



SCLMA President's Message

Dr Roger Faint



I began watching the movie series Chernobyl over the last week while on a flight from Perth. It is a compelling story that obviously took some time to unfold and understand with one of the main issues being the incompetent hierarchical

structure of the Russian government which leads to truth avoidance (scientific lies), inefficiency and poor decision making. What struck me most was the fact that despite how critical Australian people are of their governments, most of us are reasonably well looked after in terms of basic needs including health.

'Every lie we tell incurs a debt to the truth. Sooner or later that debt is paid'.

This is a Chernobyl quote that could apply to many aspects of our own health system including the current issue of aged care retirement villages with the associated poor staff to patient ratios. I imagine, part of the reason we have a 'Royal Commission' is to independently explore and publish the truth, previously and hidden and unexplored.

The Australian Institute of Health and Welfare recently published previously unknown data revealing private health fund members wait just 20 days for surgery in a public hospital compared to a 42 day public patient wait. Apparently health fund members wait 46 days for a total hip replacement in a public Hospital while public patients wait 125 days. This is revealing and helps to confirm the concern state wide that the QLD State Health Departments have access to privately insured patients.

With regards to similar issues, the Herald Sun (Victoria) recently published an article revealing the Victorian Health Department has set targets for 14 Health districts to recruit privately insured patients to pay for their public hospitals. Also the NSW State Health department has recently reneged on a decision not to pay PHI patients' out of pocket costs.

It seems the slippery slope of truth avoidance is steepening.

Thankfully, Sean Parnell, Health Correspondent of the Australian, has recently announced (under the Freedom of Information laws) that the Commonwealth has engaged Ernst & Young to investigate how to audit such state behaviour.

Presumably the investigation will take some time, however it does show that the Commonwealth is concerned about the behaviour of the State Health Departments.

I would like to thank Dr John Evans (SCLMA representative) for his contribution to the first Master Clinical Service Plan (2020 to 2030), External Reference Group Committee Meeting recently on the 2nd October. John is donating his own time to attend and the SCLMA is privileged to be involved.

I recently spoke at length to a semi-retired rural doctor locum at Taroom about one month ago. He is from rural NSW and has worked in all states relieving rural doctors. He was fond of working in QLD as, to his mind, it had the best retrieval and rural medical support services in Australia.

Interestingly I was visiting a colleague in Albany (WA) last week and this quite isolated large rural committee of over 30,000 is flying in, flying out (FIFO) Emergency Physicians to their local public Hospital. Well done QLD!

Dr Roger K Faint



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

- 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

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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.



Editorial

Last week I answered Griffith University's call to press pause on the everyday and cast my mind to tomorrow by downing tools for the day and attending its Integrity 20 Conference - aimed to "inspire and shape debate on the great social, moral and political challenges of our age".



Few would need reminding that the world is experiencing unprecedented changes, often at vertiginous speed. Attendees were reminded that we often get caught up in the minutiae of the here and now and fail to prioritise long-term thinking which makes us culpable in many of the current problems we face - especially in politics, economics and environmental management and yet we have a stupendous ability to imagine, create and design for the future.

One of the conference's sessions entitled, "Without fear or favour", discussed the role of journalism as a pillar of democracy. Kerry O'Brien formed part of the panel and in light of recent AFP raids on Australian journalists, underscored that threats to media freedom are not limited to distant, authoritarian countries. The notion that freedom and independence of the press is a sine qua non for democracy culminated in an unparalleled solidarity of the country's news rooms to redact the front page of all newspapers last Monday as they inaugurated their "Right to know" campaign - and in so doing, apply scrutiny to power. O'Brien apprised the audience that governments use fear to divide and rule. So at a time when we have atrophy of the two party system which has lead to much public cynicism about politicians and politics, many of us have retracted into our own lives and fail to engage in public discourse . But the discussions and presentations on the podium served to remind those present that we are each more powerful than we think or have been lead to believe. If something is important enough, we can take it to the streets and connect the dots with justice.

So in the spirit of activism, I entreat you to scrutinize this month's SCLMA newsletter and especially President Faint's report.

Roger apprises of the Federal government's recent announcement of an audit into State public hospital Medicare billing practices - with a warning that any debt found owing to the commonwealth will be the responsibility of the individual doctor, not the hospital that processes and submits the billing. The outcome will be compelling!

Regards,
Kirsten

e. kirsten@eximious.com.au

HIGHLIGHTS in this issue:

- P 4-5: Adj. Prof Naomi Dwyer, CE, SCHHS
- P 7: PHN October Update
- P 9: Dr Wayne Herdy - "Allied Health Prescribing on the Horizon"
- P 10: Oli Steele - Ramsay Health Update
- P 12: Karen Clark - BPH Update
- P 14: Jo Munday - Eden PH Update
- P 19-17: AMA Queensland President's Report
- P 18: Dr Clive Fraser - Motoring
- P 22: Colonoscopies - MBS changes

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Website: www.sclma.com.au

CLINICAL MEETINGS 2019:

Please note that these details are correct at time of printing! They may change! Check our website for latest updates. www.sclma.com.au Click on Activities and Meetings.

