive oil
- Pinch of maldon salt- essential

1. Mix the lemon juice, orange juice, olive oil and maldon. This is your salad dressing.
2. Combine the remaining ingredients in a bowl.
3. Drizzle the dressing over the top. Voila.

## Theoretically Perfect Bleeps

*By EW and Will Palmer*

Ahh bleeps. That technology from the 80s that somehow continues to be the foundational backbone of the NHS.

Despite this, there is currently 0 teaching on how the bleep system works. This is why current Bristol students have (all true stories):

- Interrupted a neurology clinic to get a clerking signed off
- Spent a large amount of time asking the biochemistry lab what the stroke nurses had written in the notes
- Put out a real crash call during a sim

In order to rectify this, we here at the Black Bag have suggested standardising some bleeps to aid memory. Thus, we present to you theoretically perfect bleeps.

*Nb. None of these are actual bleeps, please do not attempt to ring them. Check your own facts. X*

5678 – Gestational Diabetes clinic
1972 – the vitamin K enquiry line
2020 – Ophthalmology
0007 – the name's forensics, medical forensics
8892 – Scale 2 O2 requirement helpline
6767 – the bleep sought after by all resident doctors
1234 – Early age Paediatrics
1999 – for when you just want to go back, back to 1999
2407 – the eternally on-call reg
9999 – the German surgeon who will not accept your referral

**Acute and Emergency:** *Vending machine classic, be grateful you're eating at all*

Ingredients:

- Energy drink
- Jelly babies

1. Acquire your energy drink of choice- monster mango loco being the most elite of course.
2. Open a bag of jelly babies, squirrel away the red and purple ones then offer the remaining subpar flavours to your colleagues if you're in a good mood.

**Paediatrics**: *Kids need ketchup*

Ingredients:

- 10 chicken nuggets, preferably dinosaur shaped
- A handful of oven chips, crinkle cut
- 1 tin of beans
- 1 bottle of ketchup

1. Set the oven to 200
2. Place the oven chips and nuggets on a tray, equally spaced, and bake for 14 minutes
3. Microwave the beans for 3 minutes, stirring halfway
4. Arrange on a plate with no item touching the other
5. Serve with an entire bottle of ketchup

**GP:** *Oooo Out of Hours Overnight Oats*

Ingredients:

- 200ml almond milk
- 3 tbsp chia seeds
- 3 tbsp oats5 tsp greek yoghurt
- 2 strawberries
- 5 blueberries
- 13
- sunflower seeds
- 2.5 walnuts
- 3 goji berries
- 1 raspberry

1. Combine the almond milk, chia seeds, oats and greek yoghurt in a mason jar.
2. Leave in the fridge overnight.
3. Slice the strawberries and arrange in the jar to your liking.
4. Sprinkle on the remaining blueberries, sunflower seeds, walnuts, goji berries and raspberry.

**Haematology:** *Insanely Iron- Filled Blood Boosting SP*

Ingredients:

- 1 sweet potato
- 1 tbsp butter
- A handful of spinach
- ½ a tin of chickpeas
- 1 red onion, chopped

- 2 tsp cumin
- 1 steak, diced
- 7 mushrooms, sliced
- 2 cloves garlic, crushed
- 1 portion goats cheese
- 3 tbsp plain yoghurt
- 1 lemon, juiced
- 3 tsp parsley
- A pinch of salt

1. Microwave the sweet potato for 8 minutes, turning halfway.
2. Fry the red onion, garlic, steak, chickpeas, mushrooms and cumin until well browned.
3. Mix the greek yoghurt, lemon juice, parsley and salt in a separate bowl- this is your dressing.
4. Air fry the sweet potato for 15mins to crisp up.
5. Add the butter to the sweet potato on a plate.
6. Add the chickpea and steak mixture to the sweet potato, crumble the goat's cheese on top, then the spinach and then the dressing.

