



SCLMA President's Message

Dr Roger Faint



I have returned from working at the rural small Tara Hospital for two weeks. A busy medically overwhelmed small country Hospital and medical clinic. This has occurred over the last several months likely secondary to the COVID epidemic and the city population exodus

I feel that our Queensland Health public hospital system is a centre of expertise, wherever it exists. In fact I often feel proud of it.

This is because the Queensland Public Health and Hospital system (as with other states) has necessary oversight of patient acute and chronic medical needs, and has broader health protocols and management systems in place to provide patient care. This includes significant oversight of junior doctor training, patient health care quality and includes continuity of care plus doctor to doctor regular communication, amongst other health needs.

I often send complex unwell patients to the Sunshine Coast University Hospital and its associated community health centres knowing patients will be thoroughly assessed and treated with results and management recommendations sent back to their General Practitioners (and other doctors) with various long term health strategies in place or at least recommended.

This is of course largely dependent on the 'deep' subspecialty health system that is in place in the secondary and tertiary hospitals which is often and necessarily accessed readily. This means that a relatively junior doctor in the emergency department of SCUH has ready access to Emergency Physicians, subspecialty registrars and Consultants who then communicate this back to their continuity of care providers, who are often in the private sector. Well I am not feeling it recently.

There is a recent change in the previously necessary system of communication (particularly our local emergency & community mental health departments) and patients are suffering. I have recently sent my first complaint to QH since I graduated in 1986 and it takes significant frustration and significant energy to do so. Most patients don't want their GP to complain on their behalf as they tend to blame themselves for any inadequate health assessment and follow up.

Perhaps it is the relatively recent QH initiation of the useful Health Provider Portal (since December 2020) which 'does not' replace a detailed discharge medical summary. It perhaps could be our local Sunshine Coast population growth spike overwhelming public (and private) medical services, amongst other possible scenarios of course.

Whatever the cause, the public to private patient health communication breakdown is becoming worse and needs to be reversed.

I will also mention upcoming events for 2022.

The Sunshine Coast Health Report 2022 meeting will be held 28 July at the Maroochydore Surf Club. Last year we had close to 100 attendees!

The annual well regarded SCLMA Cocktail Party will be most likely held in October 2022 and I look forward to seeing all members there, in person this time.

Roger

*Dr Roger Faint
President SCLMA.*

**The SCLMA
thanks
Sullivan
Nicolaides
Pathology for
the distribution
of the monthly
newsletter**



**Sullivan
Nicolaides
PATHOLOGY**
Quality is in our DNA



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The Sunshine Coast Local Medical Association welcomes contributions from members, especially *'Letters to the Editor'*.

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**APRIL 2022
NEWSLETTER**

**Deadline FRIDAY
22nd APRIL 2022**

- What would you like to see in the newsletter?
- Do you have some jokes we can publish (and not offend anyone!!).

Our circulation via email, post and courier (Sullivan Nicolaides Pathology) reaches more than 1,000 recipients!

Contact Jo: Mobile: 0407 037 112

Email: admin@sclma.com.au

Fax: 5479 3995

We welcome new content - case studies, local news and photos.

If you are a new member, please send in a short bio and a photo to introduce yourself.

NOTE: *We are planning to change to digital only newsletter distribution over the next month.*

ARE YOU A MEMBER?

If you are not a member please complete the application form available on the website:

www.sclma.com.au.

You will need two proposers to sign your application form. If this is a problem, come along to a monthly clinical meeting to introduce yourself

Enquiries: Jo Ph: 0407 037 112

Email: admin@sclma.com.au

Are you listed on the Member Directory on our website? Are your details correct?

Directory form available on the website.

www.sclma.com.au



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Please 'like', 'share' and 'follow' our Facebook page: *sunshinecoast local medical association*.

**ALL COVID-19 UPDATES
ARE UPLOADED AS RECEIVED.**

Website: www.sclma.com.au

2022 CLINICAL MEETING SCHEDULE

THURSDAY 28 APRIL 2022
VENUE - MAROOCHYDORE
SURF CLUB FUNCTION ROOM
Speakers: Dr Hans Van der Wall
Dr Andrew Paszkowski
Topics: Reflux Scintigraphy
Parathyroid Imaging

THURSDAY 26 MAY 2022
VENUE - MAROOCHYDORE
SURF CLUB FUNCTION ROOM
 • **PLANNING IN PROGRESS**

THURSDAY 30 JUNE 2022
VENUE - MAROOCHYDORE
SURF CLUB FUNCTION ROOM
 • **AVAILABLE**

THURSDAY 28 JULY 2022
VENUE - MAROOCHYDORE
SURF CLUB FUNCTION ROOM
 • **SUNSHINE COAST HEALTH REPORT**
 • **(Last year 90+ attendees)**

THURSDAY 25 AUGUST 2022
VENUE - MAROOCHYDORE
SURF CLUB FUNCTION ROOM
 • **QUERY PENDING FOR THIS MEETING**

THURSDAY 29 SEPTEMBER 2022
VENUE - MAROOCHYDORE
SURF CLUB FUNCTION ROOM
 • **AVAILABLE**

THURSDAY 27 OCTOBER 2022
VENUE - MAROOCHYDORE
SURF CLUB FUNCTION ROOM
 • **AVAILABLE**

THURSDAY 24 NOVEMBER 2022
VENUE - MAROOCHYDORE
SURF CLUB FUNCTION ROOM
 • **AVAILABLE**

We are seeking interest for available dates listed above. Corporate sponsorship welcome! Speakers and topics need to be approved by SCLMA Meetings Convenor. Presentation time for speakers is 20 minutes plus Q&A

Queries: Jo Ph: 0407 037 112
Email: admin@sclma.com.au

SCLMA MEMBERSHIP

Welcome New Member!
(Accepted March 2022 meeting)
Dr Precious Lusumbami (Gynaecology)

Are you listed on our Members' Directory?
Do your details need to be updated?
<http://www.sclma.com.au/members/>
 Contact: Jo - admin@sclma.com.au
 Ph: 0407 037 112

Please pass this newsletter to someone who might like to become a member!
Application Form - Page 33



The revamp of the SCLMA website has started!!
Already you can pay your renewal or membership application with one click!

WATCH THIS SPACE!

HEALTH SERVICE LINK - MARCH 2022

Dear SCLMA Colleagues,

I wanted to introduce myself as the newly appointed Executive Director Medical Services (EDMS) for the health service. I commenced the role on 7 March 2022. The EDMS will be the author for the SCLMA newsletter update. With my history as a GP on the coast, I have a good foundation of the health landscape across the region.

I am a proud local resident and clinician. Since 2014 I have worked in General Practice at Sippy Downs. I joined the PHN Clinical Council as a member during 2016-2017 and worked as General Practice Liaison Officer for the HHS for 5 years. More recently, I've worked in the HHS Safety, Quality & Innovation Unit and as Acting Deputy Executive Director of Medical Services.

The EDMS role provides professional leadership for the SCHHS Medical workforce and is the single point of accountability to the Health Service Chief Executive for the organisation's quality of care, clinical and consumer engagement and professional standards of clinical practice.

The magnitude and complexity of change for the SCHHS is significant in recent times, as we transition from what has been a regional hospital network, to a major tertiary university health system. I am proud of what we have achieved so far, but there is much more work to be done. This will require new approaches and dedicated efforts to engage with our people and collaborate with our communities and partners, as we strive to deliver a high-quality and sustainable service.

I hope by the time you read this; your suburb has been cleaned up post floods that occurred across SEQ at the start of the month. All our hospitals remained opened during this time with hospitals standing up their emergency plans. My sincere thanks to our staff and those in other agencies who went above and beyond to ensure healthcare was available to those who needed it. Some of our services in the community were postponed, including mobile vans for BreastScreen and community vaccination.

Hospital in the Home providing care to patients in their homes

Hospital in the Home (HITH) is a SCHHS program allowing locals to receive acute care at home instead of in the hospital, and is now caring for more patients, and more complex patients, than it ever has before.

More than 100 Sunshine Coast Hospital and Health Service (SCHHS) patients a month are now benefiting from the HITH virtual healthcare service. SCHHS HITH A/Medical Director Dr Shaun Hosein said the service had come a long way since the first patient was referred and cared for in 2014.

"The program utilises modern health services and technology to support patients to recover from a range of injuries or illnesses in the comfort of their home or residential aged care facility. "While we have traditionally cared for people with infections, such as skin inflammations, pneumonia, severe chest infections, urinary tract infections as well as blood clots, we have recently been evolving to support more complex and frail patients transition to their homes.

"We have also been working with other specialist teams, General Practitioners and Nurse Navigators to help keep more people out of hospital and better streamline our care and health resources.

"In the future we want to continue to expand the service and involve other healthcare teams such as cardiology, respiratory and geriatrics, and help take the load off the hospitals.

"The increased use of technology is part of the natural progression of healthcare. We are already using telehealth and will be adding in remote patient monitoring for some patients admitted to HITH too," Dr Hosein said.

HITH services patients in the Sunshine Coast, Noosa and Gympie regional council areas, providing a home visiting service seven days a week and phone support 24-hours a day, seven days a week. You can learn more about HITH on Health Pathways, or by phoning **HITH referrals: 5202 7182**.

Director of Vascular Surgery Dr Pankaj Jha providing innovations to patients



Thanks to new technology and training, our vascular surgery team is performing more complex surgeries than ever before, benefiting close to 1,000 local patients every year.