THURSDAY 28 NOVEMBER 2019

- Speaker: Dr Grant Fraser-Kirk, Coastal Plastic Surgery (TBC)
- Speaker: Dr Kathleen Houston (TBC) SCUH Oncology Update

THURSDAY 27 FEBRUARY 2020

- Dr Dilip Dhupelia AMAQ President
- Doctors from Fertility Solutions will present

THURSDAY 27 MARCH 2020

ENT Evolve - Dr Kristy Fraser-Kirk

THURSDAY 30 APRIL 2020

Dan Everson, Podiatrist (TBC)

THURSDAY 28 MAY 2020

Sunshine Coast Heart Care Specialists

ENQUIRIES: Jo 0407 037 112

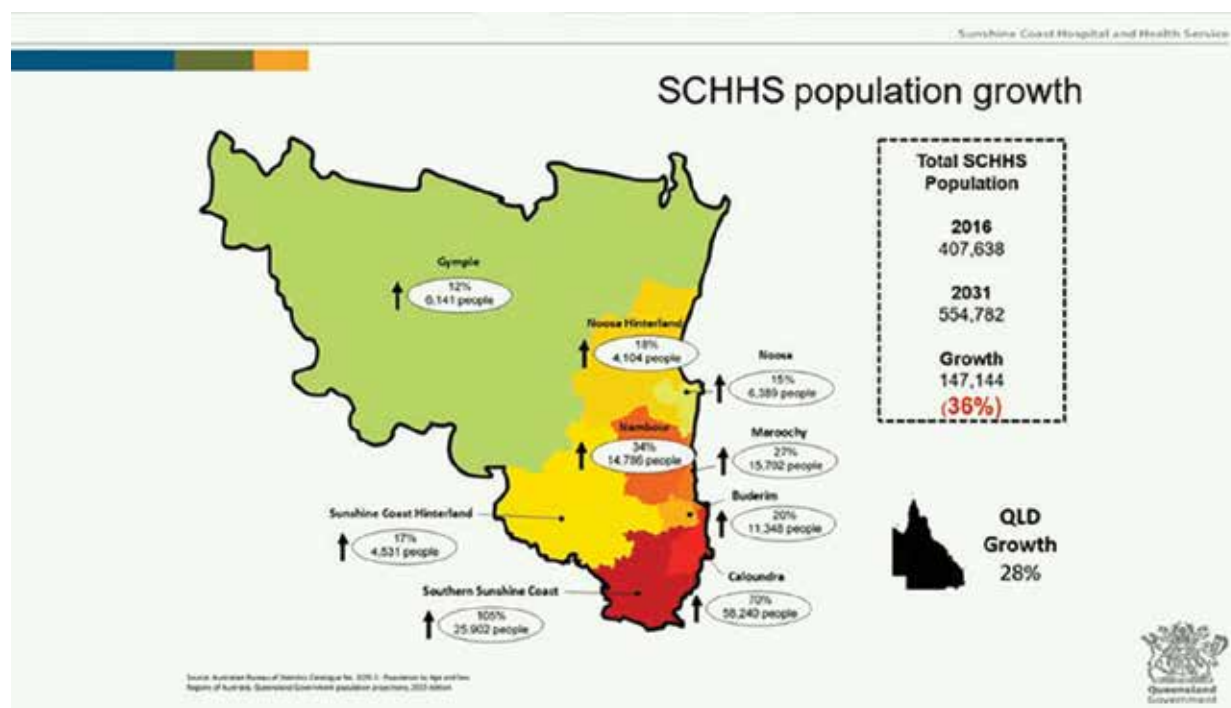
HEALTH SERVICE LINK - OCTOBER 2019

SCLMA voice in planning our services

We had an excellent turnout for the first of our Stakeholder Meetings which will inform our 10-year Master Clinical Services Plan, with SCLMA very well represented by Dr John Evans.

Planning encompasses the massive growth of our communities, and the challenges and opportunities relevant to the planning and delivery of responsive, high-quality public healthcare. This map explains Queensland growth overall between 2016-2031 (28%,) and projected growth (36%) which includes expansion in the southern end of the coast with close to 60,000 people joining Caloundra South postcodes. Understanding this growth will allow us to identify service volume and options for service delivery across our locations, and better inform our strategic planning for the future. Through this process, we are all working together to plan and co-design sustainable health services for our community's future.

We truly appreciate the valuable input from, and partnership with, SCLMA members.



Meeting the healthcare needs of our older Sunshine Coasters

With such a significant number of our community being older, and this trend continuing to grow over time we are implementing a number of initiatives to improve the patient journey and patient outcomes for frail older persons.

The Residential Aged Care Facility Acute Support Service (RaSS) model of care commenced this July and is designed to provide equitable and timely access to evidence-based health services in the most suitable physical environment to support safe and suitable care for the frail older person. The foundations of this model include senior nursing and medical consultation and advice, accessed by a single point of contact for the acutely unwell or deteriorating RACF patient. During this initial contact, decisions will be made as to the best, most appropriate course of action, based on the clinical need and preferences of the patient and their family.

An emergency equivalent level of care may be provided in the RACF environment, thereby reducing inappropriate hospital presentations, investigations or procedures.

HEALTH SERVICE LINK - OCTOBER 2019 /cont:

Optimised length of stay and timely and durable care transitions are achieved by high quality communication and referral processes between services and ongoing support from the in-reach team of specialist nurses for RACF patients who require admission to hospital.

The program facilitators implementing the geriatric inpatient model of care (Eat Walk Engage) commenced initial data collection in September and October in selected wards at Nambour and SCUH. This facilitator led model of care aims to reduce complications such as delirium, functional decline, falls, pressure injuries, and medication incidents by implementing proven strategies, designed and agreed by the multidisciplinary team in each ward.

Both models of care ensure person-centred care and better engagement of the older consumer in a wellness approach to care planning and delivery and better care experiences for all.

Dr Leith Banney – Leading dermatology care for Sunshine Coast Health

As mentioned in my last column, I plan on showcasing some of the great medical leaders we have in our health service.

Dr Leith Banney is head of Dermatology at Sunshine Coast Hospital and Health Service which provides clinics at both Sunshine Coast University Hospital and Nambour General Hospital.

Leith trained in Brisbane as well as the United Kingdom and spent 11 years working in Cairns in both private practice and Cairns Hospital before moving to the Sunshine Coast in 2014.



