



SCLMA President's Message

Dr Roger Faint



Welcome to 2019.

Children and teenagers have started school for the year; and teenagers have departed for tertiary education and perhaps orientation week as my son has done. I am as excited for my son, excited, perhaps as much he is.

Pharmacists having increased patient responsibility and care, through the establishment of a QLD Pharmacy Council is still a pressing issue. Members will have received a copy of the AMAQ local political member protest pro forma and I urge you all to fax or email a copy to your local member. Reduction in patient quality of care through fragmentation and a lessor standard of training are very real issues.

I find that doctors often forget the high standard of training, standards and experience they have achieved, and it is when the medical profession and patient care is being threatened, they need reminding of their expertise. This is such a time. Please fax or email the form to your local member.

Many members will have read about the imminent closure of the Gympie Private Hospital on the 28th February this year. This is very disappointing and difficult to understand in the current scenario of significant population growth in South East QLD. I worked in Gympie (my parents live there currently) as a GP in the mid 90s and the hospital appeared to be thriving at that stage.

I suspect that the lack of affordable private health insurance (currently lowest level of membership in 11 years - 44.6 %) and public hospitals keeping private patients are very real issues.

Those who read our Facebook page or website will have read an article recently by Sean Parnell, Health Editor, The Australian. It is very clear that the Federal Health Department is aware of State Public Hospitals having significant access to private health funds and are attempting to make access less savoury and for good reason it appears.

Of course, issues such as above, often penalise the rural and outer metropolitan areas of Australia first and thus it appears private medicine is indeed under threat. If you are still unsure, I suggest you contact a local Sunshine Coast Obstetrician.

The SCLMA member survey has been sent out once and will be resent this week. The survey will guide the SCLMA committee over the next few years, will take less than two minutes to complete and I encourage you to do so.

We congratulate Kevin Hegarty (service to public health administration) and Dr Steven Coverdale (service to medicine on the Sunshine Coast) who were awarded Order of Australia Medals in the recent Australia Day awards.

It is very sad to have read of the death of a 27 year old female intern, from the Sunshine Coast University Hospital, in Caloundra recently. The SCLMA sends condolences to family, friends and working associates.

*Regards
Dr Roger K Faint*

**The SCLMA thanks
Sullivan Nicolaides
Pathology for the
distribution of the
monthly newsletter of the
Sunshine Coast Local
Medical Association.**



CONTACTS:

President	Dr Roger Faint Ph: 5445 1046 (W) Ph: 0448 848 327
Vice President & AMAQ Councillor	Dr Wayne Herdy Ph: 54791 5666
Secretary:	Dr Mark de Wet Ph: 5444 7344
Treasurer:	Dr Peter Ruscoe
Newsletter Editor:	Dr Kirsten Hoyle Ph: 5452 6511
Meetings Convenor:	Dr Scott Masters Ph: 5491 1144
Hospital Liaison:	To be appointed
PHN Representative:	Dr Jon Harper
Committee:	Dr Mason Stevenson Dr John Evans Dr Tau Boga Dr Fabio Brecciaroli Dr Alicia Lorenz Dr Grant Eddie.
Junior Fellow:	Dr Jonathan Last

For general enquiries and all editorial or advertising contributions and costs, please contact:

Jo Bourke (Secretariat)

Ph: 5479 3979

Mob: 0407 037 112

Fax: 5479 3995

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

Please address all correspondence to:

SCLMA PO Box 549 Cotton Tree 4558

Email: jobo@squirrel.com.au

Fax: 5479 3995

Newsletter Editor: Dr Kirsten Hoyle

Email: kirsten@eximious.com.au

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**MARCH
NEWSLETTER
Deadline will
be FRIDAY 15
MARCH 2019**

DO YOU HAVE SOMETHING TO SAY?

- Perhaps you might like to comment on articles published.
- 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: 5479 3979

Mobile: 0407 037 112

Email: jobo@squirrel.com.au

Fax: 5479 3995

We welcome new content - case studies, local news and photos. If you are a new member, send in a short bio and a photo to introduce yourself.

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: 5479 3979 or 0407 037 112

Email: jobo@squirrel.com.au

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

Directory form available on the website.



HIGHLIGHTS in this issue:

- P 4: Adj. Prof Naomi Dwyer, CE, SCHHS
 P 6-7: AMA Queensland Report
 P 8: GPLO Report - SCHHS
 P 10: PHN - 'Right Time Right Place'
 P 12: Wallis Westbrook BPH Update
 P 14: Jo Munday - Eden Private Hospital
 P 23: Poole Group - 'Franking Credits'
 P 29: Motoring - Dr Clive Fraser
 P 30: Travel - Antarctica
 P 32: USC Trial - Cholesterol'
 P 37: Membership Application Form

Please 'like', 'share' and 'follow' our Facebook page: [sunshinecoast local medical association](#).

Website: www.sclma.com.au

Editorial

Welcome to the first edition of the SCLMA newsletter for 2019. For many I am sure that the end of year break, revelry, rejuvenation is already proving a distant memory! Personally, I am not even half way through a trove of new novels received but that just means I have much to look forward to!



I am also part way through the BBC's podcast series in which Rabbi Jonathan Sacks interviews a variety of people on the topic of morality in the 21st Century.

Sacks explores what is becoming of our society when our current Zeitgeist is a focus on the self and our icon the "selfie". It seems the mantra of many is now, "I'm free to be myself" rather than, "We're all in this together". In the late 19th Century, French sociologist Emile Durkheim introduced the concept of "anomie" - a condition in which society provides little moral guidance to individuals. He described it as a nurtured condition; a breakdown in a shared set of moral beliefs that results in a state of instability and a lack of legitimate aspirations. We no longer think of the community or nation as a whole. Rather, the electorate is fragmented into subcultures defined by gender, sexual orientation, ethnicity, religion etc. He points out that these easily become competitive interest groups, less concerned with the common good than with what is good for me and those like me. Each group can be encouraged to see itself as a victim and to identify an oppressor to blame. This paves the way for schismatic and baleful politics which now seems to abound at state, federal and international levels. It also makes it easier for the media to manipulate public opinion by fake news, innuendo, hyperbole and post-truth.

Many now believe they have a right not to be offended. George Orwell, whose edict was "If liberty means anything at all, it means the right to tell people what they do not want to hear", would surely turn in his grave at such an assault on free speech.

He argues that the answer to our fragmenting society is morality - "the alchemy that turns selfish genes into selfless people". We have the wherewithal to unite the lonely, depressed, anxious "I's" who our current trends are creating into a happier, healthier, fulfilled "we" While much of what we do in medicine and beyond is about competition, probity is about cooperation which will help us face an ever challenging future.

Regards,

Kirsten Hoyle

e. kirsten@eximious.com.au

CLINICAL MEETINGS FOR 2019: THURSDAY 28 MARCH 2019

Sunshine Coast Heart Specialists Cardiac Services at SCUPH

Presenters: Dr Stuart Butterley, Dr Daljeet Gill, Dr K K Lim, Dr Naresh Dayananda, Prof Tony Stanton

Sponsor: Pfizer and WL Gore (TBC)

Venue: Maroochydore Surf Club

IMPORTANT NOTICE!

NO MEETING IN APRIL 2019 (Easter and Anzac Day holidays)

There will be TWO MEETINGS in MAY

THURSDAY 2nd MAY

- **Dr David McIntosh ENT Surgeon**

THURSDAY 30th MAY.

- **Dr Georgina Hale, Infectious Disease Medicine**

Thank you to all who have contacted us re speaking in 2019 - we are working on our calendar.

Keep an eye on Meetings on our website: www.sclma.com.au

Jo: 0407 037 112 jobo@squirrel.com.au

HEALTH SERVICE LINK - FEBRUARY 2019



The inaugural 2019 Class of Sunshine Coast Griffith University Medical Program has started

Together with some outstanding medical leaders, including Professor Judy Searle, Doctors David Elwood, Ted Weaver and Deputy Dean, Dr Jennifer Williams, it was a great privilege to be part of the

Welcome Team for our much-awaited inaugural medical students of the Sunshine Coast Griffith University Medical Program on 21 January 2019.

Fifty first year medical students attended the inaugural orientation to the Griffith University Doctor of Medicine (MD) program at the Sunshine Coast University Hospital.

We are very proud to be Griffith University's health service partner for their Sunshine Coast Medical Program, and look forward to supporting these students through provision of excellent clinical experience and education.

The excitement amongst the students from all over Australia was palpable, as well as their pride in being able to start their medical career here with us.

In addition, we had 65 new interns start this year and the new intake of nursing graduates arrived this month. We really have entered an exciting era of health education for our home grown workforce.