SCHHS Director of Vascular Surgery Dr Pankaj Jha said his department had developed significantly in recent years, and he and his team were now able to perform operations not possible in many other parts of the state.

"We are one of the few specialties that operate all over the body, so if there is a problem with blood vessels anywhere other than the heart and brain we can treat them.

HEALTH SERVICE LINK - MARCH 2022

"One of the main developments within our team has been in our ability to provide needle hole operations whereby we can open and treat blocked arteries, in the legs for example, through a needle hole in the groin.

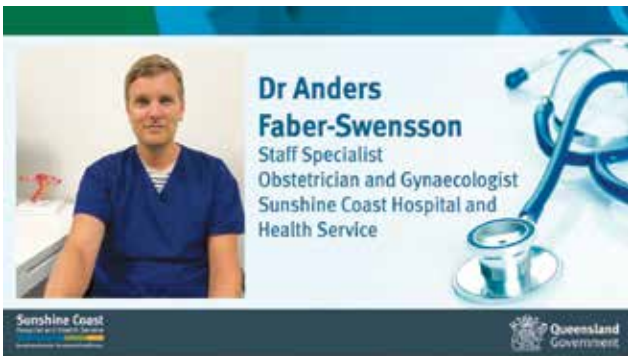
"We also have the ability to use very complex, custom made stent grafts to repair and treat aneurisms inside the belly and chest. We are now regularly treating aneurisms of the chest aorta, by operating on blood vessels in the neck.

"What we've also seen with the use of this new technology is an increase in the range of people who we can treat.

"Previously, many aged over 75 years would have been told they couldn't have certain surgeries because it was too taxing for them, and they would have been managed conservatively, with a 'wait and see what happens' approach.

"That sort of drive and demand from the patients is propelling vascular surgery forward and making what was once not possible, possible for all," Dr Jha said.

SCHHS Medical Profile – Dr Anders Faber Swensson



This month, Sunshine Coast Hospital and Health Service Staff Specialist, Obstetrician and Gynaecologist Dr Anders Faber-Swensson shares what it's like to be a part of the birthing journey with local families, the developments he's seeing in obstetrics here on the Coast and how the health service is continuing to lead the way in this space, to meet the needs of our community.

<https://vimeo.com/674267220/65e4377754>

"The obvious attraction of obstetrics and gynaecology is being able to be part of delivering babies and the excitement that's involved in that.

"With time and experience, gynaecology does become more interesting and you can really change lives, by helping women with complaints that come from things such as heavy bleeding, prolapse and incontinence.

"On an average day, as well as covering the birth suite and helping women and their families have babies, we also perform gynaecological surgery and caesarean sections, and run outpatient clinics. It's a varied job with lots of exciting aspects.

"The thing we're very proud of at Sunshine Coast University Hospital is having a really nice culture in our department, which has been fostered over many years.

"It's been a very interesting time to be in obstetrics. There's rightly been a lot more focus on reducing interventions in labour and I think at the Coast, we are part of leading the way in that space; in terms of offering women access to vaginal deliveries after caesarean sections, and breech deliveries, with the appropriate expertise and counselling around that.

"We're also very happy to be supportive of water births and delayed cord clamping and caesarean sections – these are all things that we are willing and able to adjust to, as the evidence for safety becomes stronger.

"As a unit we are getting a lot busier. We've gone from about 2,500 to almost 4,000 deliveries a year, over only a few years, and the complexity of the patient's we're seeing is definitely increasing too. We're already providing care for more pre-term babies and maternal fetal medicine which focuses on antenatal diagnosis of fetal conditions.

"Over time we will increase our focus on genealogical cancer care, which at the moment is something we largely refer to Brisbane. We are essentially moving to a full, tertiary service. To ramp up to that will take some more years but it's certainly well under way," Dr Faber-Swensson said.

Kind regards,

Dr Marlene Pearce

Executive Director Medical Services





Sunshine Coast Orthopaedic Clinic

Knee OA
Management

NEW GUIDELINES FOR MANAGEMENT OF KNEE OSTEOARTHRITIS



The AAOS (American Academy of Orthopaedic Surgeons) have recently released new guidelines for management of knee osteoarthritis. This is now the third iteration of these evidence based guidelines. This year there is a complete re-write with recommendations being stratified according to the strength of evidence to support or not support the modality into strong, moderate or limited evidence. The following is a summary of these recommendations.

Strong Recommendations in favour of:

- ★★★★ Supervised exercise, unsupervised exercise &/or aquatic exercise
- ★★★★ Self-managed programmes
- ★★★★ Patient education
- ★★★★ Oral NSAIDs
- ★★★★ Oral paracetamol
- ★★★★ Topical NSAIDs

Moderate Recommendations in favour of:

- ★★★★☆ Canes/Walking stick
- ★★★★☆ Unloader braces
- ★★★★☆ Neuromuscular training
- ★★★★☆ Weight loss (evidence downgraded)
- ★★★★☆ Intra-articular steroids
- ★★★★☆ Arthroscopic partial meniscectomy can be used for meniscal tears in patients with mild to moderate osteoarthritis who have failed physical therapy and other nonsurgical treatments

Limited Recommendations in favour of:

- ★★★☆☆ Oral/dietary supplements may be helpful but evidence is inconsistent/limited and additional research is needed to clarify the efficacy of;
 - Tumeric
 - Ginger extract
 - Glucosamine
 - Chondroitin
 - Vitamin D
 (evidence downgraded)
- ★★★☆☆ Manual therapy in addition to an exercise programme (evidence downgraded)
- ★★★☆☆ Massage may be used in addition to usual care (evidence downgraded)
- ★★★☆☆ FDA-approved laser treatment may be useful (evidence downgraded)

- ★★★☆☆ Acupuncture may improve pain and function (evidence downgraded)
- ★★★☆☆ TENS may be used to improve pain and or function (evidence downgraded)
 - a. Percutaneous Electrical Nerve Stimulation for pain and function
 - b. pulsed electromagnetic field therapy may improve pain (evidence downgraded)
- ★★★☆☆ Extracorporeal Shockwave therapy
- ★★★☆☆ PRP
- ★★★☆☆ Denervation therapy
- ★★★☆☆ High Tibial Osteotomy

Strong recommendations against use of:

- ★★★★ Lateral wedge insoles
- ★★★★ Oral narcotics including Tramadol

Moderate recommendations against use of:

- ★★★★☆ Hyaluronic acid intra-articular injections
- ★★★★☆ Arthroscopic lavage and or debridement

Consensus Statements; ★★★★★

Dry needling and free-floating interpositional devices should not be used

These recommendations can be used in determining management strategies in primary care management of knee osteoarthritis prior to considering knee replacement surgery.

Of particular interest is the new recommendation against any narcotic use, recommendations against hyaluronic injections, and recommends for arthroscopic partial meniscectomy if not responding to non-operative treatment in mild to moderate disease.

Further information can be found on our website at www.sunshineortho.com.au

The original document can be downloaded at <https://www.aaos.org/globalassets/quality-and-practice-resources/osteoarthritis-of-the-knee/oak3cpg.pdf>

For appointments contact

Dr Steven Lawrie
Suite 17, Kawana Private Hospital
5 Innovation Parkway, Birtinya QLD 4575

p: 07 5493 3994 | f: 07 5493 3897
e: sunshineortho@bigpond.com.au | sunshineortho.com.au



GP Liaison

Your hospital connection, together we can deliver better healthcare.

Dr Edwin Krays and Dr Michelle Johnston



New SCHHS Model of Care – Advice Pathway

The SCHHS has commenced a new initiative for some Clinical Specialties to improve our service to referring GPs – called the Advice Pathway. This pathway provides clinician written treatment advice, directly to the referring GP. The advice takes the form of a suggested treatment plan, tailored specifically to the patient, based on the referral information provided. The patient referral may be accepted by the SCHHS and waitlisted, or may not be accepted, dependant on the requirement for Specialist treatment. The clinician advice is transmitted electronically to the referring GP.

The specialties that have commenced this pathway include: Cardiology, COVID, Dermatology, Diabetes, Ear Nose and Throat, Endocrinology, Endoscopy, Gastroenterology, Geriatrics, Gynaecology, Hepatology, Immunology, Infectious Disease, Rehabilitation, Respiratory, Rheumatology, Urology, and Vascular. There are plans for further specialties to commence in the coming weeks and months.

If you have questions about this initiative, please contact the SCHHS GPLO Unit.

Changes to the SCHHS patient appointment letters

The SCHHS is updating the outpatient referral acceptance letters that are being sent to patients to provide improved transparency of wait times and enable informed decision-making for their healthcare choices. The letters will reference the QH Performance website, which is publicly available, so that patients can see the historic wait times for each specialty by category.

This information is readily available to the GP community through the Smart Referrals application (after a specialty has been selected within the referral template). GPs are encouraged to discuss this information with their patients when making referrals to the public system, so that patients are better equipped to make informed decisions.