## Next Generation Anki

*By Ella White*

Spaced repetition is proven to optimise your medical education. Naturally, as I was pressing "Again" for the 47th time while questioning my life choices, an important thought emerged:

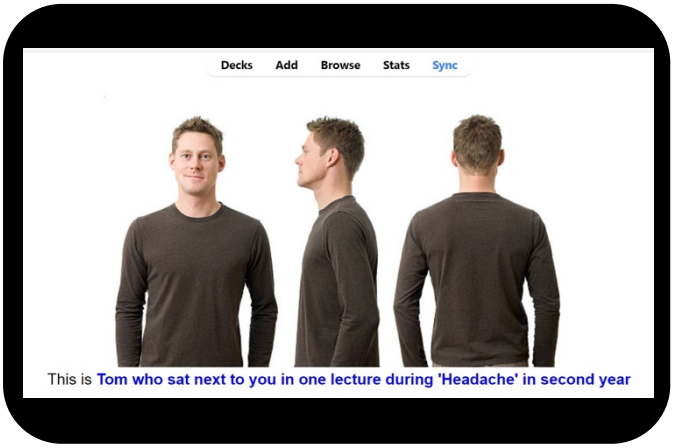
**Why stop at medicine?**

If Anki can brute-force the presentation of pseudopseudohypoparathyroidism into my brain, it can do anything. Social interactions… Personality... Basic human needs... All of it, fundamentally, is poorly organised information waiting to be converted into cloze deletions.

Armed with my remote, a streak I am emotionally dependent on, and several thousand reviews due, I've compiled a list of essential new decks for the modern medical student.

**Facial Recognition in the Wild**

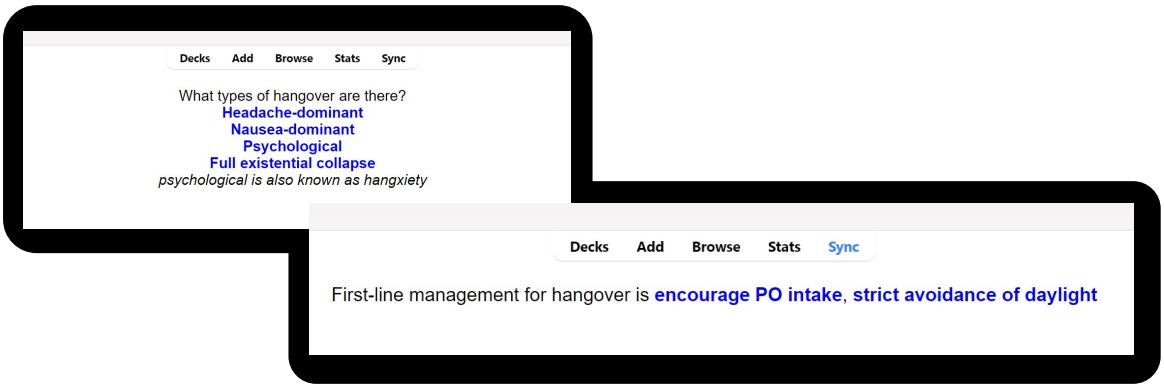
- Picture this… you're in Clifton Down Sainsbury's… eye contact is made… they smile. They wave. They know you. You do not know them.
- This deck eliminates that scenario through repeated exposure to faces in various settings: Biomed E29, the ASS and even in La Rocca.
- Includes AP and lateral views for full clinical accuracy.




*Note from the editor: Unfortunately, we are not sponsored by Anki or any other spaced repetition-type learning technique. But if Big Flashcard wants to buy us out, we're open to it.*