SCUH is now digital

On 29 January 2019 after a significant lead up of training, simulations and dress rehearsals, we went live with Enterprise Scheduling and then all ieMR clinical modules from 11 February 2019 at SCUH.

This is part of our staged approach to digital adoption, involving community services across the health service, with our next go-live at Nambour General Hospital in May 2019.

I am pleased to report that following this high level of preparation, led by our Clinicians, and in particular, Dr Tanya Kelly, we ensured a safe and successful transition from paper to an electronic medical record. I look forward to updating you more about the benefits we are realizing for improved patient care in future updates.

Acting Executive Director Medical Services

I am very pleased to share with you, the appointment of our Acting Executive Director Medical Services, Dr Andrew Hallahan. Andrew joined the health service on 7 February, from his current role as the Executive Director Medical Services (EDMS) for Children's Health

Queensland, and his state-wide leadership role as the Paediatric lead for the Clinical Excellence Division Patient Safety and Quality Improvement Service. He also established the Queensland Children's Critical Incident Panel, as a state-wide resource to support expert review of children's patient safety events.

Andrew is recognised for his significant leadership in systems improvement, and has expertise in clinical governance, medical professional leadership and relations, digital hospital and clinical and biomedical research.

He is a Paediatric Oncologist, and led clinical services including Gastroenterology, Hepatology and Liver Transplantation whilst fulfilling the Medical Lead for Patient Safety at Children's Health Queensland. He will soon complete his FRACMA.

New community hub at Maroochydore

From 29 January, Sunshine Coast Hospital and Health Service (SCHHS) is relocating 19 community services to a purpose-built, centrally-located and service-specific facility in Maroochydore. All these relocations will be complete by end of March and will have no impact to current service delivery.

Mental Health and Addiction Services clinical community services located at the new location, 60 Dalton Drive (next to Officeworks) will include:

- 1300 MH CALL; • Acute Care Team; • Child and Youth Mental Health Programs; • Evolve Therapeutic Team; • Continuing Care Team South Team; • Community Adult Eating Disorders Program; • Consumer/Carer Representatives; • Older Persons Community Mental Health Team; • Community Diversions Programs;

Other services that will be moving to the new location include:

- Sunshine Coast Public Health Unit; • Aged Care Assessment Team; • Community Chronic Conditions Assessment team; • Nurse Navigator team; • Child, Youth and Family Health; • Outreach Clinic Midwives.

Until next time.

Adj. Prof Naomi Dwyer

Chief Executive, SCHHS



Got a patient with neck or spinal problems?

Time to talk to Sunshine Coast Spine & Orthopaedics!



Dr Greg Finch FRACS FAOrthA
Spine Surgeon, Orthopaedic Surgeon

Practising from the Nucleus Medical Centre at Buderim Private Hospital, Dr Finch specialises in the treatment of all spinal conditions. So if you're looking to refer a patient with a neck or back problem to a local specialist, contact Dr Finch today. His experience **stretches back** more than 15 years.

- minimally invasive spinal surgery
- microscopic spine surgery
- disc replacement surgery
- decompressive surgery
- anterior spinal surgery
- revision spinal surgery
- adult spinal deformity
- cervical spine surgery
- spinal tumours
- spinal trauma



SUNSHINE COAST
SPINE & ORTHOPAEDICS

Ph 5444 7579
Fx 5444 7616

admin@sunshinecoastspine.com.au
www.sunshinecoastspine.com.au

Suite 16a, Nucleus Medical Suites,
23 Elsa Wilson Drive, Buderim



Concerning recommendations into pharmacy prescribing

As you may be aware, between June and October 2018, the Queensland Parliament conducted an inquiry into the potential establishment of a pharmacy council. The inquiry also examined other issues related to pharmacy including ownership and the scope of practice for pharmacists.

During the inquiry, the Pharmacy Guild lobbied for pharmacists to have the ability to write repeat prescriptions. AMA Queensland made a strong submission to the inquiry that firmly opposed pharmacists writing prescriptions. Our submission noted how this proposal would fragment patient care and produce poorer outcomes, as well as putting pharmacists in a difficult conflict of interest.

Unfortunately, one of the inquiry report's recommendations suggested "the Department of Health develop options to provide low-risk emergency and repeat prescriptions (for example, repeats of the contraceptive pill) and low risk vaccinations (including low risk travel vaccinations) through pharmacies subject to a risk-minimisation framework."

Update

The Pharmacy Guild in the past months has been:

- Relentlessly lobbying MPs through meetings and direct mail and pushing their agenda at every opportunity

AMA Queensland understands that the Government plans to introduce legislation enabling this change in scope to the Queensland Parliament in February. We will continue to press our concerns to the Minister and your support be vital in reinforcing our message.

Your involvement

Colleagues, it is extremely important that we make our voice heard to counter the efforts of the Pharmacy Guild.

As President of AMA Queensland, I have met with the Health Minister and the Parliamentary Health Committee to make our case, but I need your help to complement the work we are doing as an Association and to persuasively put this issue forward to Government. Together we have a stronger voice.

You can help in a number of ways:

- **Speak with your colleagues and let them know what is being proposed and that AMA Queensland is fighting hard on this one and we need their support**
- **Write to your local MP today**
- **Meet with your local member and put our case forward**

We have developed a webpage to help you do this quickly and easily. The page is located at www.amaq.com.au/advocacy and includes resources such as:

88 L'Estrange Terrace, Kelvin Grove QLD 4059 • 07 3782 2222 • www.amaq.com.au



- Template letters for both GPs and Specialists to send to their local MP;
- Contact details for your local MP;
- Information how to arrange a meeting with your local MP and make the most of the meeting.

Please contact your local MP, using one of our form letters or your own words if you wish, to let them know why pharmacy prescribing is a dangerous proposal fraught with consequences for doctors, patients and the broader health system.

Should you require further information regarding the pharmacy council inquiry, please do not hesitate to contact the AMA Queensland Policy Team on (07) 3872 2222 or email policy@amaq.com.au.

2019 Budget Submission

AMA Queensland is putting the finishing touches on its Budget submission to the Queensland Government for 2019-20. We have a broad range of policy asks in this year's submission, but first and foremost is the wellbeing of our patients and our members. Keep an eye out for our submission sometime this month, and a further update on its initiatives will be provided to members at that time.

Palliative Care and Voluntary Euthanasia

The Queensland Parliament is holding an enquiry into Palliative Care and Euthanasia, with a report due by November 2019. AMA Queensland will almost certainly be asked to provide a submission, and it is important to us that this submission captures and respects the consensus views of our membership on this often emotive issue. As a first step, our own Ethics and Medico-legal committee, whose membership consists of members such as yourself, has discussed this issue at their early February meeting and will be providing the AMA Queensland council with advice on how to proceed.

We are always happy to hear from members as we approach the conclusion of the enquiry, and you can provide your feedback to us via policy@amaq.com.au

If you have any issues you feel need AMA Queensland's attention, please send us your thoughts directly via membership@amaq.com.au.

Dr Dilip Dhupelia, President AMA Queensland

Jane Schmitt, CEO AMA Queensland



88 L'Estrange Terrace, Kelvin Grove QLD 4059 • 07 3782 2222 • www.amaq.com.au

GP Liaison: Your Hospital Connection – February 2019



TIPS TO AVOID DELAYS IN THE REFERRAL PROCESS

The Queensland state-wide referral guidelines (CPC) are now in the third year of application for our district. Congratulations to the GP Community for managing to get through this phase and for saving Sunshine Coast HealthPathways as a website 'favourite'.

Changing to a new set of criteria and management for referral acceptance is challenging. We hope that the support we can provide has helped. Sessions can be arranged for education and assistance via the GPLO Unit or PHN.

The hospital specialists and specialty nurses work hard to ensure that referring GPs are advised of the reason for any returned referrals. They also appreciate GP efforts to meet criteria to ensure accurate triage as well as safe and thorough clinical handover in referral. They may request additional referral information.

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3 common incomplete sources of referral information:

1. Missing history details, e.g. evolution and duration of symptoms, functional disability.
2. Missing management to date, what has been tried already.
3. Missing additional referral information, e.g. Medical Imaging reports, Pathology Reports, Histopathology Reports, Pure Tone Audiogram Report etc.

To ensure your referral to the SCHHS can be processed without delays, here are some tips:

The [Sunshine Coast Health Pathways website](#) is the best place to start to find out the referral criteria, exclusions and required referral information for a specific condition or problem. The pathways have been developed by local GPs and hospital staff, and also offer management advice and resources.

