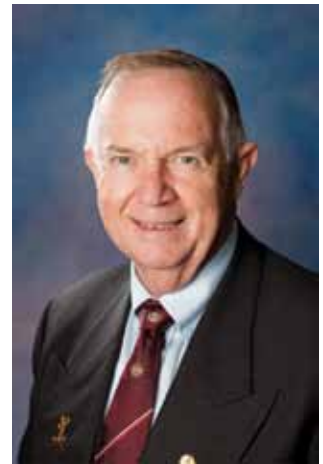




SCLMA President's Message ... Dr Wayne Herdy

Saturday 18th August was Long Tan Day, a very significant day in Australian military history but one which was overlooked by the vast majority of Australians.

More cheerfully, it was also the day when SCLMA held its Christmas in July in August (which sounds about as Irish as it gets). This was probably the most successful social event ever conducted by the Association, and due compliments must flow to the small organizing committee. This success also reminds us that one of the Objects of the Association is to create an environment promoting social interaction among its members – and a purpose of the Association which has been partly overlooked by the successive presidents of the past decade (including myself) who have been more focussed on the political objects of the Association.



It is timely then to reflect that this might be my last President's column. I am not standing for re-election, and for the very good reason that the previous paragraph prefaces, that Associations like ours prosper and grow when there are changes in leadership, new leaders bringing fresh ideas and different ways of presenting the Association.

Mason and I will still be available for positions on the incoming executive committee, to maintain the corporate memory and some degree of consistency. But neither of us will be the front face of the Association nor will we be determining its path for the coming year. I acknowledge the contribution that Mason and the other members of the committee have made during my presidency, and I wish all the best for the incoming President and the new committee.

Wayne Herdy

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



HIGHLIGHTS:

- P 5: Kevin Hegarty - Health Service Link
- P 4: Clinical Meetings - dates
- P 6: Dr Sandra Peters - GP Liaison Officer
- P 9: AMA Qld President's Report
- P 10-11: Dr Clive Fraser - Motoring article
- P 14-15: Photos - Christmas in August Function
- P 17: Dr Wayne Herdy - AMA Report
- P 19: Wine article - 'Cellars'
- P 20: Membership Application Form
- P 23: Classifieds

CONTACTS:

President and AMA Councillor	Dr Wayne Herdy Ph: 5476 0111
Vice President:	Dr Mason Stevenson Ph: 5442 4922
Secretary:	Dr John Eckersley
Treasurer:	Dr Peter Ruscoe Ph: 5446 1466
Hospital Liaison:	Dr Jeremy Long Ph: 5470 5651
Newsletter Editor:	Dr Marcel Knesl Ph: 5479 0444
SCDGP Rep:	Dr Scott Phipps Ph: 5494 2131
Meetings Convenor:	Dr Rob Ingham Ph: 5443 3768
Committee:	Dr Andrew Foster Dr Denise Ladwig Dr Kirsten Hoyle Dr Di Minuskin Dr Debbie Pfeiffer Dr Nigel Sommerfeld

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:

**Email: Dr Marcel Knesl
valmolives@gmail.com**

Disclaimer: The views expressed by the authors or articles in the newsletter of the Sunshine Coast Local Medical Association Inc. are not necessarily those of the Sunshine Coast Local Medical Association Inc. The Sunshine Coast Local Medical Association Inc. accepts no responsibility for errors, omissions or inaccuracies contained therein or for the consequences of any action taken by any person as a result of anything contained in this publication.

All contributions need to be received by the 15th day of each month for that month's newsletter.

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 in this newsletter.

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

REDUCTION!

Membership has been reduced to **half price** for 2012 with \$55 for full membership with a sliding scale including free to doctors-in-training.

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Editor's Corner

*Welcome to the August 2012 newsletter.
It has been a busy few weeks.*

Saturday August the 18th was the mid-Winter Christmas. The evening was famously over-subscribed and fun was had by all. The canapés were outstanding and the view from the Mooloolaba terrace absolutely breathtaking. Table decorations set the Christmas theme. Mains were average alternating between pork and turkey.



Individual Christmas puddings made up dessert but the evening really went to "Pretty Woman walking down the street, Pretty Woman". The band captivated the audience. Guy Sebastian and One Direction gave way to the heavy beat of Roy Orbison's Pretty Woman. People took to the floor, feeling the rhythm, it was the seventies.

Last Thursday the 23rd was the AGM and the appointment of new committee members. Both Wayne and Mason stood down from the roles of President and Vice-president but do remain on as committee members. Their positions have been filled by Rob and Di. We say thank you to all four members. Wayne and Mason have steered the SCLMA through many interesting times and their experience will continue to be utilised as committee members and we thank Rob and Di for stepping up to take the reins.

We have finalised the topic for the November meeting- Gastroenterology. Diarise the date, 22 November

On the foodie front it's been a bit quiet. Noosa Sunday morning markets to stock up on some fresh produce and pick up some quality duck breasts is a favourite past time of mine. Most people love eating duck but are too scared to try cooking duck at home. Well it's really easy. Recently I was doing a dinner for six. One person did not eat fish, the other person did not like chicken and I was a bit bored with beef so I cooked duck. Six duck breasts bought from the Noosa farmers market. I jumped onto the website luv-a-duck and decided on some accompaniments to go with the duck breasts. Sweet potato mash and glazed apple slices.



