

**Office for
Students**



Medical and Dental Students survey 2026 (MDS26)

**Survey for the Office for Students,
the Department of Health and Social Care,
NHS England and
UK higher education funding bodies**

Reference OfS 2026.49

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Publication date 1 October 2026

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Summary

Purpose

1. The Medical and Dental Students survey 2026 (MDS26) asks higher education providers in the UK to provide data on the intake of medical and dental students in the 2025-26 and 2026-27 academic years.

Key points

2. This is an annual, UK-wide survey. The Office for Students (OfS) is conducting it on behalf of the Department of Health and Social Care (DHSC), NHS England (NHSE), the Scottish Funding Council, Medr (Wales's Commission for Tertiary Education and Research) and the Department for the Economy in Northern Ireland.
3. Data from this survey is used by the OfS, DHSC and NHSE as an early indicator of medical and dental intakes, including to support DHSC and NHSE workforce planning and to inform monitoring of regulated intakes.¹ For providers in England, the OfS will be using the data to monitor the 'Maximum fundable limits' and to inform funding allocations.
4. The census date for the 2026-27 intake data is **Friday 9 October 2026**.
5. Higher education providers with joint medical schools or other collaborative arrangements (see Annex A) are expected to submit a single joint return.
6. As part of the government's commitment to transparency, the OfS intends to publish data on both the confirmed 2025-26 and initial 2026-27 intakes on our website.² We intend to publish this data for all providers completing MDS26 as official statistics.³

¹ 'Regulated intakes' means the following for providers in:

- England – the 'Maximum fundable limit' for medical and dental pre-registration courses (previously known as the medical and dental intake targets up to 2022-23)
- Scotland – those subject to medical or dental intake targets
- Wales – those subject to limits on commissioned places
- Northern Ireland – those subject to a medical and dental contract full-time equivalent (CFTE) target.

² For the equivalent 2025 data on the OfS website, see www.officeforstudents.org.uk/advice-and-guidance/funding-for-providers/health-education-funding/medical-and-dental-intakes/.

³ For the OfS official statistics release schedule, see www.officeforstudents.org.uk/data-and-analysis/producing-statistics/.

Action required

7. MDS workbooks will be available to eligible providers via the OfS portal in early October 2026.
8. Completed workbooks must be submitted through the OfS portal no later than **noon on Wednesday 21 October 2026**.
9. By **Monday 9 November 2026**:
 - a. All data verification queries must be resolved.
 - b. The data should be signed off by the provider's accountable officer.

Changes and clarifications since the Medical and Dental Students survey 2025 (MDS25)

Changes and clarifications

Changes to guidance

International exemptions (applicable for English providers only)

10. In MDS25 we introduced the collection of additional data on 'exempt' students from the 2025-26 initial intake. In MDS26 we have rolled forward this collection to be included on both the confirmed and initial intakes. See paragraphs 43 to 46 and 63 for more information.

Changes to tables

11. In line with the changes set out above, we have amended the tables for MDS26 as follows. These changes will apply to English providers only.

Changes to the Medical confirmed intake worksheet

12. We have amended the column which collected data in MDS25 on Medical Doctor Degree Apprentices, to now collect data on all students exempt from a provider's maximum fundable limit (either an explicit DHSC exemption, or a Medical Doctor Degree Apprenticeship intake).

Changes to the Medical initial intake worksheet

13. There are no changes to the Medical initial intake worksheet for MDS26.

Changes to the Dental confirmed intake worksheet

14. We have introduced a new column to collect data relating to intakes subject to an exemption.

Changes to the Dental initial intake worksheet

15. There are no changes to the Dental initial intake worksheet for MDS26.

Changes to the MDS summary worksheet

16. We have amended the Confirmed intakes table on this worksheet, which on MDS25 set out the reported data on Apprenticeship intakes, to now report data on 'exempt' students. This will enable us to exclude these from the assessment of 'adjustments to grant arising from over-recruitment'. This will set out the student numbers reported as 'under an exemption' in 2025-26 from the Medical confirmed intake and Dental confirmed intake worksheets. This will

enable us to continue to exclude these from the assessment of adjustments to grant arising from over-recruitment.