Please mention in your referral what treatments you have tried, if applicable. We strongly recommend avoiding adding conclusions from investigation reports and instead including a copy of the complete, original reports.

You can request a *clinical override* if you believe tests or criteria are not applicable or appropriate in certain circumstances.

If you have feedback or suggestions for improvement of a particular HealthPathway, please use the 'Send Feedback' button in the top right-hand corner of the HealthPathways screen.

For questions about your referral or waitlists and outpatient appointments, please contact the Referral Centre GP Hotline on 07 5202 6633 (not for patients). For other questions, feel free to contact the GP Liaison Unit on 07 5202 3822.

Contact the GP Liaison Unit

Dr Michelle Johnston (GPLO)
Dr Edwin Kruys (GPLO)
 Merrin Godwin (Clinical Nurse)
 Sandi Kemp (Clinical Nurse)
 Peta-Maree Willett (Project Officer)
 Sue Hawkins (Admin Officer)
 Claire Juratowitch (Admin Officer)

Email SCHHS-GPLO@health.qld.gov.au
 Phone 07 5202 3822 / Mobile 0439 591 731
 Fax 07 5202 1044
 Sunshine Coast University Hospital
 6 Doherty Street Birtinya 4560
 PO Box 5340 Sunshine Coast MC 4560

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Testimonial from Cathy Roberts, Sunshine Coast Day Surgery

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Dr Marcel Knesl

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Dr Dinesh Vignarajah

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Dr Noovao can be accessed via a named GP referral to:

Dr Rachel Noovao

Nurture Paediatrics
E: reception@nurturepaediatrics.com.au
P: 07 5345 5733

Nucleus Medical Suites,
23 Elsa Wilson Drive, Buderim

Central Queensland, Wide Bay, Sunshine Coast PHN

‘Right Place Right Time Campaign’

Helping people access the right care

Central Queensland, Wide Bay, Sunshine Coast PHN is running a campaign over the Easter period, encouraging people to avoid the emergency department for non-urgent presentations.

More than 55,000 people present to Sunshine Coast hospitals in a single year who are categorised with a non-urgent condition, and more than half of them can be treated by a GP.

The Right Place Right Time campaign aims to educate people about what other services provide medical advice and treatment and what after-hours options are available for non-urgent care.

Seeking effective treatment can be as simple as finding the closest general practice that's open, getting advice over the phone or contacting the local after-hours home visit doctor service.

Buderim GP Dr Jon Harper said people were often unaware of their options when seeking medical attention, particularly if their child was sick or injured in a non-life threatening situation.

“With the Sunshine Coast attracting visitors from across Australia and the rest of the world during the Easter holidays, they also tend to stick to what they know when they're in an unfamiliar area and will seek treatment at a hospital.

“Practices should keep their holiday opening hours updated on Healthdirect to ensure that patients know your availability,” Dr Harper said.

“People seeking medical care for a minor injury or illness will find it is easier and usually a lot quicker to speak to a nurse on 13HEALTH (13 43 25 84) or see an after-hours doctor, instead of waiting for hours at busy hospitals.”

The Right Place Right Time campaign includes a website www.rightplacerrighttime.com.au, billboards on major roads, posters in GP clinics and Emergency Departments as well as advertising in local shopping centres.

For campaign resources, contact Central Queensland, Wide Bay, Sunshine Coast PHN by email communications@ourphn.org.au.



OPENING MARCH 2019



The New Home for Medical Specialists in Gympie

The Gympie Specialist Centre is committed to providing the highest quality specialist outpatient service in the region to ensure patients can be seen locally.

- The centre will operate between 8.00am-5.30pm, Mon-Fri
- Permanent suites and casual/sessional leasing options available
- Rates include receptionist, desk, individual storage drawers for each specialist, examination bed, NBN and wi-fi, medical supplies
- The Gympie Specialist Centre is a 9a certified medical building.



Fitout plans can be downloaded from our website.

CALL TODAY

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71 Channon Street, Gympie

www.gympiespecialists.com

Buderim Private Hospital**February 2019**

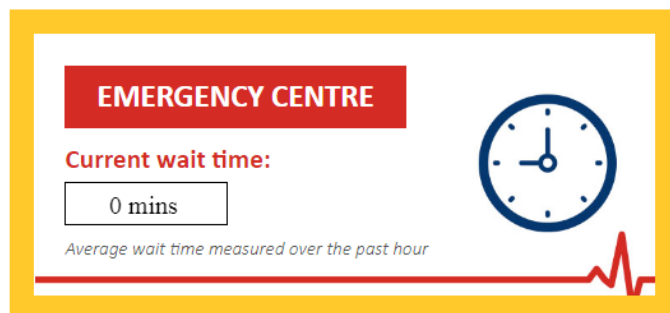
Dear SCLMA colleagues,

It gives me great pleasure for me to update you all on the latest news and developments taking place at the Buderim Private Hospital this month.

Emergency Centre real-time wait now online

We understand that in an emergency every minute matters which is why we recently launched real-time Emergency Centre waiting times on our website.

You and your patients can now visit our website 24/7 to understand how long the current wait is to be seen by one of our experienced Emergency Centre specialists.



At our Buderim Emergency Centre, we are committed to offering fast, quality care from the heart and aim to ensure that patients' emergency room wait time is at an absolute minimum.

Visit www.buderimprivatehospital.com.au/emergency to learn more about the service and see the current wait time.

New 2019 Specialist Guides

Our 2019 Specialist Guides have recently been released and will soon be distributed to every GP practice across the Sunshine Coast.

Please let us know if you didn't receive a copy or require additional copies - simply contact Colleen McMillan on 07 5452 0675 or email colleen.mcmillan@uhealth.com.au and we will organise for it to be sent directly to you. Alternatively, please visit www.buderimprivatehospital.com.au/doctorsearch to download and print the directories yourself.

GP Education and CPR Workshops

We are looking forward to welcoming many of you at our upcoming 2019 Women's Health CPD Conference on Saturday 2 March. Registrations for this event have now closed however we are accepting bookings for:

- Bariatric Surgery GP Education Day – Saturday 30 March

Visit www.buderimprivatehospital.com.au/gpeducation for the program details and to register.

- CPR Workshops for GPs and Practice Staff

Visit www.buderimprivatehospital.com.au/CPRWorkshops for the workshop dates and to register.

Until next month,

Wallis Westbrook, General Manager

E: wallis.westbrook@uhealth.com.au P: 07 5430 3260

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DR JON MITCHELL EXPANDING HIS PRIVATE SERVICES AT COASTAL DIGESTIVE HEALTH TO INCLUDE INTERVENTIONAL SCOPES AND ERCPS.

At Coastal Digestive Health we are delighted to inform you that Dr Jon Mitchell is now expanding his private consulting service to include endoscopies, in addition to his well-established private hepatology service.

Jon has been the lead hepatologist at the Sunshine Coast University Hospital for 6 years and has been instrumental in establishing one of Australia's foremost liver services outside of the capital cities, here on the Sunshine Coast.

He is a fully trained therapeutic endoscopist with almost 20 years of experience in advanced therapeutic upper and lower endoscopy and was fortunate to be trained in endoscopy by one of the world pioneers of colonoscopy, Dr Robin Teague, in the UK. He also performs ERCPs, performing over 100 procedures per year.

Jon prides himself in the "right test, right time" philosophy and places high value on maintaining quality standards in all forms of GI endoscopy and strongly believes that "not all endoscopy is equal!"

Areas of interest include:

- All aspects of Advanced Liver Disease
- Portal hypertension
- Interventional endoscopies
- ERCPs

Jon looks forward to working together with you to help patients regain control of their health. Patient referrals can be made via fax on **5408 0901** or via Medical Objects.

EDEN PRIVATE HOSPITAL UPDATE – February 2019



Dear SCLMA colleagues

I look forward to providing you with updates each month on new initiatives and developments occurring at Eden Private Hospital.

Throughout 2019, Eden is celebrating its 110-year anniversary; it is Sunshine Coast's first private hospital. Eden provides to Sunshine Coast and Gympie communities experience and quality personalized care. I am pleased to advise the hospital's name has changed from Eden Rehab to Eden Private Hospital to represent the range of clinical services Eden provides.

While rehabilitation inpatient and day patient services remain core to Eden's service delivery, it is also well equipped to provide sub acute medical and palliative care admissions due to its 24 hour medical cover provided by Senior Medical Officer, Rehab Registrar and a number of admitting GPs.

To support Eden's ***Let us help you*** approach an **1800 333674 (EDENPH)** now exists for all admission enquiries and referrals (both day patient and inpatient).