To cook the duck you first need to pre heat your oven to 200C. Heat a large oven safe pan (the stainless steel scanpan is perfect for this) over the cooktop until hot. Then place the duck breast into the pan skin side down for 3 minutes. Do not use any oil. Three minutes later turn the breast onto the other side and cook for another 1 minute. Then place the scanpan into the oven for 10 minutes. After 10 minutes remove the pan from the oven and rest the duck covered with foil for another 10 minutes. While the duck breast rests plate up with the sweet potato mash and glazed apples. Slice the duck breast with a sharp knife and serve on the bed of sweet potato mash. Enjoy.

Remember luv-a-duck.

*Bon Appétit
Marcel Knesl
mknesl@oceaniaoncology.com*





SCLMA MONTHLY CLINICAL MEETINGS
 Maroochydore Surf Club Function Room
 6.30pm for 7pm - 9pm (finish)

THURSDAY 27 SEPTEMBER 2012

Presenter: Dr Lee Price, Pathologist
 (Specialty - Clinical Chemistry, Endocrinology)
 Topic: TBA
 Also presenting: Doctors from NGH
 Topics - possibly Stroke & Gastro-enterology)
 Details to be advised.
 Sponsor: Sullivan Nicolaides Pathology

THURSDAY 22 NOVEMBER 2012

Details to be advised.
 Sponsor: QML

ENQUIRIES:

Jo Ph: 5479 3979
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THURSDAY 11 OCTOBER 2012
COMBINED MEETING & DEBATE
BETWEEN SC LAW SOCIETY & SCLMA

THURSDAY 25 OCTOBER 2012

Presenter: Dr Alan McKenzie
 Topic: *MRI and the GP*
 Sponsor: Qld Diagnostic Imaging

Meeting attendance:

- *Free for current members.*
- *Non members: \$30.*
- *Application forms available on night.*
- *Membership forms also available on SCLMA website:*

www.sclma.com.au

HEALTH SERVICE LINK - AUGUST 2012

with Kevin Hegarty



Friday 3 August saw the official opening of our Cardiac Catheter Laboratory and procedural suites. One person who was in attendance at the ceremony, although not part of any official activity on the day, has been a long term advocate for increased cardiac services on the Coast and was instrumental in the process that led to the development of the Cardiac Cath Lab.

I am of course referring to Dr Steve Coverdale. Steve, in his previous role as the long term Director of Medicine at Nambour Hospital, has consistently highlighted the need for improved cardiac services as well as himself being a key provider of such services.

Steve, along with a number of other senior staff, engaged directly with the then Deputy Premier and Minister for Health in 2009. Part of that discussion emphasised the need to develop selected services that could be operational well before the commissioning of the Sunshine Coast University Hospital (SCUH). The Cardiac Cath Lab was the service that Steve personally highlighted and pursued. As a result of his action, government approval and funding was obtained for its development.



Dr Peter Hollett, Clinical Director of the Hospital and Health Service Medical Services Group, emphasised how important Steve Coverdale's leadership has been when he recently commented that "Steve's contribution as a senior clinician and now as the Head of Clinical School, has been fundamental to the development of a comprehensive range of medical services we now have". Similarly Dr Peter Larsen acknowledges Steve Coverdale's leadership and influence as one of the key factors that led to him applying for and accepting the position of Director of Cardiology.

As I highlighted in an earlier column Steve's contribution has been formally recognised through the award of Emeritus status within the QH medical employment classification. His responsibility over the last two years has also included direct engagement on the SCUH project, both as a specialist advisor and as a member of the group of eight (G8) senior leaders that has ensured direct clinical input into the development and also importantly the evaluation process as part of the selection of the Public Private Partnership consortia.

As our Health Services continue to develop and expand, it is important that we recognise those who have made sustained contributions. Steve Coverdale is certainly someone who deserves such acknowledgement.

Kevin Hegarty, Health Service Chief Executive
Sunshine Coast Hospital and Health Service
Kevin_Hegarty@health.qld.gov.au



August 2012 Update from Sandra Peters

GP Liaison Officer (GPLO)

Focus Health Network Ltd

The first of July has been and gone, names have changed and life goes on much as it did before!

Focus Health Network, formerly Sunshine Coast Division of General Practice is now the umbrella organisation for allied health as well as general practice here on the Sunshine Coast.

Our role in GP/Primary Health liaison remains essentially the same, but with renewed focus on the goals we hope to achieve over the next six months. As you are aware our attention has been on the communication between primary care and hospital services at the two main points of transition of care, namely the referral and discharge letters. We recently performed a snapshot audit of referrals to the SOPD at Nambour Hospital. We found that we need to look at the quality of the clinical information being shared in the referral, particularly the currency of medication lists, allergies and warnings for patients being referred. Your suggestions as to how we should address this issue as general practitioners are invited, please contact me.



The medical department at Nambour Hospital are now planning a similar audit of clinical content of discharge summaries. The audit will be performed by a team of physicians, and it would be useful to have a second arm of the audit with GPs assessing the discharge summaries using the same audit tool and then comparing the data collected. This will ensure that the hospital services are correctly informed as to requirements of general practitioners from this communication. Again I am inviting input from our clinical community to be involved in the audit, the tool is very simple and it will take a short amount of time with each GP having a sample size of 5 summaries to audit. Please register your interest in participating.