Hospital-led COVID service

1. Phone Virtual Ward SMO to provide clinical handover – direct **phone 0460-432-660** available 24 hours, 7 days.
***This is not for patients.
2. Also send referral (**addressed to the Virtual Ward**) to SCUH central referral centre via:
 - Smart Referrals (if available in your practice)
 - Secure messaging
 - Fax (electronic is preferred)
3. For service enquiries, phone the admin officer on:

(07) 5436-8639
(07) 5436-8634

HealthPathways: [COVID-19 Requests - Community HealthPathways Sunshine Coast & Gympie](#)

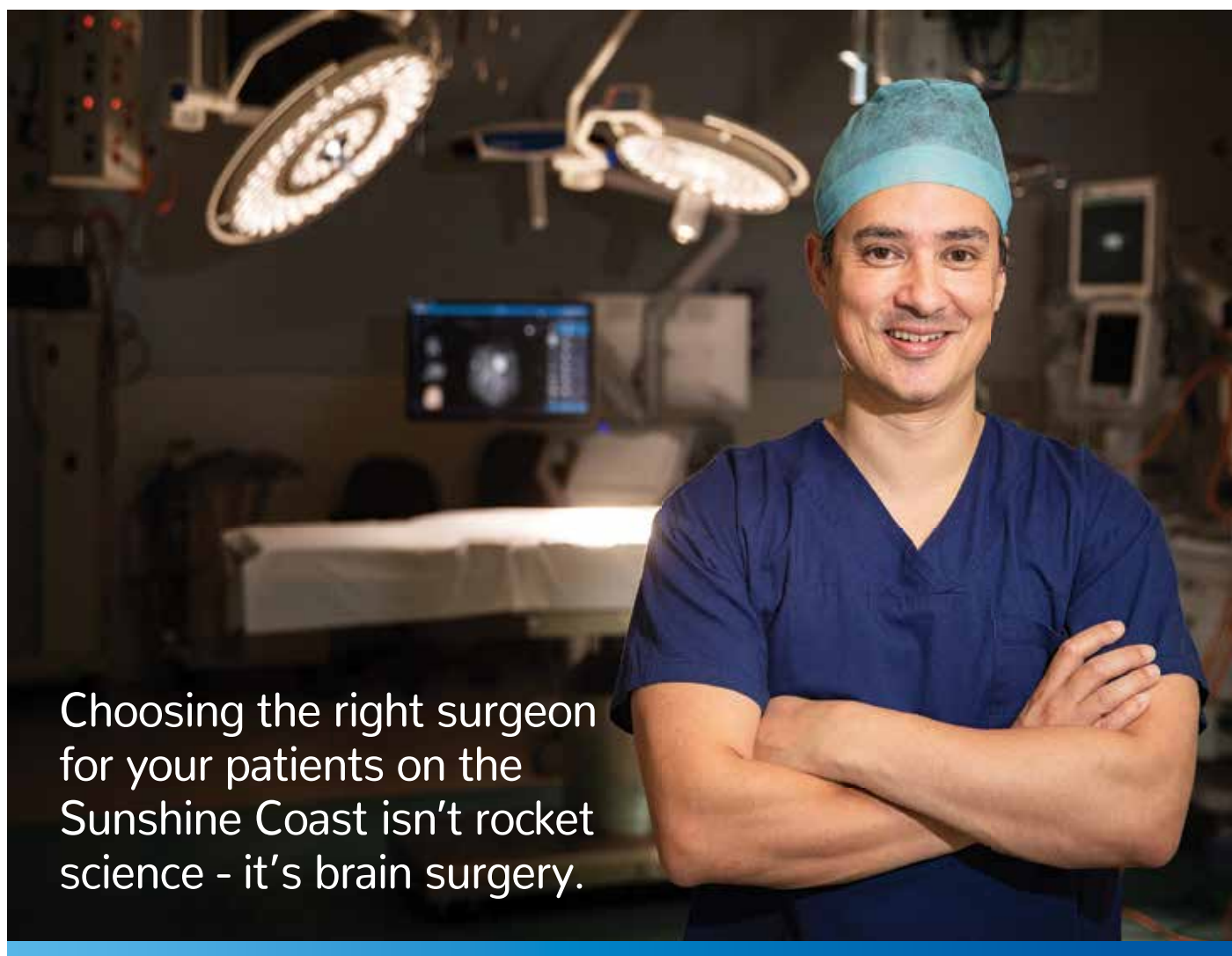
The GP Liaison Unit wants to hear from you!

Send us an email or give us a call: SCHHS-GPLO@health.qld.gov.au; Phone: 5202 3822

Sunshine Coast
Hospital and Health Service
Exceptional people. Exceptional healthcare.

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Australia
An initiative of NPS MedicineWise





Choosing the right surgeon for your patients on the Sunshine Coast isn't rocket science - it's brain surgery.

Sunshine Coast Neurosurgery is the specialist practice of Dr Stephen Byrne, who has worked on the Sunshine Coast since 2017.

Dr Byrne MBChB, MRCSEd, FRACS underwent his neurosurgical training in Melbourne, Adelaide & New Zealand before gaining his Fellowship of the Royal Australasian College of Surgeons.

In fact, Stephen is the only fellowship-trained spine surgeon on the coast endorsed by both the Australian Orthopaedic Association and the Neurosurgical Society of Australasia.

At Sunshine Coast Neurosurgery all patients receive one-to-one pre-operative counselling and tailored personalised care using the latest techniques to deliver world-class healthcare.

Please feel free to call Sunshine Coast Neurosurgery to discuss any neurosurgical issue and we look forward to helping your patients along the road to recovery.

List of Services

Sunshine Coast Neurosurgery use their extensive experience to treat many common conditions such as:

- Cervical and lumbar degenerative conditions
- Brain tumours
- Spine tumours
- Pituitary tumours
- Chiari malformations.

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Sunshine Coast University Private Hospital
Suite 17, 3 Doherty Street, Birtinya QLD 4575

T 07 5437 7256
E info@scneuro.com.au



**SUNSHINE COAST
NEUROSURGERY**

www.scneurosurgery.com.au

Fostering healthy ageing in our community



In collaboration with our communities, partners and stakeholders, Central Queensland, Wide Bay, Sunshine Coast PHN recently launched the “Ageing Well in our Region: A Healthy Ageing Strategy 2022 – 2027”. The strategy outlines the PHN’s strategic vision, to ensure that as people age, they have value in the community and are empowered to live the life of their choice.

The strategy details the action required by a range of key agencies to deliver the regions vision for older people. The strategy is also aligned to the PHN’s overarching strategic plan to build healthier communities through primary health outcomes and the actions articulated in the strategy align to the PHN’s overarching strategic vision to achieve ‘healthy, resilient, connected communities – country to coast.’

Servicing a population of 976,789 covering 12 Local Government Areas across Central Queensland, Wide Bay and the Sunshine Coast, our PHN region is home to diverse communities that are ageing and growing rapidly. Older people make a significant contribution to our society, economically, socially and intellectually as mentors, leaders and skilled workers and volunteers. Health is fundamental to being able to live well, age well and continue to participate in family and community life.

The strategy outlines the actions needed to foster healthy ageing and enable people in our communities to maintain their physical, cognitive and social functional ability for as long as possible.

Through the four strategic priority areas identified in the strategy, key actions will aim to assist people to stay healthy, well and independent throughout their lives, ensure adequate care is accessible and contribute to a progressive, sustainable and equitable aged care system.

This strategy represents a great opportunity to improve the health outcomes for older people in our region and achieve greater coordination and integration of efforts in older people’s health across the health continuum, life-course and the spectrum of primary health care.

It was recognised, in development of this strategy, that a whole of-society response was required, working together and in collaboration across all sectors and agencies.

Central Queensland, Wide Bay, Sunshine Coast PHN Chief Executive Officer Pattie Hudson said, she was delighted with the collaborative effort, from our partners and stakeholders across our local community, Queensland and Australia, over a six-month period, to develop this strategy and agreed approach moving forward.

“The development of the strategy is a key step in our organisational commitment to ongoing continuous improvement as we seek to build age-friendly communities and transform systems to meet primary and preventative healthcare needs for older people in our region.”

“I look forward to playing our part in seeing this strategy come to life, and the improved health outcomes as a result, as we strive to improve the lives of older people, their families and their communities” she said.

The “Ageing Well in our Region: A Healthy Ageing Strategy 2022 – 2027” is available to view and download from the Central Queensland, Wide Bay, Sunshine Coast PHN