PD Warrior & LSVT for individuals living with Parkinson's disease

To support Eden's extensive range of rehab day programs, Eden is very pleased this month to announce its license to offer PD Warrior and LSVT - Voice out Loud sessions for individuals living with Parkinson's disease.

This means Sunshine Coast and Gympie now have access to an internationally recognized program, which aims to improve and maintain activity, participation and function. PD Warrior is an exercise philosophy that aims to slow Parkinson's disease down; research findings demonstrate the right kind of exercise program can actually slow down the course of the disease. Internationally, PD Warrior has trained over 2,000 health professionals. Eden is very pleased to be a part of this.

Eden's allied health team delivering PD Warrior and LSVT include physiotherapy, speech therapy, exercise physiology, occupational therapy and psychology. The integrated team approach delivering PD Warrior aims to better meet the needs of individuals living with Parkinson's on the Sunshine Coast and Gympie.

Eden recently hosted the launch of PD Warrior and was overwhelmed with the number of individuals living with Parkinson's, carers and representatives of Parkinson's support groups who attended.

Palliative care

To support palliative patients Eden has welcomed Palliative Care Consultant, Dr Arron Veltre who is now available for outpatient appointments at his new clinic located at Eden Consulting suites. Arron is currently meeting with local specialists and GPs. If you would like to know more please don't hesitate to contact 1800 EDENPH. Eden supports Dr Veltre's palliative patients needing symptom control, review of pain management, supported complex discharge planning or end of life care.

Jo Munday, Chief Executive Officer

E: Jo.munday@healthcare.com.au P: 07 5472 6472 Mb: 0407 388 760



Sunshine Coast Cardiology is the private specialist cardiology practice of Dr Steven Kypraios - a leading local expert in interventional cardiology, specialising in cardiac chest pain diagnosis management, stress testing, pacemakers, diagnostic cardiac imaging and heart disease prevention and management.

Dr Kypraios offers a comprehensive range of cardiac services, including consultations in the rooms, inpatient care at Buderim Private Hospital, elective and emergency

coronary stenting, pacemaker and loop recorder implantation and follow up, echocardiography and dobutamine and exercise stress echo.

Our clinic is located on the campus of Buderim Private Hospital and adjacent to the newly opened \$4 million Emergency Centre.

Feel free to call Dr Kypraios to discuss any cardiac related issue on the Referring Doctor Hotline on 07 5444 0085 or on his mobile - available to referring doctors on request.

Sunshine Coast Cardiology is one of the coast's most comprehensive providers of specialist cardiology services.



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Media Release



People caring for people

DATE: Thursday, 21 February 2019

REGARDING: **Sunshine Coast University Private Hospital invests in neurosurgery technology**

Ramsay Health Care Limited
ABN 57 001 288 768
Level 9, 154 Pacific Highway
St Leonards NSW 2065 Australia
Telephone: +61 2 9433 3444
Facsimile: +61 2 9433 3460
Email: enquiry@ramsayhealth.com.au

Sunshine Coast University Private Hospital invests in neurosurgery technology

The full range of neuro-oncology procedures can now be performed at the Sunshine Coast University Private Hospital, thanks to the installation of the latest Medtronic O-arm and StealthStation S8 technology.

Sunshine Coast University Private Hospital CEO, Oliver Steele, said the hospital had recently invested more than \$1million in the latest-generation, specialised technology to enable a wider spectrum of brain surgery and minimally-invasive spine surgery procedures at the hospital.

"The two pieces of technology can now be used together for safer and more accurate procedures," Mr Steele said.

The O-arm machine is used to take a scan of the patient during particular spine, cranial, orthopedic and, ear, nose and throat surgeries. This scan provides a 'map' of the patient's anatomy which is then transferred to the StealthStation navigation system. The navigation system is then used as a guide for the surgeon by showing the location and direction of the instruments they are using on a 3D scan.

Dr Stephen Byrne, neurosurgeon at the Sunshine Coast University Private Hospital, said the new equipment has allowed doctors at the hospital to perform the region's first craniotomy.

"In addition to that exciting milestone, we have also performed many brain tumour operations for primary and metastatic brain tumours, as well as pituitary tumours in conjunction with our ENT colleagues," Dr Byrne said.

"We can also perform complex, minimally-invasive spine procedures for patients with severe degenerative spinal deformity, traumatic and neoplastic lesions," he said.

"This surgery is now safer and can be done through much smaller incisions with a shorter recovery time."

The combination of the O-arm and StealthStation S8 technology provides patients with better access to the latest services and treatments.

"Brain tumour surgery is a stressful time for patients and their families and the community benefits by keeping families together on the Coast whilst recovering from surgery," Dr Byrne said.



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New Technology at Sunshine Coast University Private Hospital

The installation of the latest-generation O-arm and StealthStation S8 navigation technology at **Sunshine Coast University Private Hospital** will allow a wider range of surgical procedures to be conducted at the hospital with greater accuracy and safety.

Call 07 5390 6000 or visit
sunshinecoastuniversityprivate.com.au



Sunshine Coast University Private Hospital

Part of Ramsay Health Care



Sunshine Coast Orthopaedic Clinic

The Acute Knee Clinic

The first few days can make all the difference in recovery from a sporting injury.

Dr Steve Lawrie at the Sunshine Coast Orthopaedic Clinic provides an Acute Knee Clinic each Monday and Tuesday which is specifically designed for, but not limited to, sports injuries of the knee with a view to rapid assessment, investigation and adoption of a management plan within the first few days of the initial injury.

The Acute Knee Clinic has now been running for twelve years. We have treated many professional and semi-professional athletes as well as the "weekend warriors", including a special interest in paediatric sporting injuries. Dr Lawrie has a close association with many sporting teams on the Sunshine Coast, including the Sunshine Coast Falcons, Melbourne Storm and many other local clubs.

Specific conditions that can benefit from emergent assessment include suspected ligamentous injuries, including cruciate ligaments, medial ligaments, multiple ligament injuries, acute patellar dislocation, locked knees and especially paediatric cruciate and meniscal injuries whether that be by implementing early surgical techniques

or an appropriate non-operative treatment programme.

To access the Acute Knee Clinic, a patient needs to have a current referral to Dr Steven Lawrie and plain x-rays of the knee should also be arranged before the initial consultation.

A plain x-ray is very important in the initial assessment to exclude fractures, loose bodies, and to show the alignment of the knee joint and the patellofemoral joint, which cannot be seen on other investigations, such as an MRI scan.

Splints and orthotics can be organized directly with Leonie Walton on 5473 5858. Leonie attends our clinic on a Thursday afternoon, but she is available throughout the week as needed.

The Acute Knee Clinic is intended to complement Dr Lawrie's other interests, including hip and knee replacement, revision arthroplasty, computer assisted joint replacement, cartilage surgery, as well as hip, knee and ankle arthroscopy.

Dr Lawrie is happy to take phone calls for advice, queries etc as this often helps the referral process.

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
www.sunshineortho.com.au

Examples of these injuries include:

A medial ligament injury is usually easily treated in a range of motion brace, using an MCL protocol if applied with the 1st week or so. But it can be extremely difficult to correct if there is a delay of a number of weeks.

Paediatric meniscal tears may be repairable early after an injury, but a delay typically means meniscal resection becomes necessary.

Acute patellar dislocation may respond to surgical repair if surgery is offered in the first 2 weeks after the injury.

Traumatic meniscal tears where early repair rather than delayed resection can make a dramatic difference in outcomes

Early ACL surgery in the young active patient/sportsman.

Australian Medical Association Limited**ABN 37 008 426 793**

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 Telephone: (02) 6270 5400 Facsimile (02) 6270 5499
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PARLIAMENTARY COMMITTEE RECOMMENDATION ON MANDATORY REPORTING NOT IDEAL, BUT AN IMPROVEMENT

The AMA is disappointed with the majority recommendation of a State Parliamentary Committee to pass without any further changes proposed mandatory reporting laws for doctors treating other medical professionals for mental health issues.

“While the Committee believes that the changes go in the right direction, it is frustrating that lawmakers continue to ignore the overwhelming advice of doctors and medical bodies about this issue,” AMA President, Dr Tony Bartone, said today.

“We have already lost too many talented, brilliant, and dedicated colleagues who felt they could not seek help because they would be reported.”

The Queensland Parliament Health, Communities, Disability Services, and Domestic and Family Violence Prevention Committee this week recommended passing the *Health Practitioner Regulation National Law and Other Legislation Amendment Bill 2018*.

The Committee has found that the Bill will effectively soften laws introduced in 2010, which had been interpreted as effectively barring doctors from accessing the same level of health services their patients enjoyed, for fear of potential repercussions.