“Our team is small but stellar! I am lucky enough to work with some wonderful people, my colleague Dr Helmut Schaidler is an expert in melanoma and skin cancer. We have trainee dermatologists who are on six-month rotations,” Dr Banney said.

“Importantly, we now have our own specialist dermatology nurse, clinical nurse and ‘biologics’ nurse looking after patients on complex medications which require monitoring.” “We are proud to be one of two training positions outside of Brisbane and the only public service that provides photodynamic therapy for skin cancer. We are the only regional centre to have a multidisciplinary skin cancer meeting and the only combined Dermatology-Immunology Clinic in Queensland,” she said.

“Excitingly, next year we will commence 3D body photography, using Vectra WB360. This is cutting edge technology for research relating to melanoma and high-risk multiple naevi (mole) patients. We are also now offering tele-dermatology as a first line of consultation for any non-urgent patients.”

Dr Banney would love to see Sunshine Coast kids experience fewer sunburn incidents throughout childhood, and to raise more awareness around safe sun exposure. “We are the skin cancer capital of the world and it’s almost all preventable!”

In her spare time, Dr Banney enjoys gardening, cooking and travelling. She also has a healthy hat collection thanks to a love of op shopping.

We are very proud to have someone of Leith’s expertise and patient centred care leading our Dermatology service.

Upcoming events

The health service invites you to upcoming health events – [SCHHS patient safety day, 31 October](#), [Child Protection Symposium, 1 November](#), and [Thrive Eating Disorders, 15 November](#). All events will be held at Sunshine Coast University Hospital, and free of charge if you register online.

Til next time,

Naomi

Adj. Prof Naomi Dwyer, Chief Executive, SCHHS

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Dr Daevyd Rodda, Orthopaedic Surgeon

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THE ROLE OF A PODIATRIST

Diabetic Foot Australia has identified three priorities that need to be addressed for people with, or at risk of diabetes-related foot disease, with one priority aiming to enable greater access to affordable and effective care (Diabetic Foot Australia, 2017), including mandatory diabetic foot screening at least once per annum for all risk levels. (Diabetic Foot Australia, 2017; Ntuit et al., 2018).

A podiatrist is highly trained and skilled in assessing the neurological, arterial, venous, structural and dermatological status of the foot and lower limb in healthy and diabetic individuals.

Podiatrists provide regular foot screening, callus and nail care, diabetic friendly footwear prescription, offloading devices, patient education and a multi-disciplinary approach to the management of the diabetic foot. As well as identifying and managing high-pressure areas, gait abnormalities and impairments including falls risks which can further be a consequence of sensory and motor neuropathy (Reeves, 2019). Evidence is leading to patients requiring in-depth education about the sensory, motor and autonomic neuropathy, peripheral vascular disease, etiology of ulcers and infections, warning signs and appropriate preventative measures.

SPORTS & SPINAL PODIATRY LOCATIONS

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BUDERIM P: 07 5476 9068 F: 07 5445 3012
CALOUNDRA P: 07 5437 2679 F: 07 5491 1253
CHERMSIDE P: 07 3708 1284 F: 07 3708 1285
COOLUM P: 07 5415 0024 F: 07 5351 1866
KAWANA P: 07 5438 8511 F: 07 5322 5640

MAROOCHYDORE P: 07 5479 1777 F: 07 5479 1242
NAMBOUR P: 07 5441 2744 F: 07 5441 2844
SIPPY DOWNS P: 07 5322 5644 F: 07 5322 5645
SPRINGFIELD P: 07 3085 0100 F: 07 3085 0177
ROBINA P: 07 5689 4138 F: 07 5689 4139
WOOLLOONGABBA P: 07 3137 0599 F: 07 3137 1199

CENTRAL QLD, WIDE BAY, SUNSHINE COAST PHN - October 2019

Why doctors need a GP this Mental Health Month

As health professionals, we assume we know enough about our bodies to sort ourselves out. We often don't have time to make appointments or sit in waiting rooms for investigations when we can organise them for ourselves. And if we need a specialist opinion, we can usually just send a quick text message to a colleague.

The problem is though, if we act as our own doctor, we can suffer as a patient. And if we act as our own general practitioner, then our long-term health can definitely suffer.

Something doctors may forget is that we all have the right to be a patient. We don't have the same duty of care to ourselves, as we do to our patients. We don't have to work 24 hours a day, seven days a week – which is effectively what we do by assuming responsibility for our own medical care.

Doctors' working days are incredibly busy, making it difficult to find time for GP appointments. Ironically, it is this lack of time that makes it so important to have a GP. By visiting a general practice you are recruiting an entire practice team to care for your health. They can worry about when you are due for a blood test or cancer screening test. They can be your advocate in finding the most appropriate specialist care.

General practitioners also have a very broad training and use a holistic approach. Psychosocial factors are key to understanding health concerns. When we act as our own doctor, we can overlook these psychosocial factors, making it easy to brush off mental health symptoms.

Mental health problems have steadily increased in prevalence throughout the world. And doctors are not immune to this increase. There are many pressures that face 21st-century western society, and doctors are particularly exposed. The nature of medical training and employment can often lead to financial stress, relationship breakdown and loneliness.

For every eight patients a GP sees, one of them will be related to mental health.

GPs understand mental health problems as common conditions that can happen to anyone, and work to reduce any stigma.

GPs also understand the importance of privacy, particularly with doctors as patients.