17. There are no changes to the Initial intakes table.

Survey details

Outline timetable for the MDS26 return

18. The timetable for MDS26, and the grant adjustments appeal process for English providers, are summarised in Table 1. **Actions for providers are in bold.**

Table 1: Provisional timetable for MDS26 and grant adjustments appeal process

Date	Action	Action applies to
Early October 2026	MDS workbooks made available to providers via email.	All providers
9 October 2026	Census date for 2026-27 intake data.	All providers
21 October 2026	MDS26 submission deadline. A valid MDS26 workbook must be submitted through the OfS portal (no later than noon).	All providers
21 October 2026 to 9 November 2026	Data verification phase.	All providers
9 November 2026	Sign-off deadline. Final MDS26 data must be signed off as correct by the accountable officer, or someone with delegated authority, as at the census date.⁴	All providers
By late November 2026	After verification, providers will be notified of provisional formulaic full-time equivalent (FTE) adjustments (where applicable) arising from recruitment against their maximum fundable limits, and invited to submit appeals.	English providers only
12 January 2027	Deadline for submission of appeals against FTE adjustments arising from over-recruitment against maximum fundable limits.	English providers only
By end of February 2027	Providers notified of final FTE adjustments arising from recruitment against maximum fundable limits, including the outcome of appeals.	English providers only

⁴ For English providers only, see 'Regulatory advice 10: Accountable officers. Guidance for providers on the responsibilities of accountable officers' (OfS 2018.29), available at www.officeforstudents.org.uk/publications/regulatory-advice-10-accountable-officers-guidance-for-providers-on-the-responsibilities-of-accountable-officers/.

Data preparation and submission

Workbook release

19. Contacts in the medical and dental schools will be sent a copy of their provider's workbook via email in early October 2026. The blank MDS workbook is individually prepared for each provider and saved in Excel.
20. The name of the workbook will be MDS26XXXXXXXXX.xlsx (where XXXXXXXXX denotes the UK Provider Reference Number (UKPRN)). Do not attempt to rename or reformat the workbook, as this will affect the ability of our systems to correctly load the return.
21. The Excel workbook contains the following four worksheets (see Annex B for examples):
 - a. Medical confirmed intake – Medical students intake during the academic year 2025-26
 - b. Medical initial intake – Medical students intake for the academic year 2026-27 as at 9 October 2026
 - c. Dental confirmed intake – Dental students intake during the academic year 2025-26
 - d. Dental initial intake – Dental students intake for the academic year 2026-27 as at 9 October 2026.
22. For providers in England there is an additional worksheet (see Annex C):
 - a. MDS26Summary – a read-only summary that shows for each MDS table:
 - the provider's maximum fundable limits and maximum overseas number
 - the reported maximum fundable limit 'exempt' intake confirmed intakes and for initial intakes
 - total intake (adjusted for exemptions for the initial intake and the confirmed intake)
 - the number and percentage of overseas students from the reported intake.

This table will be populated automatically when data is entered in the survey tables (Medical confirmed intake, Medical initial intake, Dental confirmed intake and Dental initial intake).

Workbook preparation

23. All totals, labels and table formats will be locked using Excel's cell protection facilities. Do not attempt to change the contents of the protected cells, or the structure of tables by adding or deleting any rows or columns. Only cells where data is required should be altered. If a password warning appears, this means a protected cell has been selected or an attempt made to 'paste' over a protected cell. Worksheets contain information critical to accurate loading of the data; it is essential that this is preserved. We will refuse to accept any workbooks which have been unprotected as we cannot be certain of our ability to load the data contained in them correctly. We are aware that certain software packages remove the saved passwords; please let us know if you think you may have removed the password in error in this way.

24. All worksheets in the original workbook should be returned even if they contain no data. This will be applicable for new medical schools that have no data for the 2024-25 academic year (although the Medical confirmed intake and Dental confirmed intake tables will usually be hidden for new medical schools). Providers should keep a back-up copy of the tables that they return to the OfS.