But the Committee rejected calls to amend the laws to mirror the proven Western Australian model, which exempts treating doctors from reporting their doctor patients.

Under Council of Australian Governments (COAG) arrangements, once passed, the Queensland law will apply in all States and Territories except Western Australia, where doctors will remain exempted from mandatory reporting provisions.

“The Committee has sought to reassure stakeholders that the proposed law before the Queensland Parliament is an improvement on the status quo, and we hope that the law will be applied according to the findings and spirit of the Committee’s report, making it easier for doctors to seek the help they need,” Dr Bartone said.

“The AMA has gone to great lengths – appearing at consultations, writing submissions, talking to governments – over many years to highlight how this policy works, and why it needs to change.

“We had recommended the WA model because we know it has worked, and will continue to work, and because introducing it in the other jurisdictions would have brought much needed national consistency.

“In 2014, 74 per cent of respondents to the Independent Review of the National Registration and Accreditation Scheme called for a national exemption for treating doctors^[1]. That review recommended national adoption of the Western Australian law.

^[1] [2014 Independent Review of the National Registration and Accreditation Scheme for health professions](#) p36



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A/Prof Troy Gianduzzo is a Surgeon of Excellence in Robotic Surgery TM designee which he received with the Wesley Hospital's designation as a Centre of Excellence in Robotic Surgery TM. 'COERS' and 'Centre of Excellence in Robotic Surgery' terms and seals are trademarks of Surgical Review Corporation. All rights reserved.



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- ◆ Medicines information view
- ◆ Pathology reports and diagnostic imaging reports
- ◆ Specialist letters
- ◆ Advance care planning documents and custodian information
- ◆ MBS and PBS history
- ◆ Immunisation records

Safer care

Having this information available can lead to:

- ◆ Improved clinical decisions
- ◆ Fewer adverse events for your patients
- ◆ Less avoidable hospital admissions
- ◆ Better health outcomes

Furthermore, if you have conformant software, you will also be able to upload your patients information which can then be viewed by other healthcare providers involved in their care in hospitals, GP practices and other primary healthcare services in the community.

Access training and resources

Visit [MyHealthRecord.gov.au](https://myhealthrecord.gov.au) for a range of resources to help you to become familiar with and confident in using the My Health Record system, and support and inform those under your care.

Support

For further support contact the My Health Record Help line on 1800 723 471 (select option 2 for healthcare providers) or your Primary Health Network (PHN).

Examples of how you can use the My Health Record system

- When seeing a patient for the first time, you can view their health information in their shared health summary, such as any chronic conditions they may have, current medicines they may be taking, and allergies and adverse drug reactions.
- When consulting with a patient, you can communicate information about your treatment, findings and recommendations with the referring GP via a specialist letter or an event summary. This provides greater assurance that your information is shared to other healthcare providers involved in the patient's care.
- When prescribing medicine to a patient, you can upload a prescription record so that the patient and the pharmacist can easily view details of the prescribed medicine.

Access the My Health Record system

There are two ways through which authorised healthcare providers can access individuals' records in the My Health Record system:

Conformant software

Accessing the My Health Record system through conformant clinical software enables healthcare providers to upload, view and download information from an individual's My Health Record.

A full list of My Health Record conformant software types can be found at [MyHealthRecord.gov.au](https://myhealthrecord.gov.au)

National Provider Portal

If a healthcare provider does not have access to conformant software, they can view an individual's My Health Record through the National Provider Portal at <https://portal.ehealth.gov.au>. The healthcare provider will be able to view and download information from the individual's My Health Record, but will not be able to upload any clinical information.

Register for the My Health Record system

Visit [MyHealthRecord.gov.au](https://myhealthrecord.gov.au) for a registration overview and step-by-step instructions on how to register, or call the Help Line on 1800 723 471 (select option 2 for healthcare providers).

For more information go to:

MyHealthRecord.gov.au | Help line 1800 723 471

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Our exciting move into a significantly expanded clinic in the heart of Nambour is another evolution in our mission to provide the highest quality radiology services and is underpinned by our commitment to the local community. Our new clinic offers a patient-centric approach to imaging services, state of the art facilities, a larger professional healthcare team on-site and an expanded range of services including MRI and Echocardiography. In addition, CT, X-ray and Ultrasound services have been increased. It is located on Ann St with entry just before the Memorial bridge.

There are also many other benefits including reduced wait times, ample parking, comprehensive services and closer links with Specialists in the local area. Our former Nambour practice on Howard Street, which has seen thousands of patients walk through the doors since it opened in 2009, is now closed and all patients are seen at the new clinic.

Our services:

- | | | |
|-----------------------------|-----------------------------|---|
| • MRI | • Echocardiography | • CT Guided Nerve Root Block |
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| • CT Scan | • OPG | • CT Guided Epidural Injection |
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Nambour Central, entry via Ann St, before the Memorial bridge

Hot Election Topic explained - Franking Credits Proposal



What is the proposal?

The House of Representatives Standing Committee on economics has announced an inquiry in the implications of removing refundable franking credits. The inquiry is going to report on the use of franking credits and who franking credits support and who would be impacted if they were removed and what implications it would cause.

It's fairly obvious who it is going to affect, mainly retirees and SMSFs who are direct shareholders who have made long term retirement investment decisions based on their ability to claim refunds on their franking credits. Sadly, it may affect retirees who are paying high levels of Daily Care Fees and other Aged Care costs.

ALP leader Bill Shorten made amendments to the original proposal to scrap funding credit surplus cash rebates, exempting all those who receive a pension or part pension. The Future Fund is also exempt.

The ALP proposal would largely affect SMSFs who do not receive a part pension and that are below \$1.6m who are investors who pay little or no tax.

Industry Super funds are less impacted as they typically have tax liabilities against which to offset franking credits.

This is a proposal by the ALP. To become law, it will require:

- ALP to win the next election: and
- Bipartisan agreement or favourable Senate outcome needed to pass legislation – cross bench Senate support to pass through the Upper House;
- Chris Bowen (Shadow Treasurer) has indicated the policy will apply from **1 July 2019**.

The ALP franking credit proposal seeks to abolish the “net refunding of franking credits” but franking credits themselves are not removed. Australian investors can still use franking credits to offset income tax payable, but will not be able to receive a net refund of franking credits.

To see how you may or may not be affected please refer to the following table:

Invested as:	Below Part Pension Threshold on Asset Limits Test (eligible part pension)	Between Pension Threshold* to total \$1.6m (No pension)	Over \$1.6m investments (No pension)
SMSF - all pension	No refund	No refund	Offset against tax
Super fund - paying tax	Full refund	Full refund	Full refund for the first \$1.6mn / further amount offset against tax
Super fund - receiving partial franking refund	Partial Refund	Partial refund	Partial refund/ Offset against tax
Individual	Full refund	Offset against tax	Offset against tax

(This not to be taken as advice is it based on an interpretation of ALP proposals, which can change any time!)

If you would like to discuss further please give me a call on 07 54379900.

Article written by Kirk Jarrott – Partner Poole & Partners Investment Services Pty Ltd.



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0429 930 449 or llitewka@usc.edu.au

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Dr Olivia Bigault
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Dr James MacKean
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GP Education

GP Updates

in Urology and PAD

Sunshine Coast University Private Hospital is very pleased to invite you to an education evening featuring Urologist **Dr Stuart Collins** and Vascular Surgeon **Dr Pankaj Jha**. Please join us for a night of interactive discussion.



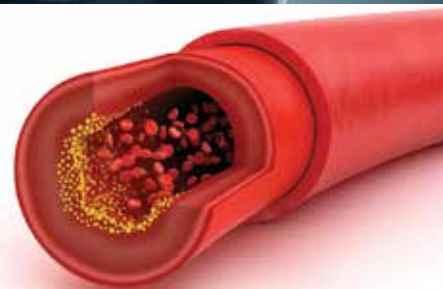
LEARNING OUTCOMES

Attendees will be able to:

- Implement a care plan for the age appropriate management of lower urinary dysfunction
- Explain the pathophysiology of stone formation
- Describe the role of antiplatelet and anticoagulation medication in PAD
- Identify peripheral arterial lesion levels and need for intervention

PROGRAM

- 6.00pm Registration and dinner
- 6.30pm Presentations and rotating discussion groups
- Short topics urology - renal stones and lower urinary tract dysfunction** Dr Stuart Collins, *Urologist*
- Recent advances in management of peripheral arterial disease** Dr Pankaj Jha, *Vascular Surgeon*
- 8.30pm Evaluation and close



WHEN

Wednesday, 27 February 2019

WHERE

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Birtinya QLD 4575

REGISTER BY

Thursday, 21 February 2019

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Email GPEducation.SC@Ramsayhealth.com.au

Call Pam Bull for any enquiries on 0427 327 321

Email if you wish to be removed from our mailing list



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CORONARY ARTERY CALCIUM SCORE

A Coronary Artery Calcium Score (termed CACS or CCS) is a non-invasive scan used to provide an accurate prognostic estimate of an individual's cardiovascular disease (CVD) risk. The scan is performed on a normal CT scanner and takes less than 5 minutes to do. The radiation dose is small, equivalent to around 1 mammogram.