Being a doctor is hard. The work can take its toll on our mental and physical health. Over the years, we have each managed the stress of work in different ways. As a GP, here are my 5 tips:

1. Exercise regularly (ideally outside) – it will obviously improve your physical health, but it also provides a boost to your mood and helps clear your mind.
2. Resist the temptation to reach for alcohol as soon as you get home from work. Try to have at least two alcohol-free days a week.
3. Connect with people – being a doctor can be isolating, which is ironic considering we are with people all day long. Make time to have a coffee with colleagues and friends, join a gym class etc.
4. Invest time in something outside medicine (i.e. a hobby or interest) – we often find our identity is defined by our work as a doctor. This can lead to stress and burnout if not balanced with other outlets.
5. Take leave – most doctors have an impeccable work ethic, which can mean they rarely take their full annual leave quota. Even a long weekend away can be a life-saver between longer holidays.

And, of course, take some time to talk to your GP!

Dr Jon Harper,

Central Queensland, Wide Bay, Sunshine Coast
PHN GPLO



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ALLIED HEALTH PRESCRIBING ON THE HORIZON

Dr Wayne Herdy

Occasionally the AMAQ puts an opinion opportunity out on the net. One that precipitated a veritable avalanche of opinions was the news that “they” are considering giving prescribing rights to physiotherapists in Emergency Departments.

As somebody who has been prescribing doctors’ potions and poisons for half a century, I know that this is about the most hazardous thing that we do. And now the privilege – and risk – is being transposed to a class of health professionals with half of our training.

The proposal at first glance includes paracetamol and ibuprofen – sounds harmless enough, and they are available OTC anyway, so what’s the difference? The proposal mentions a formulary available to allied health prescribers, but we have not seen the formulary yet.



The biggest concern expressed by responders is the possibility that the formulary will include narcotics.

“Outcome measures: The primary outcome will be the prescriber attributed medication error adverse event count. The secondary outcomes will be patient satisfaction and experience and prescribing event count.”

I submit a few quotes. I can cite the sources if needed:

“This issue is this is the thin edge of the wedge, because it is not only physios who have a trial going but Pharmacist, Speech Pathologist.

None of them is prescribing in the true sense of the word; no group is taking ownership of patients in the long term. There is no follow up of patients. The pharmacists are essentially clerking the patients’ drugs.”

Patient satisfaction is a poor outcome to measure and doesn’t always reflect good clinical practice. Obvious example is that if a drug seeker requests Endone and is prescribed it – this would look like a great outcome!”

“This is the thin end of a very large wedge which has come about due to public emergency departments being understaffed with insufficient doctors for the number of patients presenting. Doctors are expensive, so rather than increasing the medical workforce, why not train physios to prescribe, pharmacists to vaccinate, etc. We are on a slippery slope where our role is being devalued, carved up and given to others. It can be seen as ‘protecting turf’, but I view it as preserving and championing best patient care as opposed to ‘cheap’ patient care, which may save dollars in the short term but will be far more costly in the long term due to poorer outcomes and litigation.”

Doctors should be pleased that a recent further attempt by pharmacists to get autonomous prescribing rights has been rebuffed. [OK, this is Federal, and the physiotherapy suggestion is State, so the political ramifications are played by different rules – I got that].

Pharmacists know a whole truckload more about medications and pharmacology than physiotherapists ever will. If pharmacists can’t be given a prescribing role (more than they already have with their OTC dispensing), how can the role be offered to a class that knows so little about biochemistry?

Wayne Herdy.

RAMSAY HEALTH UPDATE - OCTOBER 2019



Thank you for the opportunity to update the SCLMA members on developments at the Noosa, Nambour Selangor and Sunshine Coast University Private Hospitals.

Noosa Hospital

Noosa Hospital is celebrating pink October, highlighting the support services it offers to public and private patients in the Noosa and Gympie regions. Patients of the hospital have access to a comprehensive team which includes Dr Felicity Adams, who is both a fully qualified General Surgeon and a Breast & Endocrine Surgeon. Noosa Hospital's Oncology Unit provides a range of inpatient day services for the treatment of breast cancer and other conditions to both public and private patients. Noosa's Breast Care Nurses are specifically trained to support patients and families through their treatment journey at Noosa Hospital.

Nambour Selangor Private Hospital

The Sunshine Coast's longest established private hospital recently marked a new highlight in its delivery of quality healthcare. All patients leaving Ramsay Hospitals are asked to rate their care and crucially whether they would recommend the facility to family or friends. This gives the hospital a Net Promoter Score between 0 and 100. Nambour Selangor registered an incredible rating of 97 out of a possible 100 in August, a wonderful testament to the quality of care delivered by our staff and doctors.

Sunshine Coast University Private Hospital

The hospital's cardiac and vascular services continue to flourish. Dr Graeme Hart and Robert Tam provided a 365 day cardiothoracic service and are helping to support our growing TAVI programme led by Drs Butterly and Larsen.

SCUPH will showcase its Gynaecology services to GPs at its next GP Education evening to be held in Caloundra at The Rumba Beach Resort on Wednesday 13th November. Doctor Robyn Boston will present on Cervical Screening, Doctor Christopher Price will provide a practical update on gynaecological mesh and Lider Kukurt will cover abnormal uterine bleeding. To register simply visit www.sunshinecoastuniversityprivate.com.au

Specialists keen to start or grow their private practice are encouraged to get in touch with me to discuss opportunities and how Ramsay can help your private services.

Oli Steele

CEO

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BUDERIM PRIVATE HOSPITAL UPDATE - OCTOBER 2019



Dear SCLMA colleagues,

Thank you once again for the opportunity to update you on the Buderim Private Hospital's latest news. Following a successful trial earlier in the year, I am happy to inform you that Hospital in the Home is now a permanent service.

Introducing Hospital in the Home

We recently introduced Hospital in the Home (HITH) to provide our patients with the personalised treatment Buderim Private Hospital is renowned for in the comfort and privacy of their own home. Eligible patients receive treatment from highly qualified nurses, doctors, and allied health staff who work closely alongside the patients' hospital medical team to develop their personalised care plan.