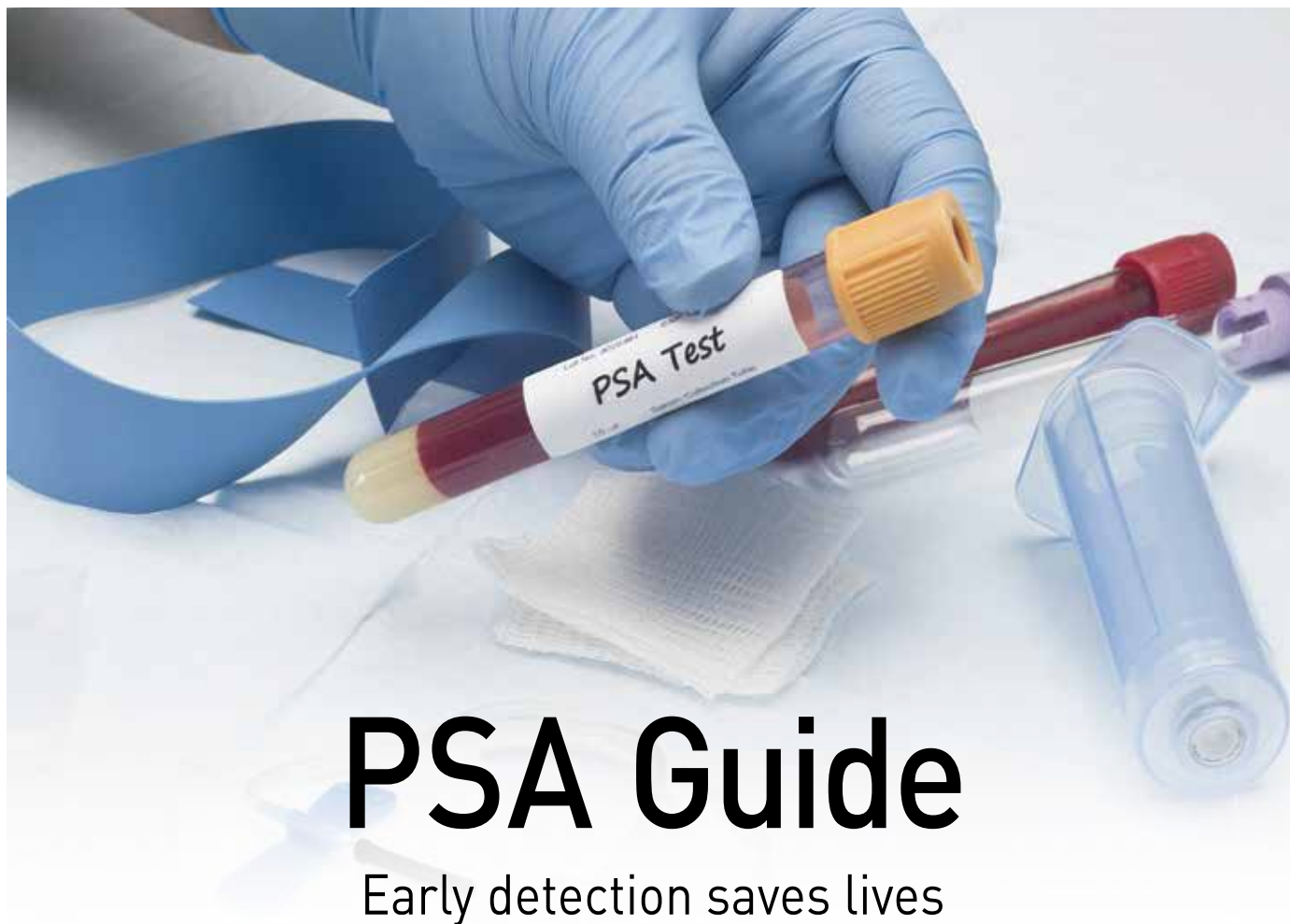
website: www.ourphn.org.au/our-reports/



Happy Retirement Dr Rob Ingham

After commencing my own practice on 27th October 1988 I have enjoyed my long association with the Cotton Tree community. On the 1st of April I decided to retire. No fools here!

Thanks to all who made my business such a success particularly my wife Jenny. I thank all for the well wishes and gifts. Thanks to Jess and the practice for my lunch yesterday. Thanks to all my patients who have made my work so interesting and enjoyable I wish you all the best of health. I will miss you all!



PSA Guide

Early detection saves lives

PSA >3 is a red flag

(>2 if positive Family Hx, BRCA)

Repeat PSA in 1-3 months with free/ total ratio

Refer if:

Second PSA is still >3 (2)

Or anytime if there is a hard prostatic nodule
or PSA increases while on Duodart

Refer to:

Dr. Tony Gianduzzo or A/Prof. Troy Gianduzzo



Sunshine Coast Urology Clinic

Buderim Prostate Clinic

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W. buderimprostateclinic.com.au

THE NEW FACE OF HOMELESSNESS.

Try to get almost anything done these days, and it is going to be more expensive and delivery will be delayed – everything gets blamed on COVID. Phone the HIC authority prescription line and you spend the first minute getting a lecture that this call will be delayed because “they” are helping others affected by COVID (a recorded message that must have been there almost a year by now).

Although COVID is now officially responsible for almost everything, and unofficially the vaccine is responsible for everything else that can't be directly blamed on the virus itself, there is a dark and insidious decline in Australia's social standards that is increasingly demanding a direct government response.

The homeless have been with us since before there was writing. The numbers have ebbed and flowed with the country's economic fortunes and with the rise and fall of whichever drug of addiction is most readily available. But we are witnessing a silent and secondary pandemic of homelessness that results from the COVID pandemic.

You do not need to be deeply entrenched in the real estate market to know that housing prices are rising rapidly, somewhere between 5 and 10 times the CPI. Amateur economists like me know vaguely why this is so. Low interest rates drew lots of investors and would-be investors out of the woodwork, away from the share market, and into housing. Whole populations wanted to get out of cities and into less densely populated peripheral centres of population. Tens of thousands of ex-patriates returned from overseas and wanted their homes back out of the rental market. Many pressures came to bear. The immediate outcome was increased housing prices and rental charges. Landlords started issuing notices that they would not be renewing leases, either because they were selling on the ever-ballooning market or because they wanted to re-rent to new tenants and a very substantially increased price.

A year ago we started to see a trend. I had an elderly couple come to me, lease not renewed, nowhere to go even at unaffordable prices. The first couple that I saw with this now-familiar story had been renting the same house for 30 years, must have paid off the landlord's mortgage and then some, now literally homeless and on the streets at the age of 84. I was seeing this sort of story about once a month early last year. I now see it once a week or more.

I could regale you with dozens of horror stories.

A disabled couple, dispossessed with nowhere to go, found a caravan in a caravan park but couldn't inspect it because it was tenanted. It was also not available until a week after the termination of their home rental. They expected to be on the streets for a week. The landlord, at the last minute, allowed them to stay an extra week.



But they had paid for their bond clean, ready for inspection on the due date for them to leave. A week later, with the heat and the flooding rains, another inspection before they actually vacated the premises, and mould had grown everywhere; another \$1,000 for another bond clean. Then when they reached their caravan, it was almost unliveable, no bed, windows cracked, roof and walls leaking. But nowhere else to go, and now paying almost as much for a van as they had been paying for a small house.

An employee of an agency supposed to assist disadvantaged tenants told me another tale. Clients who came in were asked “do you have a car?” If the answer was yes, they had temporary accommodation. This was not just a 20-year-old fit young male being told to sleep in the back of his ute, this was Mum Dad and two kids sleeping in a 4-seater sedan.

What, I ask myself, has my country come to?

The government has, belatedly, recognized the problem. The remedy so far has been too little too late. Much much more is needed. Historically, most homeless folk were, with due respect, homeless because of lifestyle choices. They would rather spend their Centrelink incomes on something other than rent. But the new wave of homeless are a different demographic – they are prepared to pay a fair rent for reasonable accommodation, if only they could find it.

Watch this space. It is growing larger every day. Until decent affordable housing is planned, we can expect to see more ordinary grandmothers sleeping under shop fronts.

Wayne Herdy

TELEHEALTH SERVICES AVAILABLE

WE ARE OPEN AND SEEING PATIENTS AS NORMAL WITH HEIGHTENED INFECTION CONTROL

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USC trial: Can muscle stimulation reduce pain in people with leg artery disease?

University of the Sunshine Coast researchers are testing the effectiveness of a home-based therapy for peripheral artery disease, also known as PAD, which causes blockages in the arteries of the legs leading to leg pain when walking.

Funded through an industry partnership, the research team is seeking participants diagnosed with peripheral artery disease to participate in the randomised controlled study to test the effectiveness of a footplate muscle stimulation device as a treatment option.

They are also working with vascular surgeons and general practitioners to identify patients who might benefit from the study.



Associate Professor Chris Askew is Principal Investigator of the FootPAD trial being conducted at USC



As part of the trial, participants will use a footplate muscle stimulation device for 60 minutes each day for 12 weeks. The device is designed to deliver electrical impulses to the muscles of the feet and legs.

More than 200 participants are being sought for the trial which aims to verify the findings from a preliminary pilot study by Imperial College London.

Participants will complete the footplate program at home and take part in leg blood flow assessments, walking tests and questionnaires about leg pain and quality of life during study visits at USC's Sunshine Coast campus.



People interested in enrolling in the trial or who want to learn more can email footpad@usc.edu.au or call 07 5456 5364.

Sunshine Coast hospitals welcome record number of new nursing graduates

Ramsay Health Care hospitals on the Sunshine Coast have welcomed a record intake of 30 nursing graduates, as the industry works to recover from staffing shortages related to the COVID-19 pandemic.

The introduction of 30 graduate Registered Nurses (RNs) is a 130 percent increase on the intake at the same time last year.

Noosa Hospital is now home to 14 new RNs, up from just four in 2021, while Nambour Selangor Private Hospital has seven new graduates, also up from four last year. Sunshine Coast University Private Hospital has nine new RNs (up from five in 2021) and for the first time they'll all be working in operating theatres.

CEO Justin Greenwell says the new graduates will receive plenty of support as they begin their new roles.

"Like many industries, workforce shortages have been a significant challenge over the past two years, so it's wonderful to welcome so many new members to our nursing team," Mr Greenwell said.

"To ensure they feel supported, Ramsay Health Care has introduced a buddy system so there is someone to regularly check in on the new grads' wellbeing and progress. We've also increased the educational support available to them.

"Ramsay Health Care has also invested in our nurse leaders with a new leadership program focused on creating exciting career pathways for them."

Among the new graduates is an RN who has been working at Noosa Hospital for five years.



Emma Perry began her career as a Catering Assistance at the hospital in 2017 and was inspired to join the team of nurses helping Sunshine Coast residents. "I had always been interested in caring for others however I never knew that I wanted to become a nurse until I started at Noosa Hospital," Ms Perry said.

"I love that every single day I look forward to going to work, each day is different and a challenge in one way or another.