Workbook submission

25. A provider's portal administrator can create an account for the MDS data contact and give them access to the survey area when it is live in October. Guidance for portal administrators can be found at: <https://www.officeforstudents.org.uk/how-to-manage-your-portal-users/>.⁵
26. Once the data contact has access, the completed MDS workbook can be uploaded via the OfS portal. Once the data has successfully uploaded, a results package workbook can be retrieved which will contain the data in our systems that was previously uploaded.
27. A completed valid workbook must be uploaded to the OfS portal by **noon on Wednesday 21 October 2026**.
28. Please note that the portal usually sees heavy traffic on the days leading up to the deadline and this can cause the upload process to take longer than usual. Please note the following about the submission of MDS workbooks:
- Although it is possible to upload your survey to the portal at any time, you must have uploaded at least one submission after the census date.
 - It is possible to submit the workbook several times, but we will use only the version most recently uploaded.
29. In order not to breach data protection regulations, you must not submit the MDS workbook by email. Please use the OfS portal.

Post-submission (verification, amendments and sign-off)

Data verification

30. After the survey is successfully submitted to the OfS portal, providers should check the data in the results package to ensure that it is consistent with what has been submitted and that the data has been processed correctly.
31. The OfS will check the data for all providers against previous years' returns, and for providers in England against the maximum fundable limits set for the year. Any discrepancies will be queried with the provider (or, in the case of a joint submission, with the provider that has submitted the data).

Amending the data

32. After the submission deadline you will be able to upload amended MDS workbooks to the portal. This facility can be used to address any errors discovered in the data.

⁵ Please note, the guidance for portal administrators will be updated throughout the year as additional portal functionality is added.

33. If you submit an amended workbook, you should also email us with explanations of the changes made. We will review the amended workbook; if we discover any issues with the data then we will email you to ask for additional information or to require a further amendment to be submitted. Only the most recent confirmed workbook will be used for funding purposes.
34. For providers in England, we cannot guarantee that any amendments to data after 9 November 2026 will be taken into account. For providers in Scotland, Wales and Northern Ireland, any amendments to data would be subject to the agreement of the Scottish Funding Council, Medr (Wales's Commission for Tertiary Education and Research) or the Department for the Economy in Northern Ireland, respectively.
35. We will only accept amendments after this point in exceptional circumstances, where errors are genuine, widespread, significant, and make a material difference to our use of the data. Amendments will be required to pass an assessment process, as described fully on our website.⁶

Sign-off

36. When you upload an MDS workbook, you will be asked to confirm that the data submitted is correct and fit for purpose. We expect that you will have been issued with delegated authority within your provider to make this confirmation. We will also ask you to confirm that the data submitted has been reviewed with senior management and that the accountable officer for your provider is aware of the data uploaded and has agreed to it being signed off. This requires them to understand our data collection requirements, so that they can ensure that the provider has systems capable of producing an accurate, complete return and that the preparer of the return has compiled it competently.
37. The OfS requires all providers to sign off their MDS data as correct and fit for purpose by **Monday 9 November 2026**.
38. If an English provider fails to meet the deadline for signing off data, or we believe the data to be inaccurate, we reserve the right to use our own estimates of data to inform OfS funding allocations (see the Terms and conditions of funding).⁷
39. The OfS may use the student record returned to the designated data body (DDB) to monitor parts of the MDS return and will query providers if there are significant discrepancies.

⁶ See www.officeforstudents.org.uk/data-and-analysis/amendments-to-data/.

⁷ Available at [Terms and conditions of funding - Office for Students](#) (see paragraph 9 in 2025-26 and 2026-27 terms and conditions).

Definitions and guidance

Coverage of tables

What intakes are to be reported?

40. The intakes in all tables should be the headcount of students starting a programme that leads, on successful completion, to a first qualification that enables UK registration as a medical doctor or dentist (discounting those who already hold such a qualification). This:
- a. Excludes students undertaking qualifications leading to registration with either the General Medical Council (GMC) or General Dental Council (GDC) under another profession.
 - b. Includes students starting a 'graduate-entry course' (defined as one where the entry requirement is a first degree in a subject other than medicine or dentistry).
 - c. Includes students who are undertaking a medical doctor degree apprenticeship (see paragraphs 41 and 42).
 - d. Includes intakes for the 2025-26 and 2026-27 academic years that are subject to an explicit exemption which has been granted by the DHSC (see paragraphs 45a and 45b).