The GPLO recently hosted another successful meet and greet evening with the Sunshine Coast Hospital and Health Service's Persistent Pain Management Service and Neurologists. It was news to some GPs that Dr Tomin Mooney is the full-time Neurology Specialist on staff. Drs Peter Patrikios and Tomin Mooney clarified clinical management of common neurological disorders referred to SOPD and advised that nerve conduction studies can be requested on referral, presently with a wait time. Drs Tania Morris and Rob Lattik outlined the State-wide Persistent Pain Health Service Strategy as well as the local multidisciplinary response to pain management with dedicated PPMS premises opening in the Nambour General Hospital precinct in the next few months.

At the meeting, GPs highlighted the need for communicating and clarifying some processes in the SOPD referral procedure and we will work on that in the short term. A comment from the hospital teams involved was that it would be great to see more GPs attend these events. Whilst the demands on our time are high, these evenings do offer an opportunity to network with Specialist and GP colleagues in an informal setting. The feedback from those attending is always very positive. I look forward to seeing you at the next evening, scheduled for October; watch this space for details closer to the time!

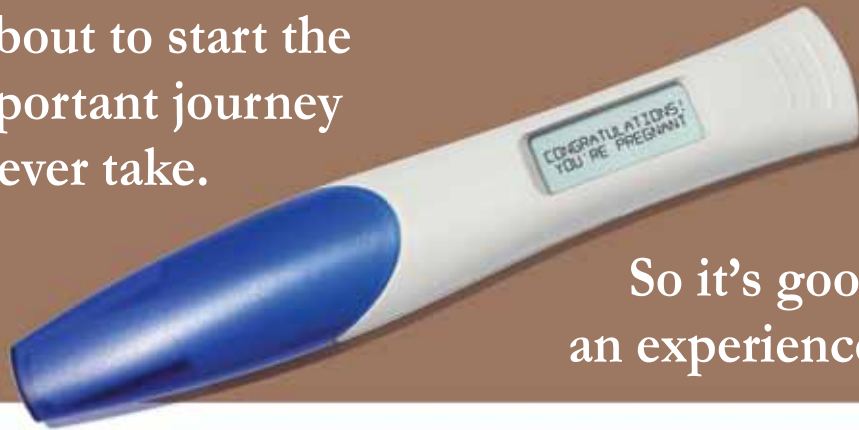
Yours in health,

Sandra

P: 07 5456 8888

E: speters@scdgp.org.au

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So it's good to have an experienced guide.

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- **A Personal Case Manager** to guide them through the program, ensure they get what they need from it, and liaise with you, their doctor to ensure consistent, coordinated care.

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AMA QUEENSLAND - PRESIDENT'S REPORT

Dr Alex Markwell

Dear members,

This month the AMA Queensland Presidential tour took us to Mt Isa and far north to Cairns and Townsville. Again, we appreciated the opportunity to see first-hand the issues, challenges and concerns facing regional doctors and health facilities.

Having now covered a large part of the state, I can say with certainty that doctors throughout Queensland are facing similar challenges; cost-cutting, job security, waiting lists, lack of resources and a general unease about the implementation of the new Hospital and Health Service Boards.

Following meetings with many HHS Board chairs and chief executives, as well as Medicare Local chairs and CEOs, I can conclude that the Chairs are experienced professionals but not necessarily in health; this may be an advantage as a fresh set of eyes and a new perspective can bring discrepancies and idiosyncrasies into sharp focus.

Also, some boards have developed extensive clinician engagement strategies but for others it is still on their 'to do' list. I cannot emphasise strongly enough that clinician engagement is the key to getting local health services right.

Without clinician engagement there is a real danger of further fragmentation and disenfranchisement within the sector, particularly as services devolve. Now is the time for Local Medical Associations to play an active role, encouraging members to get involved and become participants in the decision-making process.

The impending decentralisation or devolution of health services has been a major issue this month with many of our members voicing their concerns about the implications for doctors and patients.

Recent examples of BreastScreen Queensland and the Queensland Tuberculosis Control Centre (QTbcc) sparked widespread debate

and unprecedented medical activism. Following prominent media coverage and discussions with the Health Minister, a 'think tank' was convened to review the proposal.



After consultation with senior medical specialists, it became clear to AMA Queensland that some specialised services—such as TB treatment, screening and contact-tracing—need to remain consolidated, from good clinical and financial standpoints.

While the government may be keen to offload these services to the HHS Boards, it is essentially a cost-shifting exercise. There must be appropriate checks and balances to ensure these essential services continue to be provided adequately and professionally.

We will continue to work with our members and Queensland Health to explore appropriate options for centrally-managed services, one possibility may be larger HHS Boards 'hosting' consolidated specialist services and smaller boards purchasing these services for their patients.

Again, thanks to those who provided insight into these complex issues. This advice informed our policy development and discussions with the Health Minister and senior health officials.

As always, your feedback and suggestions are welcomed.

Please call **07 3872 2222**

Email me a.markwell@amaq.com.au .



MEDICAL MOTORING

with Doctor Clive Fraser



RANGE ROVER EVOQUE

“Evocative!”

According to my dictionary the word evoke means “to re-create imaginatively”.

There is little doubt that Range Rover’s latest addition, the Evoque, fulfils that definition.

Love it or hate, it is undeniably a Mini-Me version of a full-size Range Rover with quite a lot of modern technology thrown in to match its futuristic looks.

For starters whilst the floor-pan is loosely based on a Freelander an aluminium bonnet and roof help to make total weight savings of 100 kg.

Inside there is a very luxurious feel to the cabin, but you will need to be well-heeled if you start ticking the Evoque’s option boxes.