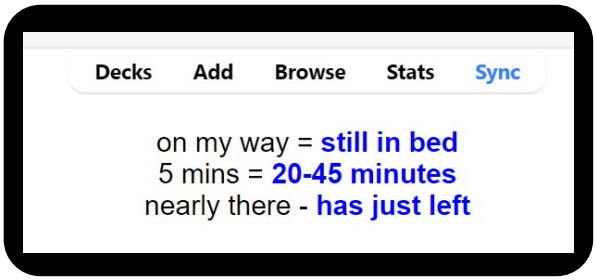
## Advanced Hangover Medicine

- A clinically relevant deck categorising hangovers into: headache-dominant, nausea-dominant, psychological (hangxiety) and full existential collapse.
- Management follows strict NICE guidelines:
- First-line: encourage PO intake (fluids/Spoons breakfast) and strict avoidance of daylight
- Second-line: simple analgesia if symptoms persist despite first-line measures
- Third-line: supportive care with rest, sleep, and 2-hourly reassessment




## PAREWS (Passive Aggression Recognition and Early Warning Score)

- A deck made to learn the validated scoring system for early detection of hostility in flatmates, group chats and placement.
- Features include:
- 'That's fine x'
- 'As per my last email…'
- Thumbs-up reaction only
- Blue ticks with no reply




## 'I'm On My Way' Interpretation Framework

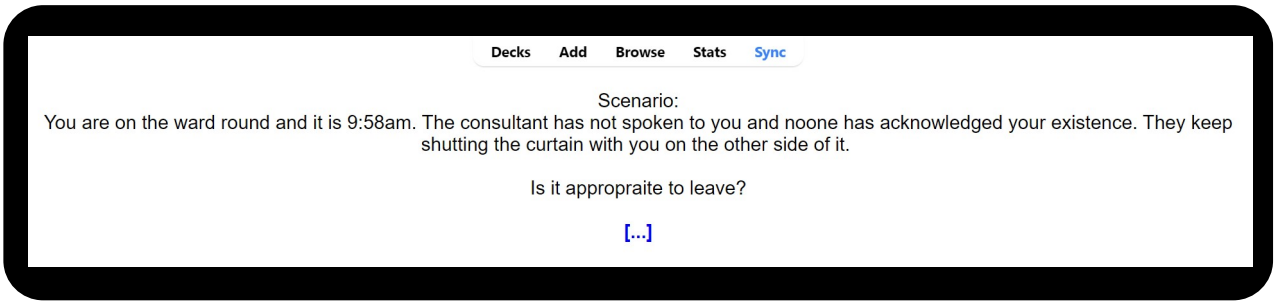
- A translation deck using cloze deletions.
- Retention rates are high, however trust in others is low.

## Post-Night-Out Reflective Practice

- A longitudinal deck documenting your worst decisions.
- Cards resurface at increasing intervals, ensuring:
  1. Permanent retention
  2. Recurrent psychological damage
- Not recommended for those seeking personal growth.

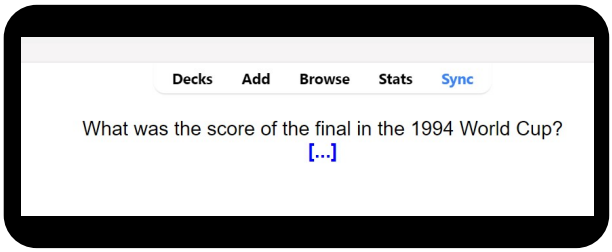
## The ‘What Time Can I Leave?’ Decision Tree

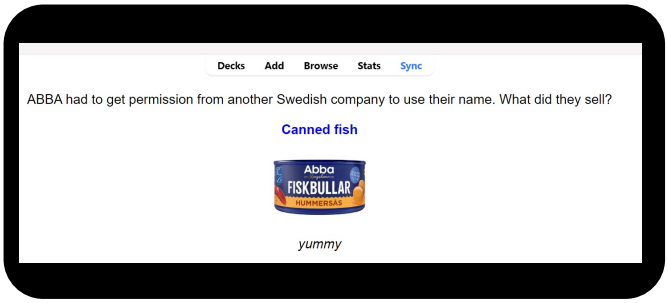
- A complex, high-stakes algorithm incorporating:
    - Consultant mood
    - Time of day
    - Whether anyone has acknowledged your existence
    - Incorrect application may result in leaving too early, or, more commonly, staying indefinitely out of fear.