Students who join a programme in the second or later year should also be included, unless they are transferring (see paragraph 55) or already hold a first UK registrable medical or dental qualification. All students included in the MDS should be included in the individualised student record returned to the DDB for the relevant academic year.

Medical Doctor Degree apprenticeships (for English providers only)

41. Medical doctor degree apprenticeships⁸ were a new standard of programmes that were first announced in July 2022 by the Institute for Apprenticeships and Technical Education (IfATE) and the Department for Education.⁹ This announcement included plans for some pilot programmes at a small number of English providers, which accepted intakes in 2024-25 and 2025-26.
42. As such courses meet the criteria for inclusion set out in paragraph 40 above, providers delivering these programmes should include any intakes to such courses as part of their reported numbers on MDS. See also paragraph 63.

International students

43. International students who are entering after the first year of a medical or dental programme and intend to complete their first UK registrable medical or dental qualification, resulting in full

⁸ Find the apprenticeship standard at <https://www.instituteforapprenticeships.org/apprenticeship-standards/doctor-degree-v1-0>.

⁹ See <https://www.instituteforapprenticeships.org/about/newshub/news-events/new-medical-doctor-degree-apprenticeship-launched-delivering-a-more-representative-workforce-for-local-communities/> and <https://www.hee.nhs.uk/news-blogs-events/news/new-medical-doctor-degree-apprenticeship-launched-delivering-more-representative-workforce-local>.

registration with the GMC or GDC, are to be reported as intakes. For example, students from the International Medical University of Malaysia joining year 3 should be included.

Exemptions for international students

44. All international students are counted against a provider's maximum fundable limit unless the DHSC has granted an explicit exemption. Explicit exemptions set out approval to exclude specific cohorts of (typically international) students from being considered against a provider's maximum fundable limit. These exemptions are granted on a year-by-year basis by the DHSC in response to requests from providers.
45. For MDS26, such exempt students **should** be included in the MDS survey and they should be reported as follows:
 - a. For the 2025-26 initial intakes, they should be included in the numbers reported in columns 1 and 2 and reported as part of the column 3 'Intake of exempt students'. We will use the data reported in column 3 to ensure that such students are not counted against a provider's maximum fundable limit.
 - b. For the 2026-27 confirmed intakes, they should be included in the numbers reported in columns 1 and 2 and reported as part of the column 4 'Intake of exempt students'. We will use the data reported in column 4 to ensure that such students are not counted against a provider's maximum fundable limit.
46. We will continue to engage with the DHSC to confirm and understand such exclusions.

Dual qualifications

47. Where a student is studying for a medical or dental specialism that requires dual qualifications in both medicine and dentistry, such as oral and maxillofacial surgery, that student should only be reported for their first qualification. The intake on the second medical or dental programme and subsequent qualification should not be reported on this survey.

Foundation years and gateway courses

48. Students on courses preceding a course leading to a first UK registrable medical or dental qualification (such as foundation 'year 0' or gateway courses) should not be included in the reported intake figures, until they start year 1 of a programme leading to a first UK registrable medical or dental qualification. Where providers have fully integrated programmes that include the equivalent of a 'year 0' foundation year as the first year of the programme, the student should be reported as an intake when they start year 1 of the programme leading to a first UK registrable medical or dental qualification, rather than in 'year 0'.

Intercalating

49. Students who intend to take an intercalating non-medical or non-dental degree should be included as intakes when they first register with the provider where they intend to obtain a first UK registrable medical or dental qualification. This includes intakes to any six-year medical or dental programme that includes a non-medical or non-dental degree as part of the programme.

Census date for initial intakes

50. For the Medical initial intake and Dental initial intake tables, intakes should be reported as at 9 October 2026. Additional intakes after 9 October 2026 but before the end of the academic year, who have not withdrawn before the end of the academic year, should be reported the following year.

Confirmed intakes

51. Intakes reported on Medical confirmed intake and Dental confirmed intake on MDS26 are an update of the Medical initial intake and Dental initial intake collected on MDS25. Students who withdrew from the programme between 10 October 2025 and 31 July 2026 inclusive should be reported in column 3 of Medical confirmed intake or Dental confirmed intake, but not in column 1 of Medical confirmed intake or Dental confirmed intake on MDS26. Students who withdraw after the end of the 2025-26 academic year, 31 July 2026, should be reported in column 1 of Medical confirmed intake or Dental confirmed intake on MDS26.