In the most basic “Pure” model there are no rain-sensing wipers, xenon or auto headlights, features which I would expect for my 60 something thousand dollars and which can be had in the optional Clearview Pack for \$1,700.

But you can option up the Evoque to your heart’s desire and this does create a healthy revenue stream for its makers from a model that is in short supply.

For \$1,300 I thought I could go without the heated washer jets and steering wheel found in the Cold Climate Pack and \$3,400 did seem a bit steep for the Sat Nav.

Under the bonnet you can start with a 2.0 litre eco-boost petrol engine which is the same as the one that slots into Ford’s Falcon and Mondeo and Volvo’s S60.

My test vehicle was powered by the 2.2 litre turbo-diesel which has two variants.

Power starts in the diesel at 110 kW, but for about \$4,000 more there is a higher performance engine with 140 kW.

Acceleration is faster in the six speed automatic than the six speed manual and even Kath and Kim should be able to get to 100 km/h in about 8.5 seconds.

If you’re not planning to go off-the-beaten-track there are 2WD variants which are priced \$3,400 under the equivalent AWD.

But in true Landrover fashion there is some real off-road potential with Range Rover quoting a wading depth of 500 mm for the Evoque.

I did suggest to my colleague who owned the test vehicle that we would need to check the validity of that claim on our test drive, but we weren’t able to find any flooded streams to ford in suburban Buderim.



MEDICAL MOTORING /cont:

Like most owners our journey would simply be to the local Golf Club and disappointingly the boot wouldn't hold our clubs without folding down the rear seat.

So what sort of doctor is likely to buy a Range Rover Evoque?

Well, I'm thinking 50-ish, mid-life crisis, kids have left home etc.



That sounds a lot like me!

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WHAT IT MEANS TO BE A BABY BOOMER .



Given that the average age of business owners within Australia is currently 56, it is more likely that you will be a "Baby Boomer" business owner yourself. This can pose a number of issues for you and your business. By considering these issues, "Baby Boomer" business owners are taking proactive steps in reducing the dependency on those individuals who may retire in the near future.

The term "Baby Boomer" is used to define a generation from a demographic perspective. If you are aged from 46 - 63 you are considered to be a member of this generation. It is a widely held belief that this generation commenced prior to the end of the Second World War and concluded with the introduction of the contraceptive pill and the incline of female employment within Australia. Baby Boomers were born after 1943 and before 1960.

This generation represents 22.8% of the population within Australia.

The stats are scary!

- 57% of business owners are expected to retire within 10 years, 68.2% have not chosen a successor leading to a glut of businesses for sale and only 17.7% of business owners have a succession plan.
- These are some of the many statistics that confirm succession planning is a major strategic event facing Baby Boomer business owners and managers.

What Baby Boomers need to do?

The aging Baby Boomers will have a significant impact on the number of businesses available for sale over the next ten years. To determine your succession planning need, ask yourself three questions:

1. Am I a Baby Boomer in business?
2. Is my business my major source of income and wealth?
3. Am I relying on the sale of the business to fund part or all of my retirement?

If you have answered yes to all or any of the above questions then you need to start planning your succession now!

If you would like to discuss your succession plan please call **Don Poole 07 5437 9900**.

Sources:

Baby Boomer: www.abs.gov.au © Bstar Pty Ltd



sports & spinal

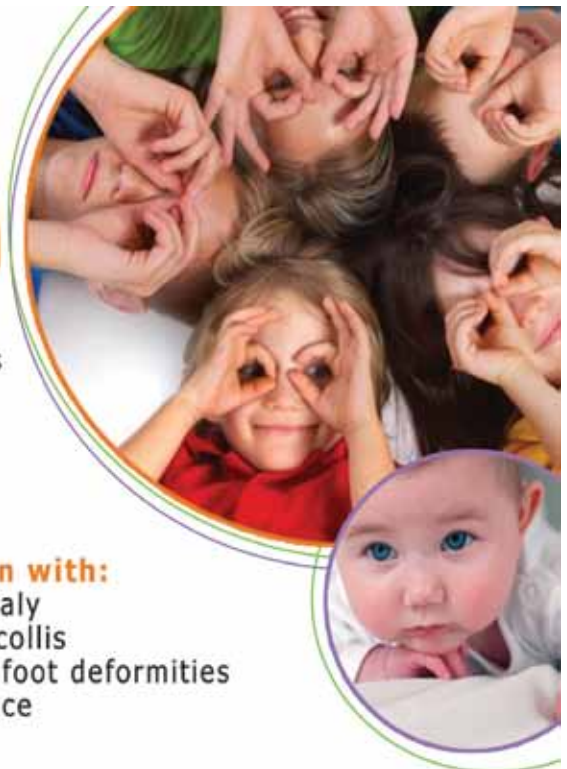
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Paediatric Physiotherapy

Kandice Bengtsson is a new member of the Sports and Spinal Physiotherapy team. She has passion for, and expertise in paediatrics. Kandice has worked with babies and children in a number of settings, including public and private hospitals, as well as in community organisations. Kandice strongly believes in the importance of early intervention and empowering families with tools to help their children.

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***SCLMA 'CHRISTMAS IN AUGUST'
THE YACHT CLUB, MOOLOOLABA
SATURDAY 18 AUGUST 2012***





We sincerely thank our Sponsors and enjoyed the company of their representatives at the 'Christmas In August' function at The Yacht Club, Mooloolaba on Saturday 18 August!