Coronary artery calcium is laid down early in the atherosclerotic process and is not normal. The amount of CAC is a surrogate measure of total atherosclerotic plaque burden. It is not specific for coronary artery obstruction but does tell us the level of CVD risk and appears to be

superior to standard CVD risk scoring. We now have long term follow up data using these scores and a Cardiac Society of Australia and New Zealand (CSANZ) position statement to guide us how to use them (www.csanz.edu.au/resources).

CACS is of most value in intermediate risk patients (absolute 10-year cardiovascular risk of 10-20%) who are asymptomatic, do not have known coronary artery disease and aged 45 – 75 years. Large studies suggest it is able to reclassify ~50% of patients into lower or higher risk groups. It may also be considered for lower risk patients (absolute 10-year cardiovascular risk 6-10%) particularly in those where

traditionally risk scores under estimate risk e.g. in context of family history of premature CVD and possibly in patients with diabetes aged 40 to 60 years old. It is not appropriate in those at very low risk, at high risk, who are symptomatic or have known coronary disease.

If your CACS = 0 your risk of CVD death in the next 10 years is <1%. If your CACS >400 your risk of CVD death in the next 10 years is >20%.

Individuals with a CAC >400 should be considered for functional stress testing such as a stress echo or stress test to exclude obstructive coronary disease.

PHONE: 5414 1100 FAX: 5414 1101 admin@scheart.com.au www.scheart.com.au

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Sunshine Coast University Private
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Birtinya QLD 4575

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- Haematology / Oncology
- Hepatology
- Intensive Care
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Medical Motoring

"I need a boost!"



Medical students are taught to take a good history before laying a hand on a patient.

We're told that if you listen to your patient, they will tell you the diagnosis

For example, chest pain on exertion is likely to have a very different cause to chest pain after over-indulging at meal times.

With so much technology and so many special investigations available it is still vital to listen to our patients before ordering a battery of tests.

The best mechanics adopt the same approach.

A squeaking sound from the front end when turning right should tell you to check the left front wheel bearing and vice versa.

But just like in medicine mechanics are more reliant than ever on scanning devices to diagnose cars that have become impossibly complex.

So the first symptom of my car's malaise was a hissing sound from the motor when going up a steep hill.

There were no more noises until 500 kilometres later when on the same steep hill my car lost power, the check engine light illuminated, and it went into "limp-home mode".

Whilst my car still technically "went" it had no power, stayed in lower gears for longer and was locked out of its 6th and 7th speeds.

In the examination room (my garage) it dis-robed and a visual inspection and palpation provided no further clues.

So the next step was to connect an OBD scanning tool to see whether there were any fault codes in the ECU (Engine Control Unit).

My dealer charges \$220 to hook up their factory tool, but I have an assortment of OBD scanners that I have purchased from eBay and Aldi over the years.

The cheapest of these cost me only \$4 from eBay including postage.

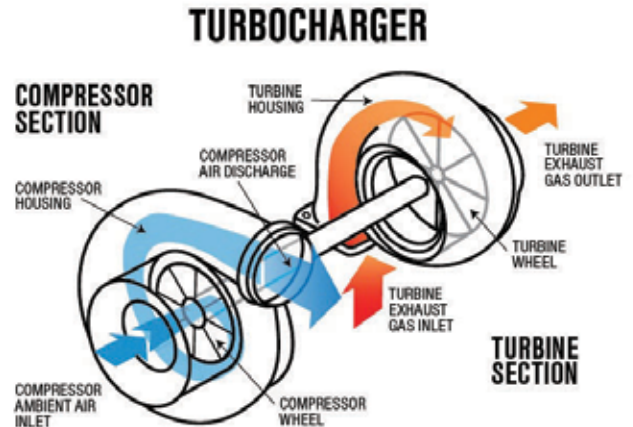
It's a useful tool that connects to a free App on my Smartphone via Bluetooth.

All of my scanners detected two codes on my car:

P227962 - A leak was detected in the intake air system. The Signal Comparison Is Faulty – Current, Stored.

P246309 - The soot content of the diesel particulate filter is not OK. There is a component fault – Current, Pending.

At this point I consulted with a Pulmonology colleague who just happens to own an identical car with the same symptoms, and the same fault codes.



He generously forwarded to me his repair bill from the dealer which did remind me that my \$4 OBD scanner was worth investing in.

His leak in the intake air system turned out to be due to a split rubber hose between the turbo-charger and the inter-cooler.

For those of us without mechanical knowledge I would suggest reading no further.

But I was intent on fixing my low-mileage car from Sindelfingen, or else.

I scoured my car for a leaking hose before calling in another colleague for assistance.

That colleague could hear the faintest hissing sound as I drove my car onto his hoist.

A turbo-charger boosts at 6 to 8 psi which is equivalent to the pressure caused by the weight of a column of water about 5 metres high.

It was the sound of that pressure squeezing air through a tiny hole that we could both hear.

And that was the sound that started off the whole problem in the first place.

I was more confident than ever that I would be able to fix my car.

My colleague was also the owner of a smoke machine which would be needed to find the leak.

To be continued

Safe Motoring

Doctor Clive Fraser



ANTARCTICA

Antarctica, the seventh continent is an astonishingly charming destination blessed with beautiful seascapes and landscapes. It is a wonderful dream for each adventure enthusiast to immerse in the extensive wilderness and spectacular wonders of this icy tourist spot. The awe-inspiring landscapes of snow and ice certainly give you some unforgettable holiday experience to remember.

A supreme travel destination for adventure fanatics



Travelling to Antarctica is expensive, but it is also one of the spectacular continents in the world. A trip to this majestic destination is truly exhilarating and its memories will cherish in your mind for long. Even when it is a distant and inhospitable place, it still offers several opportunities for the intrepid travellers to witness the beauty of this beautiful destination. Explore the marvelous landscapes of Antarctic Peninsula and watch its rich summer wildlife of whales, seals and penguins. Interaction with penguins can be the best thing that you can do during your trip to this majestic continent.

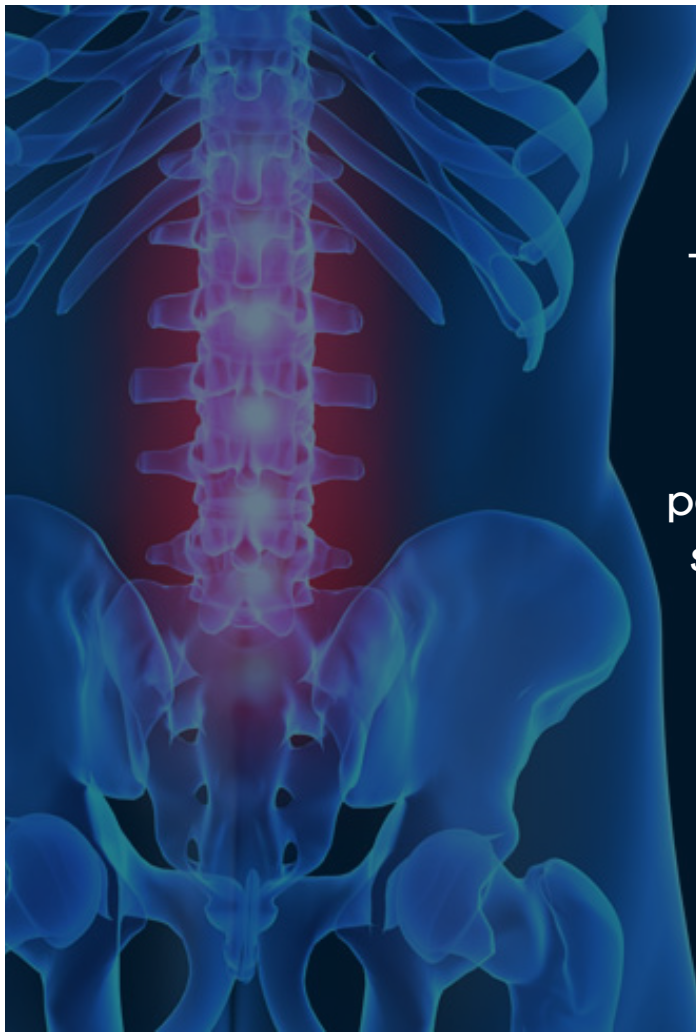
What we have planned for you?