Students who have withdrawn

52. For the purposes of this survey, students are considered to have withdrawn when they cease studying towards a first UK registrable medical or dental qualification. A date recorded in the ENGENDDATE field on the student record returned to the DDB indicates that a student has withdrawn.

Transferring students

53. Students who transfer to a programme that is not a first UK registrable medical or dental qualification should be reported as having withdrawn even if their ENGENDDATE field is blank.
54. Students who transfer from a programme leading to a first UK registrable medical qualification to a programme leading to the equivalent dental qualification, or vice versa, should be reported as withdrawn on the first programme and as an intake on the second.
55. Students transferring between medical programmes leading to a first UK registrable medical qualification should not be reported as intakes for the programme they transfer to, even when they change providers, unless they are transferring from a provider not subject to regulated intakes. Similarly, students transferring between dental programmes leading to a first UK registrable dental qualification should not be reported as intakes, unless they are transferring from a provider not subject to regulated intakes. However, students who transfer from a medical programme to a dental programme, or vice versa, should be reported as an intake for the programme they transfer to.

Students who suspend their studies

56. Students who suspend their studies should only be reported as having withdrawn when they have a value in their ENGENDDATE field; otherwise they should be reported in the survey in column 1 of Medical confirmed intake or Dental confirmed intake on MDS26.

Row and column descriptions

57. For all tables, student numbers should be reported by sex, fee eligibility and domicile.

Sex

58. Sex should be recorded on the MDS as coded on the student record returned to the DDB field SEXID.

Fee eligibility

59. For the purposes of this survey, Fee eligibility, as coded on the student record returned to the DDB for the relevant intake year, indicates whether a student is eligible to pay home or other fees.¹⁰ Students entitled to be charged home fees are coded 01 in the fee eligibility field (FEEELIG) and those charged other fees are coded 02.¹¹

Domicile

60. Domicile columns refer to the country of the student's permanent or home address prior to entry to the programme. EU and overseas students are those not domiciled in Great Britain, Northern Ireland, the Channel Islands or the Isle of Man. For English providers, for the purposes of the caps on overseas medical intake and overseas dental intake, only intakes recorded as subject to 'other' fees in column 1d will be counted.

Columns

Column 2 (Graduate entry)

61. Column 2 on all tables records students on a graduate-entry course. Students entered in this column should also be included in columns 1a to 1d on each table as appropriate.

Confirmed intake column 3 (Withdrawn intakes)

62. Column 3 on the Medical confirmed intake and Dental confirmed intake tables records intakes who have withdrawn from the programme between 10 October 2025 and 31 July 2026 inclusive, by fee eligibility. Intakes who have withdrawn from the programme by 31 July 2026 should be reported in column 3 of Medical confirmed intake or Dental confirmed intake on MDS26 and not included in column 1 of Medical confirmed intake or Dental confirmed intake on MDS26.

Initial intake column 3 and confirmed intake column 4 (Intake of 'exempt' students)

63. Column 3 on the Medical initial intake and Dental initial intake and Column 4 on the Medical confirmed intake and Dental confirmed intake tables records intakes of students who are either on an apprenticeship programme or subject to an explicit exemption from the DHSC. Students entered in this column should also be included in columns 1a to 1d on each table as appropriate.

¹⁰ We note that changes to the legislation that apply to providers in England from 1 August 2024 could affect the fee eligibility status of a student between years. In particular, the assessment of the 'settled' immigration status of a student should be made on the first day of each academic year (whereas previously this was only undertaken at the start of the course). However, we expect students to be recorded on MDS in line with their fee eligibility for their 'intake year'. This means that students should not change fee eligibility between how it was reported for an 'Initial intake' to how it is reported for a 'Confirmed intake'.

¹¹ For providers in Scotland, students considered home fees are those coded as either 01 (Home tuition fees (Scotland and other EU)) or 02 (Rest of UK tuition fees) in the fee status field (FEESTATUS) and students considered other fees are those coded 03.