"If you're considering becoming a nurse it'll be the best life decision you make."

Across the nation Ramsay Health Care welcomed a record 550 new graduates in February, a 25 percent increase on 2021's intake.

The nation's largest private healthcare provider plans to work closely with educational institutions, including TAFEs, to attract more students into nursing.



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MONTHLY UPDATE

By CEO Justin Greenwell

SUNSHINE COAST UNIVERSITY PRIVATE HOSPITAL

NAMBOUR SELANGOR PRIVATE HOSPITAL • NOOSA HOSPITAL

Navigating recent weather

A big thank you to our Ramsay Health Care staff, doctors and local community for how everyone rallied together in the recent torrential rains and flooding.

While we saw some surgeries cancelled over several days given the number of staff, doctors, patients and supplies that were unable to get road access to our hospitals, it was terrific how quickly we were able to resume normal services.

A special thank you to those team members that did back-to-back shifts or even slept at some of our hospitals due to inability to travel home. We really appreciate you all.

Specialists expanded capacity At Hervey Bay

Fraser Coast residents can access more specialist consulting, including pre- and post-operative care close to home. In addition to bariatric and general surgeon consults we welcome cardiologist **Dr Jan Du Plooy** and orthopaedic surgeon (special interest hip and knee) **Dr Anthony Murray** to Ramsay Consulting Suites, Hervey Bay. **Learn more** online under 'Our Services' at sunshinecoastuniversityprivate.com.au



At Nambour

Gastroenterologist **Dr Melissa White** has expanded her number of sessions at Nambour Selangor Private Hospital; and orthopaedic surgeon **Dr Anthony Murray** is also consulting and operating there.

In Noosa

Radiation oncologist **A/Prof Alex Tan** is consulting at Noosa Hospital, while general surgeon **Dr Drago Popovic** is consulting and operating at Noosa Hospital.

In Gympie

Consults are now also offered by urologist **Dr Borjana Barth**, general surgeon **Dr Drago Popovic** and orthopaedic surgeon **Dr Anthony Murray**. We're also running a [Vestibular Clinic](#) fortnightly in Gympie.

Expanding pain medicine service

We're also expanding the comprehensiveness of our pain medicine service across the Coast with **Dr Frank Thomas** increasing his availability at Sunshine Coast University Private Hospital, in addition to the work on the Coast of pain medicine specialists **Dr Peter Georgius** and **Dr Paul Frank**. This complements our specialist services in neurosurgery and rehabilitation.

Additional new Parkinson's Disease Program

Being diagnosed with a complex, chronic condition such as Parkinson's Disease can cause stress and confusion for your patients and their loved ones. Nambour Selangor Private Hospital is expanding its Parkinson's services with a new [10 week Parkinson's Program](#).



Justin

T: 07 5390 6101

GreenwellJ@ramsayhealth.com.au

Ramsay Clinic Caloundra News From CEO

Donna Kain



Ramsay Clinic Caloundra's expert mental health care team offers a variety of group-based day therapy programs, in addition to the Mindfulness Masterclass on Wednesdays, which we announced last month.

We offer a Cognitive Behavioural Therapy (CBT) Day Program on Tuesday mornings, for people who have difficulties managing depression, anxiety, unhelpful emotions, and PTSD symptoms. On Friday mornings, we offer a CBT using art therapy program, designed to facilitate processing, communication and problem solving.

An Alcohol and Drug Relapse Prevention Day Program runs on Thursday mornings, with emphasis on CBT and Acceptance and Commitment Therapy (ACT).

GP referrals to 'dear psychiatrist' should be directed to
Intake.CLP@ramsayhealth.com.au
Intake team phone 07 5492 0277 or
ramsaymentalhealth.com.au/caloundra



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Tel: 5374 8100
receptiononcologybuderim@genesiscare.com

Consulting clinics:

Caboolture - Dr Debra Furniss
Birtinya - Dr Alex Tan
Noosa - Dr Debra Furniss,
Dr Bradley Wong, Dr Alex Tan
Cooroy - Dr Alex Tan
Gympie - Dr Bradley Wong

Reference: 1. Brown PD, et al. JAMA 2016; 316(4):401-409.

Disclaimer: Any procedure including treatments involving radiation carry risks, including skin irritation and associated pain. Before proceeding with a referral for treatment, patients should be advised to seek a second opinion from an appropriately qualified health practitioner. As in any medical procedure, patient experiences and outcomes will vary.

genesiscare.com





KAREN CLARK
GENERAL MANAGER

BUDERIM PRIVATE HOSPITAL

MARCH 2022

Dear SCLMA colleagues,

Thank you for the opportunity to update you on Buderim Private Hospital and our latest news. I am proud to say that our team continues to partner with our patients to deliver care with genuine compassion and wisdom, despite the continued challenges presented by COVID-19. In this edition we farewell Dr James Moir after a long and distinguished career and also welcome Dr Anthony Murray to our experienced team of orthopaedic specialists.

Kind regards,
Karen Clark | General Manager

Farewell to Dr James Moir

After 47 years of practising medicine and delivering around 5000 babies on four different continents, Buderim Private Hospital obstetrician and gynaecologist, Dr James Moir, retired on Friday 11 February.

I would like to congratulate Dr Moir on his incredible career and for helping so many people realise their dream of starting a family and safely welcoming their precious new babies into the world. Dr Moir has been a wonderful part of our Buderim Private Hospital maternity and women's health teams and will be missed greatly and remembered fondly.



Welcome to Dr Anthony Murray

Buderim Private Hospital recently welcomed Dr Anthony Murray to our team of Visiting Medical Specialists. Dr Murray specialises in hip and knee replacement surgery, arthroscopic knee surgery, and orthopaedic trauma surgery. As Australia's first Indigenous Orthopaedic Surgeon, Dr Murray employs techniques including Direct Anterior Approach hip replacement, Kinematic Aligned Knee Replacements and Patient Specific Instrumentation.

For more information about Dr Murray including his biography and contact details, please visit: buderimprivatehospital.com.au/doctors/Anthony-Murray

Dr Murray joins other experienced orthopaedic specialists credentialed at Buderim Private Hospital, including:



Dr Gerard Bourke	07 5317 1117
Dr Russell Bourne	07 5444 0355
Dr Nikki Casey	07 5438 3555
Dr Allan Clarke	07 5437 6510
Dr Frank Connon	07 5493 8038
Dr Jonathan Dick	1300 377 226
Dr Hamish Gray	07 5438 3500
Dr Tze-Ki Ho	07 5443 9999

Dr Kim Latendresse	1300 377 226
Dr Steven Lawrie	07 5493 3994
Dr Stephen Megson	07 5476 6004
Dr George Parker	07 5444 1811
Dr Mark Robinson	07 5346 8000
Dr Daevyd Rodda	07 5493 8038
Dr Bernard Tamba-Lebbie	07 5452 5844
Mr James Tunggal	1300 377 226

Buderim Private Hospital offers a comprehensive orthopaedics service and is a full service facility which offers day surgery right through to the most complicated revision joint replacements. Our orthopaedic specialists have over 200 years experience and are supported by services including an intensive care unit and rehabilitation ward and outpatient programs.

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- Allied Health including Clinical Psychology, Exercise Physiology, Dietetics & Oncology Massage Therapy
- McGrath Breast Care Nurse
- Clinical Trials



Our Team:



Dr Hong Shue
Medical Oncologist
MBBS (Monash), FRACP



Dr Brenton Seidl
Medical Oncologist
MBBS, BSc, FRACP



Dr Sorab Shavaksha
Clinical Haematologist
MBChB (Leeds), FRACP,
FRCPA (2013)



Dr Joshua Richmond
Clinical Haematologist
MBBS(Hons), FRACGP,
FRACP, FRCPA



Dr Alice Livings
Clinical Haematologist
BSc(Hons), MBBS(Hons),
FRACP, FRCPA



Dr Manjunath Narayana
Clinical Haematologist
MBBS, FRACP, FRCPA



Samantha Clutton
Clinical Psychologist
MPsychClin, FCCLP



Sarah Bloomfield
Dietitian & Nutritionist
APD, APN



Jesse Goldfinch
Exercise Physiologist
BClinExSc, ESSAM, AEP



Tania Shaw
Massage Therapist
DipRM, CLT, OMT



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DR EMMA SECOMB - CLOSURE OF PRACTICE

After 13 years in practice on the Coast, I've made the difficult decision to close my private practice and leave operative surgery on 31st March 2022.

As many friends and colleagues will know I've battled severe contact dermatitis over the course of my career, and unfortunately the problem is recurring again with development of new sensitivities and increased exposure to surface cleaners I've had longstanding allergies to.

It's been a difficult decision to come to as I've loved surgery and seeing the positive impact good care can bring to patient's lives, but I also look forward to a less frenetic pace of life and exploring options to expand my role in medical education locally.

I'm very grateful that my colleague Dr Mara Clarson has agreed to take over my electronic patient records and existing patient base. Mara's reputation speaks for itself, and knowing my patients will be cared for by someone with her skill and compassion has made leaving clinical practice a little easier.

My practice staff have called forward all follow up clients in the first half of 2022 into clinic appointments prior to March 31/3/22. Follow up clients with bookings in the second half of 2022 will be emailed to let them know the practice is closing and that their records are being transferred to Dr Clarson's practice. Our phone line and webpage will remain open until the end of the year with a message outlining the practice closure and Dr Clarson's contact details.