Our Hospital in the Home service is delivered in partnership with Blue Care, a trusted community service provider which is proudly part of the UnitingCare family.

Hospital in the Home is suitable for patients with medical conditions that are safe and appropriate to treat at home. Eligibility is dependent on the treatment requirements of the patient.

HITH Services

Our HITH service provides all types of acute care that would otherwise mean a patient has to remain in hospital. These include IV antibiotics, cannulation, picc lines, other cvads, complex wounds, vac therapy, negative pressure dressings, catheter, INR monitoring, pathology, and much more. The Hospital in the Home team visits the patient daily at home to treat them, monitor their progress and answer any questions they may have about their treatment.

The HITH service usually commences within a few hours, so the patient can go home as soon as the doctor says they are able to and they are not waiting to be referred to a provider. The service is based at the hospital predominantly, which means the HITH team are on hand for referrals and questions.

The referring doctor is updated daily, weekly or within whatever timeframe they request and by whichever means requested, including text, phone, email, photographs of wounds etc. The HITH team can also attend specialist appointments with the patients, if required.

Communication with treating GP

The treating GP is sent an initial fax communication once their patient is first admitted to HITH, letting them know they are under our care. Once the patient's HITH treatment concludes, treating GPs will also receive a full discharge summary to ensure continuity of care is achieved.

Questions or feedback?

If you have any questions or feedback about this service, please contact Kerry Ledwith, HITH Clinical Manager, on 0438 145 068.

Until next month,
Karen Clark, General Manager
(karen.clark@uchealth.com.au, 07 5430 3305)

Do you have patients suffering from

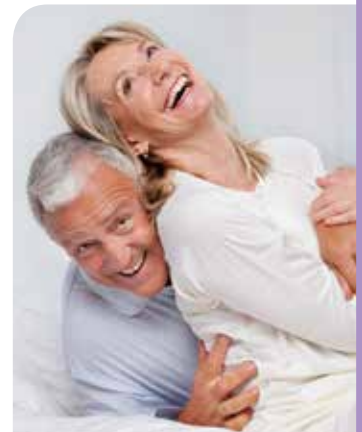
☀ **Stress incontinence** ☀ **Painful intercourse** ☀ **Vaginal irritation**
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**SAVE THE MENISCUS –
 AN UPDATE ON ARTHROSCOPY**

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

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

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

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

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

For appointments contact

Dr Steven Lawrie
 Suite 17, Kawana Private Hospital
 5 Innovation Parkway, Birtinya QLD 4575
 p: 07 5493 3994
 f: 07 5493 3897
 e: sunshineortho@bigpond.com.au www.sunshineortho.com.au
www.sunshineortho.com.au

EDEN PRIVATE HOSPITAL UPDATE - OCTOBER 2019



Thank you for the opportunity to update the SCLMA with the latest from Eden Private Hospital.

NEW Spasticity Clinic

Eden Private Hospital is pleased to announce that we now offer a Spasticity Clinic led by our Senior Rehabilitation Physician Dr David Eckerman.

This clinic treats individuals with either upper or lower limb spasticity as a result of a broad spectrum of neurological conditions such as stroke, cerebral palsy, traumatic brain injury, spinal cord injury, multiple sclerosis, dystonia causing limb contractures and movement disorder problems. Botulinum toxin injections are used in combination with physiotherapy and occupational therapy to improve function.

Mental Health Week

During Mental Health Week, Eden Private Hospital undertook a number of fundraising initiatives to raise money to support a local event promoting mental health in the elderly. These fundraising events included odd socks day and a Rotary BBQ outside the IGA in Cooroy.

The funds raised will go towards supporting Scone Time, which is a great initiative run by volunteers gathering elderly residents from the local community for a monthly get together serving home made scones, tea and coffee. With an average of 130 attendees at each gathering, it helps to combat social isolation and gives guests the opportunity to meet new people and make meaningful connections.

Another local event hosted by Eden Private Hospital for Mental Health Week was an art competition at Cooroy State Primary School for students in years 5 and 6. Students were asked to create some artwork that represented something that made them happy. Judging will be on the 17th October and prizes will be awarded to the winning students. Representatives from Eden Private Hospital will also present to the students about coping strategies, resilience and mindfulness.

For information about Eden Private Hospital's new mental health programs – please visit <https://edenprivate.com.au/mental-health-programs>

Kind Regards

Jo Munday

CEO – Eden Private Hospital

jo.munday@healthecare.com.au

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A true end-to-end solution for multiple brain tumours, now available close to home at Icon Maroochydore.

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Dr Marcel Knesl

Breast, gastrointestinal and genitourinary cancers, and lymphoma.



Dr Myo Min

Head and neck, gastrointestinal, lung and skin cancers.



Dr Dinesh Vignarajah

Genitourinary, gynaecological, central nervous system and breast cancers.



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Real-time script monitoring legislation passes in Queensland

Queensland Health is currently developing a new real time prescription monitoring system (RTPM) to monitor the distribution of S4 and S8 medications across Queensland.

The monitored medicines system requires all prescribers to log in to the RTPM system before prescribing medications; the system provides health professionals with either a green, amber or red light at which point the health professional can decide whether to prescribe or not.

In September, the Medicines and Poisons Bill 2019 (which contains the RTPM) and the TGA Bill 2019 were approved by the Queensland Parliament.