Examples

Example 1: Registration, withdrawal

64. A student started a first UK registrable medical programme on 3 October 2025 but suspended studies on 6 January 2026. They notified the provider on 20 June 2026 that they do not intend to return and an ENGENDDATE was recorded in the 2025-26 student record returned to the DDB. As the student has withdrawn from the first UK registrable medical programme by 31 July 2026, they should be reported in column 3 and not in column 1 of Medical confirmed intake on MDS26.

Example 2: Transfer to a programme that is not a first UK registrable medical or dental programme

65. A student started a first UK registrable medical programme on 3 October 2025 but transferred to a biosciences degree on 6 January 2026. As the student had withdrawn from the first UK registrable medical programme by 31 July 2026, they should be reported in column 3 and not in column 1 of Medical confirmed intake on MDS26.

Example 3: Transfer from a medical to a dental programme

66. A student started a first UK registrable medical programme on 3 October 2025 but on 6 January 2026 transferred to a first UK registrable dental programme. As the student had withdrawn from the first UK registrable medical programme by 31 July 2026, they should be reported in column 3 and not in column 1 of Medical confirmed intake on MDS26. However, as they started a first UK registrable dental qualification programme on 6 January 2026, they should be included as an intake in column 1 of Dental confirmed intake on MDS26.

Example 4: Student retaking year 1

67. A student started a first UK registrable medical programme on 3 October 2025. On 3 October 2026 they return to retake year 1 of the first UK registrable medical programme:
- a. If the student withdrew (or was withdrawn) during 2025-26, they should be reported in column 3 and not column 1 of Medical confirmed intake on MDS26.
 - b. If the student is retaking year 1 for any other reason, they should be reported in column 1 of Medical confirmed intake on MDS26.
68. In both these cases, the student should not be reported in the Medical initial intake table on MDS25 (as they would have been reported against the intake year in MDS25).

Example 5: Student who gains settled status between intake year and following year

69. An overseas student started a first UK registrable medical programme on 3 October 2025. They were reported as 'Other fees' in the relevant column of 1a to 1d of the Medical initial intake on MDS26.
70. On 1 August 2026 the student gained settled status, granting them eligibility for home fees. However, this student should still be reported as 'Other fees' in the relevant column of 1a to 1d of the Medical confirmed intake on MDS26, as that was their fee eligibility status for their intake year of 2025-26.

Annex A: Higher education providers with joint medical schools

Joint medical schools

We expect the following higher education providers with joint medical schools to submit a medical return this year:

- University of Brighton and University of Sussex
- University of Hull and University of York
- University of Kent and Canterbury Christchurch University.

There should be a single joint return from each joint medical school.

Other collaborative arrangements

We also expect the following higher education providers with collaborative arrangements around their medical provision to jointly submit a medical return from the lead medical school this year:

- University of Nottingham¹² and University of Lincoln
- King's College London¹³ and University of Portsmouth
- Imperial College London¹⁴ and University of Cumbria.

¹² For the University of Nottingham, the collaborative provision at Lincoln should be reported in a separate return to their own medical provision.

¹³ For the King's College London, the collaborative provision at Portsmouth should be reported in a separate return to their own medical provision.

¹⁴ For the Imperial College London, the collaborative provision at Cumbria should be reported in a separate return to their own medical provision.

Annex B: Examples of tables

This annex provides examples of tables Medical confirmed intake, Medical initial intake, Dental confirmed intake and Dental initial intake, which appear in the Excel workbook for the MDS26.

Medical confirmed intake

The figure below shows the table used to collect data on the Medical students intake during the academic year 2025-26.

Figure 1: Medical confirmed intake table

[illegible]

Medical initial intake

The figure below shows the table used to collect data on the Medical students intake for the academic year 2026-27 as at 9 October 2026.