I'd like to take this opportunity to thank everyone I've worked with on the Sunshine Coast. It's been a joy to work in such a collegiate, professional, and patient centred medical community. Although it's hard to leave operative surgery I feel very lucky to have been part of Medicine at its best whilst living in one of the most beautiful places on Earth. Please stay in touch, and let me know about developing medical education opportunities as they arise – I'm looking forward to the next chapter!



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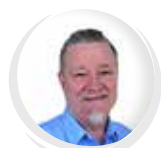


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Dr John Evans
MBBS, B Med Sci (Hons),
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Dr Denise Ladwig
FRANZCOG DDU



Dr Rodney Larsen
MBBS (Hons), FRANZCR



Dr Noel Marginson
MBBS, FRANZCR



Dr Paul Reidy
MBBS, BAppSC
(MedImaging), RANZCR



Dr Amit Sidana
MBBS (Hons), FRANZCR



Dr Nigel Sommerfeld
MBBS, FRANZCR



Dr Mark Sinnamon
MBBS, FRANZCR, FAANMS



Dr Pradeep Sonwalkar
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Upcoming changes to superannuation

Removal of \$450 per month threshold for super guarantee eligibility

From 1 July 2022, employers will be required to make super guarantee contributions to their eligible employee's super fund regardless of how much the employee is paid. Employees must still satisfy other super guarantee eligibility requirements.

Employers will need to check their payroll and accounting systems have been updated for super payments made after 1 July 2022 to ensure they correctly calculate their employee's super guarantee entitlement.

(Source ATO website)

Regulations made to remove work test requirement when making voluntary contributions from 1 July 2022

Regulations have now been registered which remove the existing requirement for a work test or work test exemption to be satisfied for a super fund to accept most types of voluntary contributions made for members aged 67 to 74. Under the new rules, which apply for contributions made from 1 July 2022;

- A super fund can accept contributions made for a member while they are under age 75 (including the period up to 28 days after the end of the month in which they turn 75), regardless of their work status.

Members must still ensure their eligibility for voluntary contributions (ie total superannuation balance less than \$1.7mil at 30th June prior financial year).

Please note the work test still needs to be satisfied for members between the age 67 to 74 who intend to claim a tax deduction for a personal super contribution.

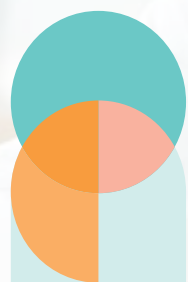
To satisfy the work test, a member must work for at least 40 hours during a consecutive 30-day period in the financial year in which the contributions are made.

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Tess Keightley

Tess is an Accredited Practising Dietitian (APD) and Nutritionist. She helps manage chronic diseases and health concerns with nutritional interventions to improve health outcomes.

Tess believes there is space for all foods in our diets and has a very balanced approach to nutrition. She works with patients to create realistic and sustainable goals that are best suited to their treatment plan and lifestyle. There is no one-size-fits-all approach to nutrition and Tess will work with your patients to create a nutrition plan that is suited to their individual needs.



Megan Rowley

Megan is an Accredited Practising Dietitian (APD) and Nutritionist who studied at the University of the Sunshine Coast. A family history of cardiovascular disease has led Megan to seek experience with Dietitians in the cardiac rehabilitation space during her studies. This further fueled her passion for empowering people with evidenced-based nutrition education, skills and interventions to improve their health outcomes.

Megan supports patients to create balanced and realistic nutrition goals. She helps them to create individualised nutrition interventions that support and manage their health concerns and treatment, while fitting in with their lifestyle.



To find out more or to refer a patient,
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EONLife Wellness is a sister company of Heart HQ.
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✉ admin@eonlifewellness.com.au

Ningaloo Reef, Western Australia

Home to some of the rarest flora and fauna, the Ningaloo Reef boasts a magical marine world where you can swim with the biggest fish species on the planet, watch rare turtle species hatch, go diving or snorkelling, or even just take a leisurely stroll along its beautiful coastline.

The Ningaloo Reef is located approximately 745 miles north of Perth. The reef stretches over a distance of 260 kilometres making it the world's largest fringing reef, and one of the longest near-shore reef systems in the world.

It is among the last remaining ocean paradises on the planet with over 250 species of corals, 520 species of fish, and crystal clear waters, and duly earned its status as a World Heritage site in 2011.

In 2006, the Australian Institute of Marine Science discovered several sponge gardens in the deep waters of the marine park. These sponge gardens are now considered to be major hotspots of biodiversity.

The reef also plays a huge role in the migratory routes for dolphins, manta rays, and humpback whales.

An unforgettable Australian aquatic adventure



The Ningaloo Reef possesses a wide array of activities from kayaking, to land based fishing, diving and snorkelling.

You will have the opportunity to meet turtles, Nemo fish, and maybe even swim with baby sharks, manta rays, dolphins and humpback whales.

The best time to spot whale sharks is between March to July, and between July to October, the reef welcomes nearly 40,000 humpback whales as they migrate past Ningaloo on their way south.

If you are travelling with children or you are keen to witness the glory of this reef without getting wet, you can simply hop aboard a glass bottom boat and embark on a magical marine journey.

You can even treat yourself to an eco-luxury safari with a stay at Sal Salis, and enjoy a gourmet dining experience while remaining fully immersed in nature.

And lastly, there's no better way to complete your Ningaloo Reef experience other than boarding a scenic flight, and soaking in the majestic views of the turquoise lagoons, the reef, and the Cape Range's canyons.

What we have planned for you

- The Ningaloo reef is a place of beauty. Take a walk along the beautiful coastline watching the beautiful sunrise and sunset!
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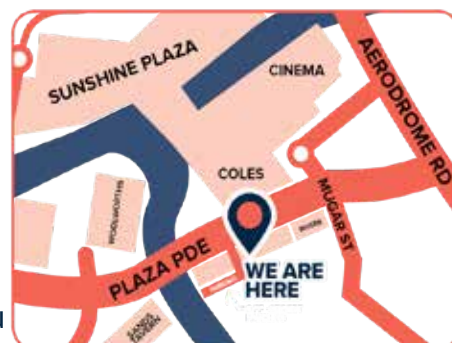
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Sunshine Coast Orthopaedic Clinic

SAVE THE MENISCUS –
AN UPDATE ON ARTHROSCOPY

There have been a number of recent papers questioning the role of knee arthroscopy and partial medial meniscectomy in the degenerate knee. This has quite rightly led to a decreased use of knee arthroscopy to treat the degenerative knee, at least as a first line treatment. That's not to say that arthroscopy and partial meniscectomy cannot be beneficial in certain older patients, but it is reasonable to start with a dedicated physiotherapy programme first and reserve arthroscopy for recalcitrant symptoms, or those with severe mechanical symptoms such as locked or locking knees or conditions such as root tears, loose bodies etc.

An unintended consequence, however, has been to reduce referral rates of younger patients for which the benefit of early arthroscopy and repair of the meniscus is clear. The goal of knee surgery is to save the meniscus. So meniscal repair and to a lesser extent conservative meniscal resection is the mantra for knee surgery, especially in younger patients. Meniscal repair preserves meniscal function so should prevent the problems of increased risk of arthritis, chronic pain and decreased function that can occur especially in younger patients. The time from injury to referral has a significant impact on the quality of the meniscus and the chances of successful repair. On a cost benefit analysis, meniscal repair is far superior to partial meniscectomy or physiotherapy. Age is not a barrier to repair. The results of repair are no different for those under 40 as to those over 40 with a 10% to 20% failure rate reported depending on the paper,

but younger patients have more to lose if their meniscus is not repaired. Meniscal repair is a more complex procedure with a longer recovery time than arthroscopic partial meniscectomy or non-operative treatment but the benefits are clear: reduced osteoarthritis, better functional outcomes and reduced long term costs.

Please consider early referral for patients with mechanical symptoms likely to be arising from a meniscal tear, especially if there is a history of traumatic onset, mechanical symptoms or clinical signs.

I am happy to take your calls and discuss further any cases as always.

For appointments contact

Dr Steven Lawrie
Suite 17, Kawana Private Hospital
5 Innovation Parkway, Birtinya QLD 4575
p: 07 5493 3994
f: 07 5493 3897
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AUSTRALIAN SENIOR ACTIVE DOCTORS CONFERENCE

13-14 AUGUST 2022 REDCLIFFE QLD

The Australian Senior Active Doctors Association and AMA Qld are pleased to announce that the inaugural Australian Senior Active Doctors Conference will take place in Redcliffe Qld in August 2022. Redcliffe is located on Moreton Bay and is a 30-minute drive north of Brisbane Airport.

Please register your interest in attending by emailing: asada_secretary@outlook.com

Registration will be available on the AMA Qld website in April 2022: <https://qld.ama.com.au/>

A detailed program will be made available closer to the conference.

Themes for discussion include: Global Trends and Models of Senior Doctor Registration, Medical Reserves, Encore Careers and Roles for Senior Doctors, Navigating the 2023 Registration Requirements, CPD, Recency of Practice, College Requirements, Maintaining Registration while Winding Down Practice, Emerging Issues for Senior Doctors, Progressing Senior Doctor Policy, Recent ASADA and AMA Qld Initiatives.

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PRESIDENT AND CEO REPORT



Professor Chris Perry OAM and Dr Brett Dale

For the past two years, our conversations have ended with “stay safe”. With the extreme weather events of late February and early March, we have added “stay dry” to our farewells.

Flooding across South East Queensland has cost lives, devastated livelihoods, destroyed homes and possessions, and put added pressures on our health care system, just at a time when we were hoping for some relief from COVID-19.