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Buderim QLD 4556
P: (07) 5444 0369



Dr Dana Moisuc

Suite 1, 3 Lyrebird Street
Buderim QLD 4556
P: (07) 5478 3533



Dr Petra Ladwig

Ground floor
5 Innovation Parkway
Birtinya QLD 4575
P: (07) 5437 7244



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Suite 14, Nucleus Medical Suites
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AMA COUNCILLOR'S REPORT

Dr Wayne Herdy

PLAIN PAPER PACKAGING.

If ever the AMA could claim a public health victory, plan packaging for cigarettes must come near the top of our historic achievements. We pressed for this for decades, the government finally came to the party and delivered the legislation, and now the High Court has validated the law.

Nobody thinks that hard-core established smokers are suddenly going to abandon the evil weed just because their drug of choice will be served up in an anonymous dull olive pack with a graphic health warning. But there is a reason why Big Tobacco spends zillions on advertising, why they fought tooth and nail against our drive to have cigarette advertising separated from sports activities, and why they cherish their sacred brand names and product recognition. Advertising pays. And the payoff for Big Tobacco is the attraction of NEW smokers, especially among the young, whose recruitment promises decades of product purchases. Why else would they have mounted a costly legal challenge to the government's decision to de-glamorize smoking?

The outcome has been closely watched by all developed nations, and will encourage more countries to move away from glitzy images. The government's decision was not without risk – it will have a big short-term cost in lost excise revenues, a cost that will not be recovered in health cost savings for a decade or two. But the investment will yield benefits. We now are in the long term race for Australians of the future to enjoy the world's highest life expectancy (not just second as we are today). Hats off to the AMA, hats off to the Labor government that took the final step, and has off to the High Court for the recent legal stamp of approval.

FLY-IN FLY-OUT DOCTORS.

I hope I am not breaching too much of Council confidentiality if I report that the AMAQ Branch Council recently had occasion to debate the question of fly-in fly-out doctors as an option for providing GP services to remote communities.

We all know that little and far-flung country towns struggle to attract health professionals, especially GP's. We also worry that part-time doctors cannot provide anything like the continuity of care and intimate knowledge of the local community that a full-time local doctor delivers. However, for a town that cannot find a full-time long-term GP, it is a realistic option to borrow a page from the successful strategy adopted by the mining companies.



My personal experience is illuminating. I travel (infrequently) to remote aboriginal towns in Central Australia for only a few weeks at a time. Returning to one of the larger towns a few years ago ("large" meaning a population of about 800) I was stunned to learn that there had been no GP in town in the intervening 6 months or so. For them, the fly-in fly-out doctor who visited for a fortnight twice a year was all the GP that they had. Towns like this actually get (relatively) pretty good service from visiting specialists and dentists and allied health.

The idea is to get three, maybe up to five, GPs who basically job-share and fill a roster that gives at least an acceptable level of coverage.

To achieve that for just one town would require a lot of juggling of personal and professional lives, as well as a lot more money than is already on the table (if only to cover the massive travel costs).

To achieve it for more than a handful of the 100-odd little towns that dot the maps of inland Australia – well, that would take a logistic and manpower miracle. But even without a miracle, a start must be made.

Wayne Herdy



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- A copy of "Travelling Well" by Dr Deb Mills will be provided FREE with any referred consultations
- Travel medical accessories



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www.travelmedicine.com.au
 7 Day Medical Centre
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DIVE & TRAVEL MEDICINE

Advertisement

VISITING HAND SURGEON SUNSHINE COAST

- Hand Surgeon Dr John Walters visits the Sunshine Coast on a weekly basis.
- He consults and operates at the Sunshine Coast Private Hospital at Buderim each Friday and consults on a fortnightly basis on alternate Thursdays.

Consulting Rooms
Suite 10, Medical Centre
The Sunshine Coast Private Hospital
Syd Lingard Drive
BUDERIM.

Although happy to treat any routine Hand conditions, Dr Walters has a particular interest in surgery for arthritis of the Hand & Wrist (Rheumatoid & O.A.) including joint replacement arthroplasty; complex Dupuytren's contractures; tumours; and reconstruction following trauma. His Practice does not include shoulder surgery.

Appointments can be made through central bookings at his Office in Brisbane
Ph: (07) 3834 6535



Cellar Dwellers



dr. plonk

Having a cellar is a one of life's luxuries. How you do it is variable and ranges from under the bed (albeit easy access) to custom built rooms that often show that you might be compensating for something: Maybe like buying an old E type Jaguar. The reason for being particular about wine storage is that it is a living thing and needs its own version of Homeostasis (bit of 2nd year physiology comes flying back). And of course why cellar wine?

Generally wine that is made to last will always cellar well and reward your patience with more complex characteristics. It also allows your event wines bought for that long awaited anniversary to shine and highlight that treasure trove of great memories. Yes I believe some people even buy divorce wines although it is usually with the other party's money.

In general reds will last longer than whites due to more natural preservatives from the tannins from the red grape skins and usually higher alcohol content. Acid is higher in white wines and can surprisingly aid in a white living on.

Temperature is the single most influential variable in cellaring wine. Past 22 degrees and below freezing will kill off this evolving living thing. Most experts feel 13-14 degrees is appropriate for that long slow maturation process. Heat tends to speed up reactions and can make wines mature more quickly but obviously over the 22 degrees the wine can literally be stewed.