Figure 2: Medical initial intake table

Headcount of the initial intake of medical students in the 2026-27 academic year																	
Provider name																	
Validation checks are shown below the table. Any cells that fail a validation check will be shown in red.																	
Expected maximum intake:																	
Fee eligibility	Column 1 Total intake of students not withdrawn from the programme			Column 1a Domiciled in Great Britain			Column 1b Domiciled in Northern Ireland			Column 1c Domiciled in the Channel Islands and Isle of Man			Column 1d Domiciled in EU and overseas			Column 2 Intake to 'graduate entry' courses (included in Column 1)	Column 3 Intake of students exempt from Maximum Fundable Limit (included in column 1) England only
	Male	Female	Other	Male	Female	Other	Male	Female	Other	Male	Female	Other	Male	Female	Other		
Home fees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Other fees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Dental confirmed intake

The figure below shows the table used to collect data on the Dental students intake during the academic year 2025-26.

Figure 3: Dental confirmed intake table

Headcount of the confirmed intake of dental students in the 2025-26 academic year															
Provider name															
Validation checks are shown below the table. Any cells that fail a validation check will be shown in red.															
Expected maximum intake:															
	Column 1 Total intake of students not withdrawn from the programme			Column 1a Domiciled in Great Britain			Column 1b Domiciled in Northern Ireland			Column 1c Domiciled in the Channel Islands and Isle of Man			Column 1d Domiciled in EU and overseas		
Fee eligibility	Male	Female	Other	Male	Female	Other	Male	Female	Other	Male	Female	Other	Male	Female	Other
Home fees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Other fees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Dental initial intake

The figure below shows the table used to collect data on the Dental students intake for the academic year 2026-27 as at 9 October 2026.

Figure 4: Dental initial intake table

Headcount of the initial intake of dental students in the 2026-27 academic year																	
Provider name																	
Validation checks are shown below the table. Any cells that fail a validation check will be shown in red.																	
Expected maximum intake:																	
	Column 1 Total intake of students not withdrawn from the programme			Column 1a Domiciled in Great Britain			Column 1b Domiciled in Northern Ireland			Column 1c Domiciled in the Channel Islands and Isle of Man			Column 1d Domiciled in EU and overseas			Column 2 Intake to 'graduate entry courses (included in Column 1)	Column 3 Intake of students exempt from Maximum Fundable Limit (included in column 1) England only
Fee eligibility	Male	Female	Other	Male	Female	Other	Male	Female	Other	Male	Female	Other	Male	Female	Other		
Home fees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Other fees	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Annex C: Example summary table (providers in England only)

This annex provides an example of the MDS26_Summary table, which appears in the Excel workbook for the MDS26 for providers in England only.

Medical and Dental Students survey 2026 summary

Provider name

This summary is for information only and the OfS will notify providers of any adjustments to grant arising from over-recruitment later this year.

Table A is populated with information taken from the Medical confirmed intake and Dental confirmed intake worksheets in MDS26.

Table B is populated with information taken from the Medical initial intake and Dental initial intake worksheets in MDS26.

For both tables 'Overseas intake' is the total number of students returned as domiciled EU and overseas (Column 1d) subject to other fees.

For both tables 'Percentage overseas' is 'Overseas intake' expressed as a percentage of 'Total intake'.

This worksheet contains two tables separated vertically by one blank row.

Table A: 2025-26 Confirmed intakes

For this table 'Total intake' is the sum of Column 1 of Medical confirmed intake or Dental confirmed intake.

	2025-26 Expected maximum intake	Of which anticipated overseas numbers	Maximum Fundable Limit exempted intake	Total intake	Overseas intake	Percentage overseas
Medical confirmed intake	0	0	0	0	0	0%
Dental confirmed intake	0	0	0	0	0	0%

Table B: 2026-27 Initial intakes

For this table 'Total intake' is the sum of Column 1 of Medical initial intake or Dental initial intake.

	2026-27 Expected maximum intake	Of which anticipated overseas numbers	Maximum Fundable Limit exempted intake	Total intake	Overseas intake	Percentage overseas
Medical initial intake	0	0	0	0	0	0%
Dental initial intake	0	0	0	0	0	0%

Abbreviations

Table 2: Explanation of abbreviations

Abbreviation	Explanation
DDB	Designated data body
DHSC	Department of Health and Social Care
FTE	Full-time equivalent
GDC	General Dental Council
GMC	General Medical Council
MDS	Medical and Dental Students survey
Medr	Medr, Wales's Commission for Tertiary Education and Research
NHSE or NHS England	National Health Service England
OfS	Office for Students
UKPRN	UK Provider Reference Number



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