This year has also seen the start of our advocacy against the North Queensland pharmacy trial and we hope you will add your voice to the campaign.

FLOODS

The floods that hit so much of the south-east corner of our state will have ongoing consequences for months to come. While most practices have off-site back up and disaster management plans, natural disasters have implications for doctors, their businesses, patients and staff. The AMA Queensland Workplace Relations Team has put together an overview of issues you may encounter following the floods, including workers' compensation coverage, patient records, temporary closures, leave entitlements and counselling.

AMA Queensland members can contact the Workplace Relations Team on (07) 3872 2222 or workplacerelations@amaq.com.au.



Members all around the state will have gone through similar experiences in floods in recent years – in Townsville, Mackay, the channel country, and many other areas. We encourage you to share your wisdom with colleagues who may be facing their first flood event.

Many of our GP members are running wound clinics for people who injure themselves during the clean-up. It's important at this time that we ensure people know the dangers of flood water and the muddy residue left behind, and that they should wear long sleeves, long trousers and boots where possible, and wash and treat any scrapes or cuts as soon as possible to avoid infection.

Read more at qld.ama.com.au/news/SEQfloods

FLOOD ASSISTANCE GRANTS

The AMA Queensland Foundation is committed to helping Queenslanders in need.

Do you know a patient who has suffered significant hardship as a result of the recent floods in 2022? We are asking doctors to nominate people in their care or community for \$1,000 grants to assist those who have been seriously impacted by the floods.

88 L'Estrange Terrace, Kelvin Grove QLD 4059 • 07 3872 2222 • qld.ama.com.au



*Leading Queensland Doctors
Creating Better Health*

Applications close on 31 April but grants will be awarded as they are assessed. Nominations are welcome from AMA members and non-members alike.

Application forms are available at amagfoundation.com.au and you can contact AMA Queensland Foundation Coordinators on (07) 3872 2222 or email amagfoundation@amaq.com.au

#StopNQPharmacyTrial

The North Queensland pharmacy trial continues to attract more scrutiny around the issues of patient safety and conflict of interest.

All GP representatives have left the steering committee, as have Aboriginal health representatives. The North Queensland Primary Health Network has also left the committee following a conflict of interest with their representative – a pharmacist and member of the Pharmacy Guild.

The Guild continues to paint our objections to this proposal as a “turf war”. Their arguments do not mention patient safety or the potential for missed diagnoses.

We have called on the Queensland Government to release the evaluation of the urinary tract infection (UTI) prescribing trial before proceeding any further with the North Queensland pilot.

We have the support of many pharmacist colleagues in this fight. Like us, they value the need for all medical and health professionals to practise within their scope.

Please join the campaign. Write to your local Member of Parliament to voice your concerns and arrange a meeting to explain the dangers of this pilot in person.

Visit our campaign page here qld.ama.com.au/Stop-NQ-Pharmacy-Trial



COVID-19 UPDATE

The floods may have washed COVID-19 out of the headlines, but outbreaks are still occurring and the further removal of public health protections will likely lead to more cases.

AMA Queensland has sought and been given confirmation from Queensland Health that masks will still be required in GP clinics despite the mandate lifting for most other areas.

We have also worked with the Queensland GP Alliance and Queensland Health to create a process to support GPs to access emergency supplies of personal protective equipment (PPE).

Whenever possible, GPs should obtain PPE through their own suppliers, but when this is not viable, they should contact their local Primary Health Network (PHN). In circumstances where the PHN cannot supply PPE, GPs can obtain emergency access through their local Hospital and Health Service. In an urgent situation where supplies of critical PPE are unable to be sourced, GPs should contact their PHN to liaise on their behalf with the Australian Department of Health.

Read our full PPE guide for GPs at qld.ama.com.au/news/PPEpathway

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MOCA 6 BARGAINING

ASMOFQ attended the first MOCA 6 meeting in February and discussed logistical matters for the bargaining process, as well as issues relevant to:

- junior medical officers/doctors in training
- senior medical officers
- visiting medical officers
- MSPPs and MOPPs
- rural and remote doctors.



Members can review the current Log of Claims and read the latest MOCA update at qld.ama.com.au/moca6. The current agreement with Queensland Health expires in June 2022.

MENTAL HEALTH FUNDING



AMA Queensland gave evidence in February to the Queensland parliamentary inquiry into mental health services. We called for investment of at least \$700 million a year, including into services for new parents and their babies to cope with COVID-related restrictions and cutbacks.

Queensland spends the lowest of any state or territory on mental health. During COVID, we have seen a 28 per cent increase in presentations to emergency departments for mental health services and a 50 per cent increase in presentations to GPs for patients seeking help for mental health conditions.

Our members are also seeing an increase in mental health presentations from new parents, with new mothers discharged from hospital before they have learnt how to breastfeed and settle their baby, and with COVID restrictions limiting their access to baby groups and Community Child Health supports.

AMA Queensland calls on Queensland Health to reintroduce Community Child Health sessions and increase the number of mother-baby inpatient units across the state. You can read more at qld.ama.com.au/news/mentalhealthinquiry

PUBLIC HOSPITAL CAMPAIGN

Our federal colleagues have launched a campaign to make public hospital funding a vote-changer during the upcoming federal election. The *Clear the hospital logjam* campaign is aimed at fixing bed block, ambulance ramping and emergency department delays.

Doctors and patients are encouraged to share their stories and experiences with the public hospital system, including delays to elective surgery, long waits for specialist appointments, and ED delays, with the aim of getting commitments from all federal candidates to reform the funding model.

Our Ramping Roundtable has come up with a five-point action plan to fix ED ramping and ease the pressure on our exhausted health care workforce. We presented our plan to government last year – it is time they started to act on it.

Visit the campaign website at ama.com.au/clear-the-hospital-logjam



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INDIAN MEDICAL ASSOCIATION OF QLD

Several AMA Queensland Council and Committee members attended the Indian Medical Association of Qld's fundraiser on *Domestic Violence in Medical Practice* in March. Dr Vikas Moudgil was a speaker and Dr Maria Boulton was a panellist.



L-R: Dr Shunil Sharma, Ms Sarv Singh, Dr Paramjit Singh from Gold Coast, Dr Vikas Moudgil, Dr Cyril Fernandez, Dr Fiona Raciti, Dr Maria Boulton, Assoc Prof Alka Kothari, President of the Indian Medical Association of Qld Dr Vagish Singh and JCU student Ms Anoushka Kothari.

WORKPLACE RELATIONS SUPPORT

Are you interested in brushing up on your workplace relations knowledge from the comfort of your own desk? The AMA Queensland Workplace Relations Team is presenting its 2022 webinar training series. Enhance your knowledge of topical issues in workplace relations by logging into the live webinars, or receive a recording to listen to in your own time.

- 21 March - The Great Resignation
- 23 May - Performance Appraisals
- 25 July - Recruitment
- 5 September - Fundamentals of Leadership
- 28 November - Employment Status

Single Webinar \$50.00; Pack of 5 \$200.00. **FREE** for Workplace Relations Toolkit subscribers. Contact our Workplace Relations team to find out more at workplacerelations@amaq.com.au or (07) 3872 2211.

AMA QUEENSLAND FOUNDATION

Thanks to everyone who donated to the AMA Queensland Foundation's Christmas appeal, which raised \$25,000 for Juiced TV. Please enjoy this heart-warming video featuring Foundation Chair Dr Dilip Dhupelia. Keep an eye out for our next appeal to be announced soon. Watch it at youtube.com/watch?v=kUp8bE121ac

JOIN AMA QUEENSLAND



We are offering SCLMA newsletter readers who become AMA members before 30 April 2022 a \$50 gift card as a special bonus. Just use the QR code to join and send an email to l.holohan@amaq.com.au in our membership team to activate this offer.

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Australian Medical Association Limited
ABN 37 008 426 793

Level 1, 39 Brisbane Avenue, Barton ACT 2600.
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 Telephone: (02) 6270 5400 Facsimile (02) 6270 5499
 Website: www.ama.com.au



BUSINESS AS USUAL BUDGET NEGLECTS NON-COVID HEALTH NEEDS

The claims of record spending on health in tonight's Federal Budget mask a failure to tackle stress in the health system, though continued spending on the response to the COVID-19 pandemic is welcomed says the AMA.

With tonight's Budget announcements promoting a \$7.3 billion increase in Medicare funding and a \$9.8 billion increase in hospital funding, the AMA said the amounts did not represent expanded health funding.

"The Medicare and hospital funding in tonight's Budget amounts to little more than usual recurrent spending and planned growth, not the new injection of funds our health system desperately needs," AMA President Dr Omar Khorshid said.

"Pleased as we are to see tonight's Budget finally acknowledge the Ten-Year Plan for Primary Care, we can see no plan for how its implementation will be funded.

"This Budget was the last chance for the Government to show it is serious about primary care reform by delivering the extra funding needed to improve patient access to high quality General Practice.

"While the Health portfolio has been spared funding cuts, the Government's focus on cost of living has overlooked quality of life, particularly for the thousands of Australians languishing on hospital waiting lists," Dr Khorshid said.

The AMA launched the "[Clear the hospital logjam](#)" campaign to show the cycle of crisis gripping our public hospitals. The budget fails to acknowledge this crisis and will do nothing to address ambulance ramping or elective surgical waiting lists.

Dr Khorshid said: "The Budget re-states the Commonwealth will only meet 45% of usual hospital costs, and that the 6.5% cap on hospital funding growth will remain."