Another factor is temperature consistency. You don't want more than 0.5 degrees variation over 24hrs as rapid heating and cooling makes the cork move like a piston and allows more oxygen in and speeds up the oxidation process. In a warm climate like Queensland, if you have a cool place that is 16 degrees in winter and 22 degrees in summer that is acceptable so long as it is that slow change in temperature.

Relative humidity is relatively important and it doesn't refer to a bad Tasmanian joke. Corks dry out and let more oxygen in if stored under 70% humidity.

Some people actually place bowls of water in their cellar to aid humidity. Some of these issues are negated by the use of screw caps, but try selling that to a rabid Burgundian wine maker. Excess light can imply heat which is not desirable but UV light in itself contributes to spoiling. Vibration is probably the least of your worries, but it isn't good form to toss your bottles around. The other fallacy is turning your bottles. This came from the turning of champagne bottles and doesn't apply to still wine.

So you can buy yourself a max/min temperature hydrometer and monitor the cupboard under the stairwell or you can turn that unused space into a cellar with a wine air conditioning unit. Fridges designed for wine storage are great and look smart. I also use my old examination coach at work with every drawer and cupboard filled with wine. I can comfortably cellar about 80 plus bottles that Mrs Plonk doesn't know about.

Dr Plonk is drinking-

- Champagne- Fleury Organic Champagne NV. This a Blanc de Blanc which means 100%Chardonnay. The nose has a wonderful lemon influence with subtle yeasty nutty characteristics. Maybe a hint of ginger spice. The palate is crisp with a finishing soft mouth feel.
- White- 2010 Greystone Sand Drift Pinot Gris Waipara Valley NZ. There are pink hues in the colour with a nose of white peach and honeyed almonds. The palate is generous with enough acidity to balance the sweetness.
- Red- 2008 Stella Bella Margaret River Shiraz. There is an intense bright purple colour with a blackcurrant and black pepper nose. Secondary notes of olives and cedar waft in. The wine flows effortlessly and has fine balanced tannins.



MEMBERSHIP APPLICATION

Enquiries: Jo Bourke Ph: 5479 3979 Mb: 0407 037 112 Email: jobo@squirrel.com.au

NAME	Surname:		First Name:	
EMAIL:				
PRACTICE ADDRESS: This is for delivery of your monthly invitation and monthly newsletter by Couriers from Sullivan Nicolaides Pathology thus avoiding postage costs to the SCLMA.				
	Practice/Building			
	Street:			
	Suburb:		Postcode:	
	Phone:		Fax:	
ALTERNATE ADDRESS: (if practice address not applicable)				
	Street:			
	Suburb:		Postcode:	
	Phone:			
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: Retired doctors who wish to join the Association are required to attach a letter of good standing from their respective College.				
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)	DELIVERY OPTIONS	
Full-time ordinary members - GP and Specialist		\$ 55.00	Your Monthly Invitation	
Doctor spouse of full-time ordinary member		\$ 22.00	By Email?	
Absentee or non-resident doctors		\$ 22.00	By Courier?	
Part-time ordinary members (less than 10 hours per week)		\$ 22.00	By Post?	
Non-practising ordinary members, under 60 years old		\$ 22.00	Your Monthly Newsletter	
Residents & Doctors in Training		Free	By Email?	
Non-practising ordinary members, over 60 years old		Free	By Courier?	
Patron and honorary members		Free	By Post?	
Payment can be made by cheque payable to SCLMA or by direct debit to the SCLMA Westpac Account. BSB: 034-243 ACCOUNT NUMBER: 11-9298 A TAX RECEIPT WILL BE SENT FOR YOUR RECORDS.				
Please return this form with your cheque OR details of your E.F.T. to: SCLMA PO BOX 549 COTTON TREE 4558				
Please note: Membership applications will be considered at the next Management Committee meeting.				



SMILE TIME!



A LOVING GRANDPA

A woman in a supermarket is following a grandfather and his badly behaved 3 year-old grandson. It's obvious to her that he has his hands full with the child screaming for sweets in the sweet aisle, chocolate brownies in the chocolate brownie aisle, and for fruit, cereal and pop in the other aisles.

Meanwhile, Granddad is working his way around, saying in a controlled voice, "Easy, William, we won't be long, easy, boy." Another outburst, and she hears the granddad calmly say, "It's okay, William, just a couple of more minutes and we'll be out of here. Hang in there, boy."

At the checkout, the little terror is throwing items out of the trolley, and Granddad says again in a controlled voice, "William, William, relax buddy, don't get upset. We'll be home in five minutes; stay cool, William."

Very impressed, the woman goes outside where the grandfather is loading his groceries and the boy into the car. She said to the elderly gentleman, "It's none of my business, but you were amazing in there. I don't know how you did it. That whole time, you kept your composure, and no matter how loud and disruptive he got, you just calmly kept saying things would be okay. William is very lucky to have you as his grandpa."

"Thanks," said the grandfather, "but I'm Williamthe little horror's name is Kevin."

MAMA'S BIBLE

Four brothers left home for college, and they became successful doctors and lawyers.

One evening, they chatted after having dinner together. They discussed the 95th birthday gifts they were able to give their elderly mother who moved to Florida .

The first said, "You know I had a big house built for Mama."

The second said, "And I had a large theater built in the house."

The third said, "And I had my Mercedes dealer deliver an SL600 to her."