A detailed itinerary has been designed that includes all the charming attractions in Antarctica and plenty of exciting activities.

- *Reach the Antarctica Peninsula after crossing the Drake Passage.*
- *Spend a few hours among a penguin colony.*
- *Treat yourself with iceberg formations and wildlife displays.*
- *Take exciting zodiac trips and shore landing in order to get close to natural environment.*
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Tim graduated from the University of Edinburgh and completed advanced training in urology at teaching hospitals in London and Queensland. He has trained extensively in da Vinci Robotic Surgery at the University Hospital, Leipzig, and the Wesley Hospital.

Tim successfully introduced da Vinci Robotic Surgery to Buderim Private Hospital. He has been practising on the Sunshine Coast since 2006.

DR TIM NATHAN

MB ChB (Edin), FRCS (Eng), FRCS (Urol), FRACS (Urol)

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We are currently recruiting study participants who:

- Are 18 to 85 years old
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- Have a history of, or are at high risk for, cardiovascular disease

Contact the USC Clinical Trials Centre

usc.edu.au/trials

Tel: 5456 3797

Buderim Private Medical Imaging Welcomes Dr Andrew Baird

BSC MBBS (HONS) FRANZCR



Originally from Brisbane, Dr Andrew Baird obtained a Bachelor of Science degree from the University of Queensland and then graduated from the Australia National University Medical School with honours in 2007. He completed his radiology training at Princess Alexandra Hospital in Brisbane with advanced training in cross sectional MRI in 2015.

Following acceptance into the RANZCR he undertook a diagnostic neuroradiology fellowship in Perth at the Neurological Imaging and Intervention Service of WA (NIISWA), which was followed by an AMSIG accredited musculoskeletal fellowship in Albury at Regional Imaging under the guidance of Dr Andrew van der Vliet.

Since then he has worked as a consultant Radiologist in Albury for Regional Imaging gaining further experience in Prostate MRI and is accredited to report CTCA as a Level A Specialist. From an interventional point of view he is capable for performing both peripheral musculoskeletal and spinal injections, deep organ biopsies and drainages, long term central venous access, IVC filter insertion and nephrostomies including antegrade ureteric stent insertion.

He and his young family have relocated back to the Sunshine Coast to be closer to family and joins UCMi fulltime predominantly based at Buderim. Dr Baird will assume the role of Clinic Director for Buderim Private Medical Imaging and will also be chairing our regular MDT meetings.

Our Services

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**SUNSHINE COAST LOCAL MEDICAL ASSOCIATION Inc.
MANAGEMENT COMMITTEE MEETING
THURSDAY 25 OCTOBER 2018
Maroochydore Surf Club Board Room
MINUTES**

Accepted at Committee Meeting 29 November 2018

Acting President Dr Mason Stevenson took the Chair.

Attendance: Drs Mason Stevenson, Wayne Herdy, Mark de Wet, Peter Ruscoe, Kirsten Hoyle, John Evans, Jonathan Last, Grant Eddie, Fabio Brecciaroli, Tau Boga. Observer Jo Bourke.

Apologies: Drs Roger Faint, Jon Harper, Alicia Lorenz, Scott Masters.

Minutes of last meeting: 20 September 2018

Moved: Mason Stevenson. Seconded: Mark de Wet. Accepted.

Business arising from Minutes: Nil.

President's Report: Dr Roger Faint – Apology.

Report was tabled and discussed.

Hi Team, I am in Darwin at the annual ACRRM conference.

1. Dr Dilip Dhupelia is coming for the November meeting. This will be his opportunity for a greet and meet since being voted as AMAQ president. This will be our opportunity to illustrate to the AMA Qld the strong depth of feeling the SCLMA members have towards QH hospital access to Medicare for outpatients and also QH hospitals accessing private health funds for admissions. The committee may recall that there are moves by the Federal Health Department to curtail state health department access to Medicare. Dr Jon Harper explained the changing details of Medicare access during the September meeting. The AMAQ should be all over this, I would hope.

2. The meeting with Dr Dhupelia, I suggest, should be initially with the committee at 6 pm, followed by a 20 min presentation to our members. I encourage you all to spread the word to encourage attendance and interest. He has asked for pre-prepared questions or concerns prior to the meeting if able.

3. As we have invited Dr Dhupelia to our November clinical meeting, I suggest we fund half the night's cost. Dr Georgius is presenting and obviously we cannot expect his sponsors to fund the whole night. The committee will need to make a decision, perhaps vote on this issue, as it will be a new paradigm.

Motion: Mason Stevenson moved, seconded Peter Ruscoe 'that the SCLMA pay half the cost of the November 29 meeting. Unanimous agreement.

4. Unfortunately Dr John Wakefield, QH, is unable to make the meeting for unknown reasons. I don't believe this will be a major issue, as Dilip will be able to take our issues to QH personally.

5. There is a meeting with Naomi Dwyer on Tuesday 30 October 2018. I suggest that the current issues as above and any additional issues raised tonight will be presented to her. A 'show of force' would be useful and I encourage as many committee members to attend as possible.

Roger Faint, Peter Ruscoe, Jon Harper and Jo Bourke will attend.

6. The new medical school Management has agreed to attend one of our clinical meetings next year. I suggest we lock in a date for 2019. I suggest we discuss the idea of a SCLMA student bursary at some point in the future. e.g. local student, 'best all rounder' or the 'highest achiever'

- This suggestion to be progressed at future meetings. Suggestions included transferring the current USC Bursary amount to the Griffiths medical school, or a new Bursary to be set up.

7. If anyone is aware or knows some one who has concerns regarding nursing homes, then please ask them to contact the SCLMA. There is opportunity for a submission and to take concerns to Dilip. I suggest we advertise for concerns on our Facebook page and website— thanks Jo.

- Comments from Fabio and Mason : finding a nurse to help doctor can be difficult; medication chart information is a problem; having to be present to sign and other rules which are inefficient make working in nursing homes difficult; inconsistencies with Carers i.e. different Carers who are not familiar with the patient.

8. Current medico-political issues include the biased pharmacy review, the passage of the QLD abortion bill and QLD mandatory reporting laws.

- Pharmacies to push through pharmacy re-prescribing of GP scripts
- Qld abortion bill : expectation that public hospitals will provide an abortion service; QH keen to have GPs provide abortion before 9 weeks (chemical abortion)
- Qld Mandatory reporting laws : slow to turn this around.

Vice President's Report : Dr Wayne Herdy

- Wayne reported that four of his patients have been rejected by SCUH over the past month. There was discussion around low tolerance for abuse at hospitals (Mason).

Secretary's Report: Dr Mark de Wet

Correspondence In:

- Dr Dilip Duphelia – re Nov 29 meeting – Dr John Wakefield's inability to attend.
- Adj. Prof Naomi Dwyer – Copy correspondence with Dr Greg Beak
- Jon Harper – forwarding complaint from Dr John Manton – re no new referrals for ophthalmology services on the Sunshine Coast.

Correspondence Out: Nil.

Business arising from Correspondence:

- The ophthalmology services that will be curtailed are: Macular degeneration; Corneal conditions and Vitreo-retinal conditions. These will be referred to RBH.

Treasurer's Report : Dr Peter Ruscoe

(a) Accounts to be paid:

**SUNSHINE COAST LOCAL MEDICAL ASSOCIATION Inc.
MANAGEMENT COMMITTEE MEETING
THURSDAY 25 OCTOBER 2018
MINUTES**

Accepted at Committee Meeting 29 November 2018

- Australia Post – Account Sept 2018
- Telstra – (part account Sep-Oct 2018)
- Office Fair Trading – Annual Return
- Office National – Account Sept 2018
- Jo Bourke – Secretariat Sept 2018
- Jo Bourke – Adobe C/C Sub – Aug-Sept 2018
- Snap Printing - Newsletter October 2018
- Snap Printing – Lapsed Members Renewals
- Jo Bourke – Newsletter Oct 2018
- C Bourke – Website Uploads & Maintenance

Moved: Peter Ruscoe 'that the accounts as tabled be approved for payment'. Seconded: John Evans. Carried.

(b) Membership Report:

- Dr Trent Lincoln (Oral & Maxillofacial Surgery)

Moved: Peter Ruscoe 'that the application for membership be accepted'. Seconded: Fabio Brecciaroli. Accepted.