The new Medicines and Poisons Framework will:

- allow more effective monitoring of medicines, poisons and therapeutic goods
- streamline prescribing of medicinal cannabis by enabling non-specialist medical practitioners to prescribe without the need for approval from Queensland Health, eliminating duplication with the Commonwealth approval process
- ensure Queensland Health will better be able to respond to new or emerging substances that are unregulated
- improve Queensland Health's ability to monitor and respond to health risks, and enable the chief executive to make emergency orders, emerging risk declarations, recall orders and public warnings
- provide improved certainty and safety for manufacturers and consumers
- simplify licencing requirements
- improve national uniformity by aligning key terminology with the Commonwealth Poisons Standards.

The Real Time Prescription Monitoring (RTPM) system will go live in the second half of 2020.

Queensland Health has assured AMA Queensland that the RTPM system will be quick and easy to use with minimal interruption to clinical workflow so that patient care remains the key focus.

Emergency department crisis update

AMA Queensland and the Australasian College for Emergency Medicine (ACEM) recently wrote to the Cairns and Hinterland Hospital and Health Service Executive in response to their recent correspondence regarding the concerns we raised on the ongoing capacity issues facing Cairns Hospital, and the inadequate action in resolving the ongoing crisis.

We requested an urgent response outlining the steps that the Hospital Executive intended to take in the immediate and short term to implement the necessary interventions to resolve the crisis in Cairns Hospital. The detailed action plan is to include timeframes for these interventions and the appropriate hospital executive(s) accountable for their implementation.

We will keep members abreast of any significant developments.

Queensland Doctors' Community ***LIVE November 2019***

AMA Queensland has developed a member platform for real-time, online peer-to-peer discussions with your colleagues.

It will be place to discuss and debate issues affecting you, your practice or hospital, patients and the health system, along with other practical advice from our partners and team eg. workplace relations matters, including non-payment of overtime, unfair rostering arrangements and bullying and harassment, general finance, insurance and legal.

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



Queensland Doctors' Community will give you the opportunity to network, collaborate, ask advice, share ideas, discuss challenges, post questions, read and share blogs, connect with other members and much more.

You will be in complete control to drive conversations the way you want to, and tailor your profile to ensure you only receive information relevant to you.

Queensland Doctors' Community will be live in November, so keep an eye out for launch details coming soon.

Upcoming Performance Management seminar – Sunshine Coast

Twice a year our AMA Queensland Senior Industrial Officer, Michelle Cowan, hits the road to bring training closer to your region so you and your team can get some hands on training time in the critical issues around managing in your workplace.

Register for the Sunshine Coast Workshop on 26 November, from 9am-12noon at www.amaq.com.au/events

Michelle has prepared a 3-hour workshop all about performance management and how to make it easier for you to:

- keep your team focused and motivated;
- deal with challenging staff;
- understand the legal effect of performance reviews on employment disputes; and
- execute a fair and reasonable performance management process and monitor the outcomes.

Don't miss the opportunity to get hands on with this important 'people management' topic, expand your knowledge and develop your practical management skills.

2020 Membership Renewal

It's that time of the year...Shortly you will receive *your 2020 membership renewal notice*.

We count on your support, your membership investment directly helps us to help you and your patients – it is also fully tax deductible.

In our commitment to sustainability, we encourage members to opt for paperless renewal and renew online once you receive your notice. If you wish to receive only digital renewal notices, please email the Membership Team at membership@amaq.com.au.

Dr Dilip Dhupelia, President AMA Queensland



Jane Schmitt, CEO AMA Queensland



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Medical Motoring - 2019 Mitsubishi Pajero

Dr Clive Fraser



In 1983 Mitsubishi released in Australia it's yet to be iconic Pajero.

Named after a South American Pampas cat, there were unfortunate Spanish translations of the word "Pajero" which did lead to it being known as a Montero in Spanish speaking markets including the US.

The first version was powered by the same 2.6 litre four cylinder motor found in my 1980 GH Chrysler Sigma and there was also a 2.3 litre turbo charged diesel.

Initially all Pajeros had only a 5 speed manual transmission.

The durability of the Pajero was highlighted by its competitiveness in the Paris to Dakar Rally with a first place in 1985 and 11 more first places thereafter.

Incremental improvements over the next three generations have produced a vehicle with exceptional reliability.

I've heard of Pajeros with 400,000 kilometres on the clock with original running gear which are still going strong.

The current Fourth Generation Pajero has been around since 2006 which does leave it looking a little long in the tooth.

That doesn't seem to bother fans who see its unchanging nature as a positive.

Mitsubishi developed its Super-Select four-wheel drive system with four modes selectable by a lever next to the gear shift.

Firstly there's 2H which disconnects drive from the front axle essentially making the vehicle rear-wheel drive.

Drive train noise is reduced and fuel economy is improved in this mode.

Next there is 4H which connects the front axle via a viscous-coupled centre differential.

Traction improves in this mode which can be selected on-the-fly if needed.

Then there is 4HLc which locks the centre differential and 4LLc which offers low-range for traditional four-wheel drive capability.

My 1990s experience of Super-Select did leave me with that binding feeling which isn't detectable in the current model.

Whilst smaller than a Toyota Land Cruiser and a Nissan Patrol the Mitsubishi Pajero is still rated to tow up to 3,000kg which is exactly why my colleague bought it.

You see he has a tinny that weighs 1,500kg and the Pajero is perfectly suited to pulling that sort of weight up a slippery boat ramp.

When towing Mitsubishi does recommend fourth gear and 4H.

I did notice things went better if I manually down-shifted into third on steep inclines and I do wonder how things would fare with double the load.

That all reminds me that when choosing a towing vehicle it is much better to avoid being at the vehicle's limit particularly as fuel and other gear invariably increases the weight of the load.

Mitsubishi was caught out in 2016 falsifying fuel economy figures.

They admitted they'd be doing this for 25 years.