"Yet hospital Emergency Departments are full, ambulances are ramping, and the AMA estimates the waiting list for essential (elective) surgery has blown out by a further 190,000 surgeries with COVID-19 elective surgery pauses, on top of the existing wait lists.

"The next Government will need to act. The major parties are on notice we will be pushing this case all the way to polling day because Australians are clearly saying they want a focus on healthcare, and they expect a health system which is able to meet their family and community's needs," Dr Khorshid said.

29 March 2022

CONTACT: AMA Media: +61 2 6270 5478,
 +61 427 209 753
media@ama.com.au

SUNSHINE COAST LOCAL MEDICAL ASSOCIATION Inc. ABN: 56 932 130 084

MEMBERSHIP APPLICATION

Enquiries: Jo Bourke Ph: Mb: 0407 037 112 Email: admin@sclma.com.au

<u>NAME</u>	Surname:	First Name:
<i>THE SCLMA PREFERS TO SEND YOUR MONTHLY NEWSLETTERS & INVITES BY EMAIL</i>		
<u>BEST EMAIL:</u> _____		
<u>ADDRESS:</u>		
	Practice/Building	
	Street:	
	Suburb:	Postcode:
	Phone:	Mobile:
<u>PRACTITIONER DETAILS:</u>		
	Qualifications:	
	Date of Birth:	Year of Graduation:
	Hospital employed / Private Practice (cross out one)	
	General Practice / Specialist (cross out one)	
	Area of Speciality:	
<u>PLEASE NOTE:</u> <i>Retired doctors who wish to join the Association are required to attach a letter of good standing from their respective College.</i>		
<u>PROPOSERS:</u> (to comply with the Queensland Associations Incorporation Act, two financial members of the Association are required to nominate each applicant for <i>new</i> membership. Members <i>renewing</i> their membership do not need proposers).		
1. NAME:		Signature:
2. NAME:		Signature:
<u>ANNUAL SUBSCRIPTION (GST included):</u>	(Please tick)	<u>NOTES:</u>
Full-time ordinary members - GP and Specialist	\$ 132	Wherever possible and to save printing and postage costs we ask you to receive monthly invitations and newsletters by email. Newsletters and Invites are always uploaded to our website: www.sclma.com.au Queries: admin@sclma.com.au
Doctor spouse of full-time ordinary member	\$ 66	
Absentee or non-resident doctors	\$ 66	
Part-time ordinary members (less than 10 hours per wk)	\$ 66	
Non-practising ordinary members, under 60 years old	\$ 66	
Residents & Doctors in Training	Free	
Non-practising ordinary members, over 60 years old	Free	
Patron and honorary members	Free	
Payment can be made by cheque payable to SCLMA or by direct debit to: SCLMA Westpac Account. BSB: 034-243 ACCOUNT NUMBER: 11-9298		
Please return this form either by email (scan or photo) or Fax 07 5479 3995 of your E.F.T. to: Email: admin@sclma.com.au Post: SCLMA PO BOX 549 COTTON TREE 4558		
<u>Please note:</u> <i>Membership applications will be considered at the next Management Committee meeting.</i>		

The Sunshine Coast Local Medical Association has Public Liability Insurance

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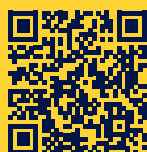
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REDCLIFFE LOCAL MEDICAL ASSOCIATION NEWSLETTER

Redcliffe LMA produces a similar newsletter

For full details re advertising go to their website: www.rdma.org.au

Email: RDMAnews@gmail.com

SCLMA ADVERTISING GUIDELINES:

To comply with Section 133 of the National Law and guidelines, advertising of services must not:

Paragraph (a) "Create or be likely to create unwarranted and unrealistic expectations about the effectiveness of the health services advertised"

Paragraph (f) "Claim that the services provided by a particular regulated health profession are better, as safe as or safer than others"

Paragraph (o) "Contain any claim, statement or implication that a practitioner provides superior services to those provided by other registered health practitioners"

PLEASE NOTE THE FOLLOWING:

The anti discrimination commission of Queensland has the following statement on job advertising:

Discriminatory advertising is against the law. Job advertisements need to give the impression that all suitable applicants are welcome to apply. References to sex, relationship status, age, race, religion etc should be avoided, as should the use of words that may indicate a preference for particular groups or may discourage others from applying, eg foreman, tradesman, glamorous, well-built, mature, youthful, office girl etc. Publishers can be fined and be the subject of a complaint to the Commission for publishing discriminatory advertisements that show an intention to contravene the Anti-Discrimination Act 1991. Discriminatory advertisements will therefore often be refused or modified by publishers in order to avoid legal liability.

CLASSIFIEDS

ANN ST FAMILY MEDICINE – GENERAL PRACTITIONER

- We are looking for a VR General Practitioner to join our busy team which is GP owned. Part time position offering 75% of billings.
- Full support from an experienced and professional team of nurses and support staff.

Please email your CV to olivia@annstfamilymedicine.com.au or contact Olivia on 0412 113 846.

February 2022

GENERAL PRACTITIONER

We are looking for a VR General Practitioner to join our busy well established GP owned and operated Family Practice. Full time preferred however not essential, with partnership opportunity on the beautiful Sunshine Coast.

We are an accredited mixed billing practice with well-established operating systems and very loyal patient base.

You will be supported by experienced, professional nursing and reception staff in a family friendly workplace.

Please email resume to admin@trinityclinic.com.au or contact Nadine Ware on (07) 5491 9888.

February 2022

SHARED LEASE AVAILABLE FOR SPECIALIST SUITES ON A PERMANENT BASIS FOR MEDICAL PRACTITIONERS/ ALLIED HEALTH PROVIDERS AT MAROOCHY WATERS.

- Brand new fit out:
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- Ground level with 4 dedicated parking spots and ample parking in the vicinity.
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- Access to staff amenities – toilets, kitchenette/microwave oven/ fridge.
- Admin support can be negotiated.
- General practice, pharmacy, and pathology all in the area.

Available from January 2022.

For more information, please contact Sharon Kayrooz on sharon@coastaldigestivehealth.com.au

November 2021

GP POSITION AVAILABLE – DPA APPROVED – MOFFAT BEACH

Are you ready to move to the beautiful Sunshine Coast and take advantage of the perfect work/lifestyle balance?

We are a privately-owned, well-established practice.

Due to outgoing doctor, this position will come with an existing patient base to ensure you are busy from day one.

If you are subject to a moratorium, we have a DPA in place, which is rare for this beachside location.

We Offer:

- Full-time or part-time position with flexible sessions available
- DPA location right on the coast
- Mixed Billing; full-time nursing support; Administration and management support; No weekends or after hours

Please contact Practice Manager on 07 5438 2333 for further details and forward a copy of your profile containing a brief summary of your experience along with your contact details to pm@moffatbeachmedical.com.au

February 2022

COME IN, SIT DOWN AND START WORKING!

We offer full service specialist medical consulting room in the Nucleus Medical Suites on the Campus of Buderim Private Hospital.

We will look after all your accreditation requirements. We look after your business all week long. We have supported multiple doctors in developing and growing their business. We have a strong service culture towards our doctors and their patients.

- We will manage all of your appointments.
- Book all of your procedures, including securing an anaesthetist if required.
- Manage all of your billing.
- Handle all of your correspondence.
- Our staff are experienced and professional.
- Our rooms are modern with a large reception area.
- We have a dedicated procedure room.
- We have on site parking.

For further information please contact Lindsey 5444 6003.

March 2022

GP REQUIRED FOR A BUSY GP OWNED PRACTICE - SUNSHINE COAST HINTERLAND.

- Hours worked to be decided by the Doctor. Attractive remuneration available. The practice is open Monday to Friday 8am – 5pm, and Saturday by appointment, no after hours
- Full nursing support including enhanced primary care planning, health assessments, vaccinations, treatment room and procedure room assistance. Full time on-site Practice Manager.
- Full allied health support including xray, USS, Ct scans, Physiotherapy, Podiatry, Psychologist and Pathology
- Pharmacy attached to the practice.
- Medical Director and Pracsoft clinical programs used
- Full computer tech support

Contact Yvette Perry. Email: pm@beerwahsurgery.com.au

October 2021

PROFESSIONAL MEDICAL CONSULTING ROOMS

- Available for Lease on a Sessional or Permanent basis for Medical Practitioners/Allied Health Providers.
- 3 x Fully Furnished premium office spaces, available individually or lease all 3.
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- Access to staff amenities – toilets, kitchenette/microwave oven/fridge. Admin support can be negotiated in the lease.
- Immediate start available for suitable applicant.

Please mail manage@dusktilldawnsleep.com.au to enquire or register your interest and arrange a viewing.

April 2021

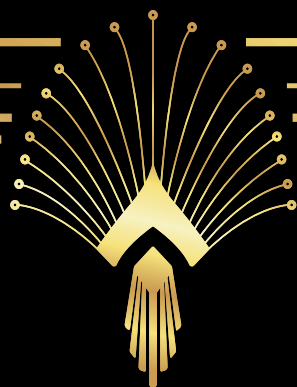
GENERAL PRACTITIONER (VR) - SUNSHINE COAST QUEENSLAND

To find out more, please email your resume to admin@nambourclinic.com.au or ring Rowena for an informal chat Ph: 0412 292 666. *Continuing.*

CLASSIFIEDS: admin@sclma.com.au

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Queries: Jo 0407 037 112



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