Meetings Convenor Report: Dr Scott Masters – Apology.

- Need to re-vamp meetings.

- Scott wants more interaction, case studies, much less power point presentations.
- Discussion re CPD points – not worthwhile.

Hospital Liaison Report: Not available.

PHN Report: Dr Jon Harper – Apology.

General Business:

- General discussion on ieMR (new computer paperless system)
- Comments - Difficult and complex to use; multiple drop-down menus.

Meeting Close 7.00 pm

Next meeting Thursday 29 November 2018 Mmore Surf Club

- Dr Peter Georgius – 'Neuroscience of Pain'
- Dr Susan Ballantyne – 'Medicinal Cannabis – yesterday, today & tomorrow'
- Dr Dilip Duplehla – AMAQ President.

Dr Mark de Wet, Honorary Secretary

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

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.



Take a moment

The Selfless Irish

The Irish never hesitate to come to the aid of their fellow man... air passengers, in this case!

Shortly after take-off on an outbound, evening Air Lingus flight from Dublin to Boston,

the lead flight attendant nervously made the following painful announcement in her lovely Irish brogue:

"Ladies and gentlemen, I'm so very sorry, but it appears that there has been a terrible mix-up by our catering service.

I don't know how this has happened, but we have 103 passengers on board, and unfortunately, we received only 40 dinner meals.

I truly apologise for this mistake and inconvenience."

When the muttering of the passengers had died down, she continued,

"Anyone who is kind enough to give up their meal so that someone else can eat, will receive free and unlimited drinks for the duration of our 10 hour flight."

Her next announcement came about 2 hours later:

"If anyone is hungry, we still have 40 dinners available."

Points to Ponder

- What if my dog only brings back my ball because he thinks I like throwing it?
- If poison expires is it more poisonous or is it no longer poisonous?
- Which letter is silent in the word "Scent," the S or the C?
- Why is the letter W, in English, called double U? Shouldn't it be called double V?
- Maybe oxygen is slowly killing you and it just takes 75-100 years to fully work.
- Every time you clean something, you just make something else dirty.
- Intentionally losing a game of rock, paper, and scissors is just as hard as trying to win.
- 100 years ago everyone owned a horse and only the rich had cars. Today everyone has cars and only the rich own horses.
- The doctors that told Stephen Hawking he had two years to live in 1953 are probably dead.

Password

A friend was doing an overnight stay at a hotel away from home. So he took his computer down to the bar to do some data entries. He sat down at the bar and asked the bartender 'What's the wifi password?'

Bartender: You need to buy a drink first.

Friend: Okay, I'll have a beer.

Bartender: We have VB on tap.

My Friend: Sure. How much is that?

Bartender: £3.00.

My Friend: Ok. Here you are. What's the wifi password?

Bartender:

youneedtobuyadrinkfirst - No spaces and all lowercase.



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SUNSHINE COAST LOCAL MEDICAL ASSOCIATION Inc. ABN: 56 932 130 084**MEMBERSHIP APPLICATION**Enquiries: Jo Bourke Ph: 5479 3979 Mb: 0407 037 112 Email: jobo@squirrel.com.au

NAME	Surname:		First Name:	
EMAIL: _____ <i>THE SCLMA PREFERS TO CONTACT MEMBERS VIA EMAIL WHEREVER POSSIBLE.</i>				
PRACTICE ADDRESS: For members who wish to receive hard copies (instead of by email) of the monthly invitation & newsletter by Sullivan Nicolaides Pathology Couriers to avoid postage costs.				
	Practice/Building			
	Street:			
	Suburb:		Postcode:	
	Phone:		Mobile:	
PRACTITIONER DETAILS:				
	Qualifications:			
	Date of Birth:		Year of Graduation:	
	Hospital employed / Private Practice (cross out one)			
	General Practice / Specialist (cross out one)			
	Area of Speciality:			
PLEASE NOTE: <i>Retired doctors who wish to join the Association are required to attach a letter of good standing from their respective College.</i>				
PROPOSERS: (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:	
ANNUAL SUBSCRIPTION (GST included):		(Please tick)		PLEASE COMPLETE:
Full-time ordinary members - GP and Specialist		\$ 110		Your Monthly Invitation?
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Non-practising ordinary members, under 60 years old		\$ 55		Your Monthly Newsletter?
Residents & Doctors in Training		Free		By Email?
Non-practising ordinary members, over 60 years old		Free		By Courier?
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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 (scanned) or Fax or Post with details of your E.F.T. to: Email: jobo@squirrel.com.au Post: SCLMA PO BOX 549 COTTON TREE 4558 Fax: 5479 3995				
Please note: Membership applications will be considered at the next Management Committee meeting.				

Your pathology provider on the Sunshine Coast



Dr Irene Krajewska **FRCPA FIAC**

E: irene_krajewska@snp.com.au

T: (07) 5459 1400

Dr Irene Krajewska graduated from Manchester University in 1978. After five years of FRCS surgical training in the UK and South Australia, she undertook training in anatomical pathology at the IMVS in Adelaide, where she developed an interest in GIT, gynaepathology and cytology under Prof. Svante Orell. She was awarded the RCPA Fellowship in 1990 and the Fellowship of the International Academy of Cytology in 1991. Irene has been an examiner for the RCPA and Australian Society of Cytology. She joined Sullivan Nicolaides Pathology in 2003 and is based on the Sunshine Coast. Her interests are FNA cytology, breast pathology, dermatopathology, gastrointestinal pathology and gynaepathology.



Dr Jerome Lai **FRCPA**

E: jerome_lai@snp.com.au

T: (07) 5459 1400

Dr Lai graduated from the University of Queensland in 1984 and undertook further training in pathology at the Princess Alexandra Hospital and the Mater Misericordiae Hospital in Brisbane. He was awarded the RCPA Fellowship in 1991. Before joining Sullivan Nicolaides Pathology, Dr Lai was Pathology Queensland's Director of Pathology for the Sunshine Coast region.



Dr Karien Treurnicht **FRCPA FIAC**

E: karien_treurnicht@snp.com.au

T: (07) 5459 1400

Dr Karien Treurnicht graduated cum laude from the School of Medicine at the University of Pretoria, South Africa, in 1995. Karien moved to the UK in 1999 and undertook specialist training in histopathology at a number of London hospitals. She gained a Fellowship from the Royal College of Pathologists (FRCPath UK) in 2003 and in the following year went on to a Urological Pathology Fellowship at Bostwick Laboratories in Richmond, Virginia, USA. In 2005, Karien became Medical Director of Bostwick Laboratories, London, a full-service independent medical laboratory specialising in the interpretation of prostate and urological biopsies. She joined Sullivan Nicolaides Pathology in 2015 and is based at the Buderim laboratory. Karien is widely published and has presented at conferences internationally.



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Conference Organiser
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December 2018

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November 2018

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- Close to Parking Lot and local bus stop
- Two consulting rooms facing lake side and New University hospital and one additional procedural room
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Email : reception@drajayverma.com.au

October 2018

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Lorraine Corbett at Corbett Neurophysiology

P 07 5503 2400 M 0438 400 400

E admin@corbett.com.au

December 2018

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Manager, Janette Ritchie at janetteritchie@inet.net.au or mobile 0400 593 007

September 2018

CLASSIFIEDS UPDATE!

GUIDELINES FOR 2019

- Classifieds are FREE for current SCLMA members
- Classifieds have a placement life of 3 newsletters
- From February 2019 word count should be no more than 200 words
- Long-term classifieds will be condensed
- Cost for non-members is \$100 + gst

ALL QUERIES:

Contact: Jo 0407 07 112

Email: jobo@squirrel.com.au

THE DATE HAS BEEN SET - MARK YOUR DIARIES!

SCLMA YEARLY SOCIAL - FRIDAY 2nd AUGUST 2019

PEPPERS RESORT, NOOSA

Some of our photos from last year's Social at Pelican Waters - more on our website : <http://www.sclma.com.au/event-photos/>



Are you a member?

Application and Directory forms on our website
 New SCLMA members (November 2018)
 Dr Lider Kukurt (Obstetrician Gynaecologist)
 Dr Karen Kukurt (Junior doctor, SCUH)

Many Membership Applications pending for SCLMA Meeting 28 Feb

- Dr Grant Fraser-Kirk; Dr Gordon Strachan; Dr Paul Jauncey; Dr Khaldoon Alsaee; Dr Michael Bryant; Dr Laleh Banan; Dr Rachel Hawker; Dr Gregory Orchard; Dr Trent Lincoln; Dr Annie George.