## Pub Quiz Rapid Recall

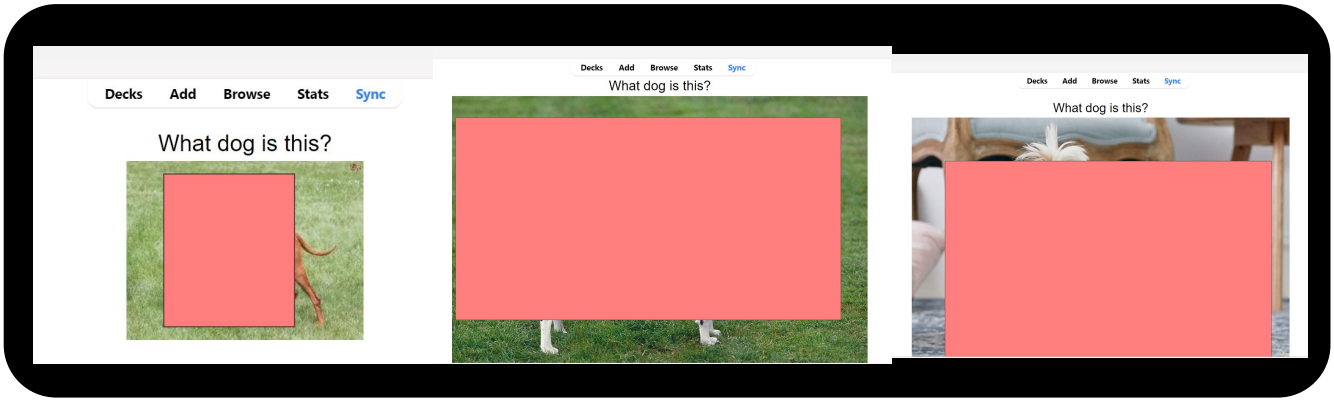
- Finally, a socially acceptable outlet for your Anki addiction. Deck includes:
- Capital cities
- Obscure flags
- The entire history of ABBA
- Football scores from the 1994 World Cup.
- You will still lose to a group of middle-aged men.




## Dog Breed Identification

- Eliminates the phrase ‘small brown dog’ from your vocabulary.
- It is, in fact, a Hungarian Vizsla. You will say this with confidence regardless of accuracy.
- Image occlusion is used to hide key features so you can identify from partial visual cues - just as nature intended.




**Flowers Species**

- Low-yield and no clear clinical relevance.
- But wouldn't it be nice to know your chrysanthemum from your amaryllis?

Anki is no longer just a study tool. It is now a comprehensive lifestyle system. With sufficient dedication, every aspect of your existence can be reduced to flashcards. Scheduled and reviewed at optimised intervals until nothing feels spontaneous and all joy has been efficiently removed.

Happy studies!

**How would you rate this article?**

**<u>Agony Aunt</u>**

Greetings poor unfortunate souls of the ton. It is with great sadness that this aunt announces the closing of the season. We wish to impart some of our last wise words to those lucky enough to have had their pleas answered (we may have neglected one certain google form sent out many moons ago). Take care and go forth into a summer of glee, and never fear – we shall be back!

---

Dear Agony Aunt,
No one wants to sponsor my magazine even though I asked really nicely.
Yours sincerely,
Ed Etor

Dearest Ed,
You must learn that in this life it's important to be able to take things by force. Think of yourself as the robin hood of the modern day. In the words of our queen Ariana 'I want it, I got it'. Beg for forgiveness not for permission darling.
Toodles,
Auntie Agony

---

To Agony Aunt,
My flatmate's new boyfriend does Engineering, he doesn't even know his olecranon from his elbow. How do I interact with people who don't do medicine?
Best wishes,
Scay Bees

Hello Señor Bees,
I'm afraid the only course of action is to pretend they do not exist. As far as you're concerned this flatmate of yours is still a single pringle. We have not, do not and never will associate with the non- medical folk. Avoid them like a ward with a norovirus outbreak and maybe, just maybe, you'll be safe.
Sent from my iPhone,
Miss Aunt