The Pajero is rated at 9 L/100km on the combined cycle, but I can produce a verified fuel economy figure of 19.3 L/100km with the aforementioned boat under tow on the highway from Hervey Bay to the Sunshine Coast.

Whilst I'd like the rear parking sensors on the GLS I feel that I can manage without the automatic headlights, rain-sensing wipers, sub-woofer, chrome door handles, and electric heated front seats which add \$7,000 to its price.

At \$49,990 the 2019 Pajero GLX is well-priced, robust and competent.

If you shop around you can expect to take at least another \$7,000 off that price by buying a demo with very few kilometres.

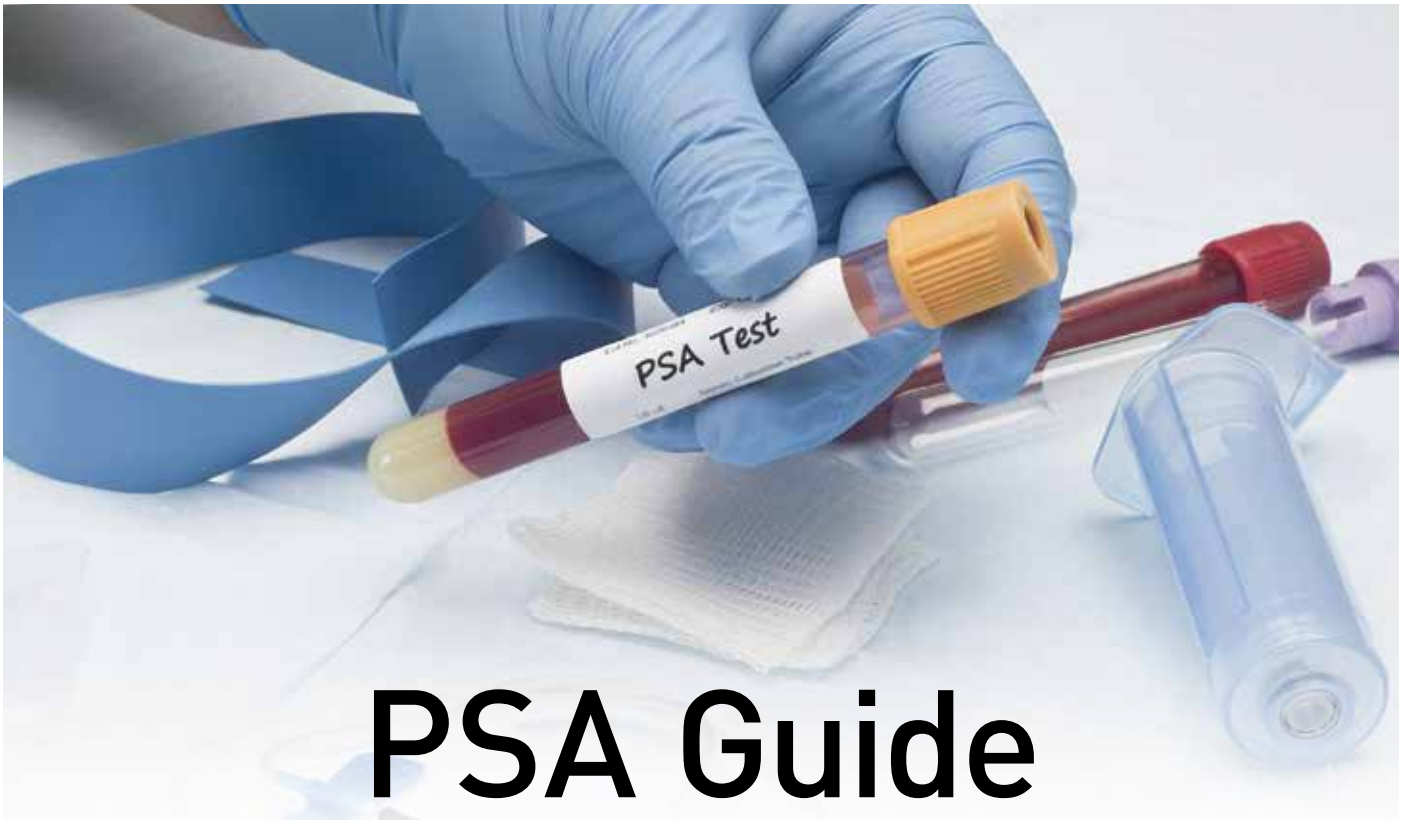
I think the Pajero will be around for a while.

Safe Motoring,

Doctor Clive Fraser.

doctorclivefraser@hotmail.com





PSA Guide

Early detection saves lives

PSA >3 is a red flag

(>2 if positive Family Hx, BRCA)

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

Refer if:

Second PSA is still >3 (2)

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

Refer to:

Dr. Tony Gianduzzo or A/Prof. Troy Gianduzzo



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DIVORCE, SEPARATION & BREAK-UP ASSISTANCE

WHEN *love* GOES WRONG



Going through separation and divorce is stressful and can cost a small fortune. Finally, there is a dedicated company and a small group of lawyers offering a better solution. Acting in cooperation with professional, independent law firms, Act4Tomorrow provides you with a fully supported separation service – and all for a set fee.

The company is the dream of Alvia Turney who, after her own turbulent and exorbitantly expensive divorce, felt that the system didn't work effectively, created animosity and cost unnecessary financial hardship. Determined to create a new platform to help others avoid the same experience, the one-stop shop approach helps minimise the costs and emotional fall-out suffered by those going through a break-up and divorce.

Alvia believes that half the battle in coping with the experience is being kept informed and information of the system, what it will cost and being able to communicate effectively with your now ex-partner. The result is **Act4Tomorrow separation specialists**.