The fourth said, "You know how Mama loved reading the Bible and you know she can't read anymore because she can't see very well. I met this preacher who told me about a parrot who could recite the entire Bible. It took ten preachers almost 8 years to teach him. I had to pledge to contribute \$50,000 a year for five years to the church, but it was worth it Mama only has to name the chapter and verse, and the parrot will recite it."

The other brothers were impressed. After the celebration Mama sent out her "Thank You" notes.

She wrote: Milton , the house you built is so huge that I live in only one room, but I have to clean the whole house. Thanks anyway."

"Marvin, I am too old to travel. I stay home; I have my groceries delivered, so I never use the Mercedes. The thought was good. Thanks."

"Michael, you gave me an expensive theater with Dolby sound and it can hold 50 people, but all of my friends are dead, I've lost my hearing, and I'm nearly blind. I'll never use it. Thank you for the gesture just the same."

"Dearest Melvin, you were the only son to have the good sense to give a little thought to your gift. The chicken was delicious. Thank you so much."

COMPUTER TECH SUPPORT ...

Tech support: What kind of computer do you have?

Female customer: A black one...

Customer: Hi, this is Celine. I can't get my disc out.

Tech support: Have you tried pushing the release button?

Customer: Yes, sure; the tray comes out but there's nothing in it.

Tech support: Does disc content show up on your screen?

Customer: ...Oh! ...wait a minute..... I hadn't inserted it yet... it's still on my desk... sorry....

Tech support: Click on the 'My Computer' icon on the left of the screen. Customer: Your left or my left?

Customer: Hi, good afternoon, this is Martha, I can't print.

Every time I try, it says 'Can't find printer.'

I've even lifted the printer over and placed it in front of the monitor, but the computer still says it can't find it...

Customer: I have problems printing in red.

Tech support: Do you have a color printer?

Customer: Aaaah.....thank you.

Tech support: What's on your monitor now, ma'am?

Customer: A teddy bear my boyfriend bought for me.

Tech support: Your password is the small letter "a" as in apple, a capital letter V as in Victor, and the numbers 7274.

Customer: Is the 7274 in capital letters ?

Customer: I can't open Yahoo calender.

Tech support: Are you sure you used the right password?

Customer: Yes, I'm sure. I saw my colleague do it.

Tech support: Can you tell me what the password was?

Customer: Yes... five stars.

Tech support: How may I help you?

Customer: I'm writing my first e-mail.

Tech support: OK, and what seems to be the problem?

Customer: Well, I have the letter 'a' in the address, but how do I get the circle around it?

A woman customer called the Canon help desk with a problem with her printer.

Tech support: Are you running it under Windows?

Customer: "No, my desk is next to the door, but that's a good point. The guy sitting in the cubicle next to me is under a window and his printer is working fine."

QUOTE:

Two may talk together under the same roof for many years yet never really meet; and two others at first speech are old friends.

Mary Catherwood.

**SUNSHINE COAST LOCAL MEDICAL ASSOCIATION
MANAGEMENT COMMITTEE MEETING
THURSDAY 26 JULY 2012
MAROOCHYDORE SURF CLUB FUNCTION ROOM
DRAFT MINUTES**

Attendance: Drs Wayne Herdy, Mason Stevenson, Peter Ruscoe, Rob Ingham, Nigel Sommerfeld, Di Minuskin, Debbie Pfeiffer and Kirsten Hoyle.

Apologies: Drs Scott Phipps and Jeremy Long.

Minutes of meetings – May 2012 and June 2012.

The minutes were accepted as true records of both meetings.

Moved: Mason Stevenson. Seconded: Peter Ruscoe. Carried.

Business arising from Minutes: Nil

President's Report: Nil (Wayne has been working in remote location)

Vice President's Report :

Mason reported that he is proud to have been appointed as a member of the Hospital and Health Services Board, has received a congratulatory letter from the Health Minister, Lawrence Springborg. Five members on the Board, including the Chair, Prof Paul Thomas. The first month has been an intense induction process. The first official meeting is Tuesday 31 July 2012. There will be four sub-committees – Finance, Audit, Safety & Quality, Nomination & Remuneration of Board members current and future. Two Board members will be on each sub-committee. All information is available on QHealth website.

Secretary's Report:

Correspondence In:

- Andrew Pentland – no longer working for USC (previously June Canavan Bursary Award organiser);
- Trish Pease – to USC – query re any 2012 recipient for the June Canavan Bursary Award,
- Gold Coast Medical Association – copy of letter sent to McGregor Marketing Group re unauthorised content in the bi-monthly publication 'Doctor'.

Correspondence Out:

- Julie Martin, USC – confirming 2012 Recipient for June Canavan Bursary Award and requesting the SCLMA to continue with the Bursary into 2013 and beyond.

Business arising from Correspondence:

- Discussion re correspondence from Gold Coast Medical Association.

Motion: Wayne Herdy to write to Murray McGregor with accurate Management Committee information after AGM elections, plus disclaimer re Sunshine Coast information. Moved: Peter Ruscoe. Seconded: Di Minuskin. Carried.

- Correspondence from USC re recipient for June Canavan Bursary Award.

Motion: Wayne Herdy moved that the SCLMA create a Bursary to be paid to a Sunshine Coast student in a health related discipline, the quantum to be \$2,000 per annum, allocated according to criteria to be determined by the committee from time to time.

Seconded: Peter Ruscoe. Carried.