---

My dearly beloved Aunt,
I keep passing out in surgery, I'm never going to be a surgeon if I keep this up! What should I do?
Kind regards,
Vanessa vagal

Dearest Vanessa,
You may need to accept that surgery just isn't for you. Sure, being face down in an abdomen may be hilarious for the scrub nurses but I don't think your patient will take too kindly to a peritoneum full of medical student. While you're young and free you can embrace the drama, take some notice away from those pesky attention seeking patients, but best to start thinking now about a less collapse- inducing specialty, maybe radiology?
Off to spread some magic,
Aunt Agony

---

Greetings Auntie Agony,
I've managed to diagnose myself with 6 terminal illnesses before lunch, this hypochondriasm is getting unbearable.
All the best,
Marie- Nelly Davies

My dear MND,
Statistically 1 in 2 people will develop cancer in their lifetime so congratulations on being so vigilant and pro-active. I think it's time you thought bigger- I'll bet you can do 6 impossible diagnoses before breakfast! Don't let your impending doom hold you back, stride onto the wards with the confidence of Wes Streeting through a picket line, after all you have nothing to lose.
Blessing the hours you have left,
A.A.

## From the Archives

For this 'From the Archives' we go back 60 years to Spring 1966 where one Dr R. J. Stephen reflected on his experiences of medicine 40 years prior – 100 years from today. Below, please see his piece titled '40 years on'.

This is not a lecture, or even a paper, but a few random thoughts that occurred to me viewing the changing scene in General Practice over the last forty years. The request to give them came from one of the Black Bag editors, so that I hope I cannot be accused of rushing to print.

I qualified in Aberdeen in 1924. Even at that date it was in advance of its time, for there was a flourishing general practice dispensary attached to the Medical School, and attendance at this for six months was a compulsory part of the final medical examinations. Final year students attended the poor in their homes under the supervision of General Practitioners, whose ability as clinicians and teachers was recognized by the University. It was a most useful experience for all of us before entering the rough and tumble of General Practice, for we saw disease in an entirely different form to that encountered in our ward rounds, and lectures.

*Ignore the strange presentation of this article, just follow the arrows and everything will be fine*

The patterns of disease have greatly changed. Anaemia, in its many manifestations is still with us, but chlorosis or green sickness of young girls, a disease of unknown aetiology has disappeared. In the edition of Osler that I used (1920) it was sometimes referred to as "Anaemia d'amour," but whether love or the endocrines played any part in the causation Osler was unable to say. Bland's pill was the specific remedy. I recollect giving a National Health Certificate bearing this diagnosis, which led to some amusing correspondence with the Ministry of Health. Pernicious anaemia was recognized, though its causation and treatment were just being elucidated in my student days. I well remember an elderly music teacher, a case of chronic rheumatoid arthritis, who on recovering from lobar pneumonia developed an acute episode of Addisonian anaemia. This I was treating with liver in large amounts and an intra-muscular preparation which was, I believe, called Etamen. Her anaemia improved and her crippled fingers became much more mobile, I hate to think of the number of rheumatoid patients I subjected to this regime, in the hope that I had discovered a cure for this crippling disease but alas, all to no avail, and my name remained unsung.

Rheumatic carditis was extremely prevalent, with the various classical rubs and murmurs so audible that only the deaf could miss them. I have seen cases of such severity that the effort of the heart to maintain the circulation literally shook the patients' bed. Cases of acute pulmonary oedema were then frequently bled 20-30 oz. with amazing results. Who does venesection nowadays? Diabetes was then treated solely by diet in varying forms, insulin had just been discovered but was not yet in general use. Lobar pneumonia, a clinical rarity now, was of frequent occurrence—the Captain of the men of death, till the advent in the early thirties of prontosil, M&B and later penicillin and other antibiotics. Scarlet fever even in its dreaded malignant form, was frequent and disabling, as was also chronic nephritis. There were too, the bow legs of rickets, and the mutilating lesions of syphilis. I remember a well meaning old lady who took pity on some Australians one Christmas early in the first War. She brought them home for supper, during which they liberally plied her with "Red Lady." When she came to next morning her guests were gone, and in a few years she displayed a gumma on her forehead almost the size of a florin, exposing the frontal bone below. She outlived her husband who died some years later of specific aortitis.

Diphtheria, especially the laryngeal type, was a deadly disease, in spite of the recent introduction of antitoxin. Aortic aneurysm was not uncommon. Cretinism, myxoedema and acromegaly, I saw at various times. Septicaemia was common and invariably fatal, mastoid disease crippling and destructive. Tetanus, with full display of "risus sardonicus" would crop up most years. Summer diarrhoeas continued to take deadly toll of infant lives, for we had not recognized the urgent need for fluid replacement, and there were no antibiotics.

Tuberculosis was an ever present deadly scourge, leading to long years of crippling illness and eventually almost certain death; rest and good feeding being the only treatment. Lumbago and sciatica were common, prolapsed discs being then quite unknown. It may be difficult to prove, but I feel that carcinoma of the lung must have been an extreme rarity, even with one knowledge of symtomatology which hind sight brings. Disease of the coronary arteries has certainly become more common, I personally believe because of the increasing tempo of modern life.

Psychiatry was little understood, though I sometimes feel it has now gone to the other extreme. Psychiatrists seem to have almost all the answers to cases of delinquency, rarely admitting that punishment is required. However, they are of immense help in some cases with their ever changing array of wonder drugs. Schizophrenia does no longer mean a lifetime in a mental hospital.

There have been vast and often bewildering changes in therapeutics, so that in many ways I do not envy the present day Medical Student. His fate only serves to endorse the truth of the quotation :

"Since 'tis nature's law to change
Constancy alone is strange."

**Dr. R. J. Stephen**

*More fun excerpts from this issue include adverts for:*

- *An alcoholic beverage*
- *A handbook on what sort of milk to use for which occasion*
- *A particular brand of opioid-based cough medicine.*

*These adverts are not reproduced here because the companies haven't paid us – but we're always open to new and exciting milk handbook sponsors.*

**What's next for the Black Bag?**

There is so much to be excited about for next year. Despite our general cynicism we are going to help bring back hope – my main hope is to see you all again after summer, hopefully having passed my MLA! I am really excited to meet lots of new faces next year and get even more people involved with the Black Bag.

I am so incredibly grateful for the wonderful opportunity this position has afforded me, and evermore grateful that I can carry on with it next year – thank you immensely for the kind words of friends that encouraged me to continue.

None of it, though, would be possible without the hard work of so many writers who work with incredible effort to make this happen and to whom I will never be able to thank them enough. Every time a new issue rolls around I panic that it won't happen, and every time I am blown out the water by the fantastic stuff people provide.

I must confess, though, that I have not seen Bridgerton except as background noise forced upon me by my sister (whose enjoyment of the show made me instantly decide I would not enjoy it), and for that reason I am completely dumbfounded by the repeated Bridgerton-themed articles – but I have enjoyed them, nevertheless.

What's coming next year? Without spoiling anything, I reckon there will be some more magazines, a few social media posts, and maybe a social outing or two. Don't miss out! Stay up to date through our Instagram account @theblackbagbristol.

See you all soon,
Will

*Note from the editor: In a nod of respect to an earlier part of this magazine, this space has been left intentionally blank.*

*Interested in helping us fill these blank spaces? Get involved via the Instagram or WhatsApp Or email your piece to blackbag1937@gmail.com*

*Suggested submissions include: Letters of hate directed at the editor, a poem that accurately explains asthma guidelines, pet pictures, and random swatches of colour that we could add to the magazine to spice it up visually.*

THE BLACK BAG.

Bristol Medical School Student Magazine

EST. 1937

Thanks for reading, see ya round!