Treasurer's Report :

a) Accounts to be paid:

- Australia Post – June 2012 account
- Office National – June 2012 account
- Jo Bourke – June 2012 secretariat
- Snap Printing – July invites, lapsed members & Christmas invites
- Snap Printing - July 2012 newsletter
- Jo Bourke – July 2012 newsletter
- ATO – BAS June Qtr
- (b) Membership Report.
- Dr Mohamed Milad (Psychiatry)
- Dr Courtenay Tiffen (Radiology)

Meetings Convenor Report: Dr Rob Ingham

- Planning for 'Christmas in August' Function well in hand.

SCDGP Report: Dr Scott Phipps: Apology – Report tabled.

- The SCDGP has now officially changed its name to FOCUS HEALTH NETWORK as we re-brand ourselves and move forward to be the pre-eminent body to represent Primary care on the Sunshine Coast.
- We have a non GP as chair - Ian McPherson who has been on our Board as an independent director for several years.
- We are working to forge strong ties with the new Sunshine Coast Medicare Local and look forward to doing the same with the newly appointed Q Health Hospital and Health Services Board. The next twelve months will be a significant challenge as the various organisations establish and work to produce effective partnerships.
- Divisions of General Practice are now officially in the past and our new organisation will be responsive, strategic and a strong champion of Primary Care as the centre of healthcare in the coming years.

General Business: Nil

Meeting Close: 7.10pm

Jo Bourke, Acting Secretary.

CLASSIFIEDS

DR MELISSA WHITE – Gastroenterologist – New Practice Location

Dr White would like to inform all Medical Practitioners on the Sunshine Coast of her new practice contact details:

- Suite 2/52 Burnett Street BUDERIM QLD 4556 (next door to the Old Buderim Post Office)
- **PHONE: 5456 4278 FAX: 5450 1045**
- **EMAIL: melissa@melissawhitegastro.com.au**
- Conducting Procedures now at The Sunshine Coast Private Hospital Buderim & Selangor Private Hospital, Nambour

Dr Melissa White is no longer associated with the Buderim Gastroenterology Centre, Wisers Rd, Maroochydore.

- **Welcoming New Patients**

August 2012

DR EDWARD WIMS, Consultant Psychiatrist and Cognitive Behaviour Therapist

- Dr Wims has commenced practice at the Eugarie Centre, Noosa Junction. For appointments please phone **07 5455 4688 or fax: 07 5455 4533**,
- **Email: adapt@adaptmentalhealth.com.au**

August 2012

SUNSHINE COAST QLD

Better health on Buderim wants you !!!!!!!

But it's not just what you can do for our patients but what we can do for you; provide an exciting supportive workplace with a vibrant enthusiastic team.

- Doctors Rebecca Barnes, Neil Cradick, Judy Hesse and Don Thackwray are looking for a VR GP with a good work ethic & a sense of humour to join their team of caring health professionals on the beautiful Sunshine Coast.
- We are an independent, non corporate, doctor owned and managed mixed billing practice, fully computerised with qualified ancillary staff.
- We would love to hear from you so please email **pm@betterhealthonbuderim.com.au** or give any of the doctors a call on **07 5456 1600**.

August 2012

URGENT SKIN CANCER APPOINTMENTS

- A reminder that Dr McGovern offers an urgent appointment service.
- If you need any melanoma or other skin cancer patient seen urgently, simply call our rooms on **5479 2922** and ask for an urgent appointment.
- We guarantee to see your patient within a week, unless Dr McGovern is on leave.

Vie Institute, 3rd Floor, cnr Esplanade & Second Avenue, Maroochydore. Ph:5479 2922. July 2012

GPs - VR FT/PT REQUIRED - CALOUNDRA – SUNSHINE COAST

- Join our team of 5 doctors - long established practice, located on busy road near shopping complex, close to beach.
- Large modern premises, fully equipped treatment room, accredited & fully computerized. Fulltime nursing & reception support.
- Good working hours 8am to 5pm Monday to Friday. Saturday mornings only on rotation. No after hours. Mixed billing practice with chemist, pathology & allied health on site.

Ph: 07 5491 9044

Email: currimundi@cmcnet.com.au July 2012

DR IAN WEBB & DR ROBYN BOSTON – NEW ROOMS

- Dr Ian Webb, Gastroenterologist and Dr Robyn Boston, Gynaecologist, have moved to new rooms at 10 Fourth Ave, Caloundra.

Ph: 5499 7366 Fx: 5499 7649. May 2012

SHOULDER CLINIC - EVERY MONDAY MORNING

- Acute first time shoulder dislocation patients can be seen urgently.
- The Clinic has also reserved spots with local Radiology practices so that urgent MRIs can be done to assess the extent of the injury.

Contact 5492 0280

Dr Mark Welsh, Orthopaedic Surgeon

July 2012

SKIN PRICK TESTING

Now available by appointment

with Dr Peter Zwoerner

Buderim Laboratory • Nucleus Medical Suites

23 Elsa Wilson Drive

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(Referral can be faxed).

For a full list of special tests available at this site please refer to

www.snp.com.au

*Classifieds remain FREE
for current SCLMA members.
\$110 for non-members*

Ph: 5479 3979. Mobile: 0407 037 112.

Email: jobo@squirrel.com.au

*Classifieds will remain on the list
for three months unless
you request a longer placement.*

SCLMA CHRISTMAS IN AUGUST FUNCTION - 18 AUGUST 2012
140 ATTENDEES - THE YACHT CLUB, MOOLOOLABA
WITHOUT A DOUBT - THE BEST FUNCTION EVER!