Experts in their field, the team at Act4Tomorrow provide a **one-stop shop** on how to break-up, finances, refinance, support during legal appointments, brainstorming alternative ways to resolve issues which arise until you have a settlement. With them handling all the back and forth day-to-day messy stuff, the emotional toll is lessened, it helps individuals feel in control and empowered to make sensible decisions and move out of the separation months faster than the traditional lawyer verses lawyer approach.

And here's the clever part, Act4Tomorrow clients have access to **like-minded legal experts with years of experience** who do not want to escalate your matter to litigation and who provide costs up front so you know where you stand **keeping your legal spend to a minimum**.

"Establishing my business has not been an easy path. In the beginning, I wasn't well received by some family lawyers but I was determined not to give up," says Alvia. "Now that three independent law firms and ourselves have established a positive working platform, our clients are certainly benefiting. We all work together for the best interest of the clients."



Tracy Price, a Senior Associate Solicitor specialising in family law with **Griffiths Parry Lawyers + Notary** states, "I quickly discovered that the Act4Tomorrow organisation offered services that filled a unique gap in the family law industry."

Louise Ward, Director at **LAW Legal Practice** agrees. "It is a pleasure to work with an effective team to respectfully deliver out of court settlements and valuable support for individuals and couples. It's almost unheard of in this industry."



Rob Hollis is Senior Family Law Solicitor & Associate Director at **Greenhalgh Pickard Solicitors & Accountants**. Rob is the male family law solicitor in the group and ideally placed to assist those clients who felt there was a female bias 'in the system' or who would prefer to deal with a male. "Court is, in my view, the last resort in family law matters. I'm pleased to participate in appropriate out of court structures that promote settlement. If everybody involved, lawyers and parties alike, are committed to an 'out of court' settlement, it should be possible."

Act4Tomorrow offers a free initial consultation to new clients. Your situation is assessed by people who genuinely care to move you out of a separation and divorce quickly.

If you or someone you know could benefit from this worthwhile service contact Act4Tomorrow today – you have nothing to lose and everything to gain.



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Christmas brings together families and important decisions



As we approach the end of another year many people will be looking forward to the festive season and the chance to slow down and catch up with family, particularly elderly parents. Busy lives and distant homes can make it easy to feel out of touch. Sadly, at this time of year adult children may also begin to notice changes in their ageing parents.

It's distressing and worrying to accept that your parents who were once vital may soon need help to manage their day-to-day needs. Hard decisions may need to be made and many children and parents will need professional guidance to convert the mountain of data on aged care into meaningful and relevant information and ultimately into appropriate decisions.

It might be time for a family meeting

If you have elderly parents, this year's planning should include family discussions to help parents plan ahead for the help they may need. A family meeting is often an essential step in planning for aged care and may help to minimise conflicts within your family. Emotional conflicts between family members can make the transition to care more distressing for an elderly parent and have the potential to rip families apart. If you are in fact that elderly parent, Christmas time provides you an opportunity to discuss your care needs with your adult children. Make yourself heard. Have these discussions earlier whilst you are still able to maintain your control and independence, to anticipate how your need for care may increase. Christmas time might be one of the few opportunities during the busy year for discussions with all those people who are important to you.

If thought of this discussion fills you with dread, as an Accredited Aged Care Professional I can assist with arranging and running a family meeting to help your family see the big picture more objectively. I can provide a neutral voice in what can be an overwhelmingly emotional discussion, so you can consider the best options for your parents' care/ your care, security and happiness.

The earlier you take this step, the better. Planning ahead ensures that parents are fully involved in the decision-making and removes some of the stress from other family members. With a well organised plan in place, your family can respond more quickly and effectively when an event requiring a move to aged care occurs.

If you have any questions please call me to discuss. 07 5437 9900

Kelly Brady – Poole & Partners Investment Services Pty Ltd



Australian Government
Department of Health

Upcoming changes to MBS items

Changes to colonoscopy services

- **What?** The changes include a restructuring of items for colonoscopy services, including the addition of new items, deletion of existing items, and minor consequential amendments to existing items and explanatory notes.
- **Why?** MBS items for colonoscopy services will be changing to facilitate provision of effective, evidence-based colonoscopy services; reduce low-value care; and improve access to MBS-funded colonoscopy services for those who need it.
- **Who?** These changes are relevant for all specialists involved in the management of colonoscopy services, consumers claiming these services, and private health insurers.
- **When?** The changes to colonoscopy services will be effective from 1 November 2019. These changes are subject to legislative process. Further details including full item descriptors will be released as soon as the changes to colonoscopy services are confirmed.



Where can I find more information?

Further information on these changes will be provided as the details are confirmed.

To find out more or subscribe for updates visit www.mbsonline.gov.au.



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- Platelet rich plasma injections
- Spinal medial branch injection
- Lower extremity nerve blocks (saphenous/sural/popliteal/posterior tibial nerves)
- Shoulder barbotage (needling of shoulder calcification)
- Joint aspirations
- Other joint steroid injections
- Greater occipital nerve injections

Pain Specialists:

Dr. Peter Georgius

MBBS BmedSc
FFPMANZCA FAFRM

Dr Paul Frank

M.B.B.S. FANZCA
FFPMANZCA

Dr Scott Masters

MBBS FRACGP FAFMM
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1. **The Union Station, Toronto:** This is where we embark on our magical odyssey through Canada's treasure-troves. Built in the early 20th century in the luxurious Beau Arts-style, this station and its imposing hallway is an architectural wonder.
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3. **Jasper:** The largest National Park of the Canadian Rockies, **Jasper National Park** – a UNESCO World Heritage Site – features acres of scenic mountain wilderness. Famous for a great backcountry trail network, and the Columbia Icefields, Jasper is home to the rarest of wildlife including, moose, wolves, caribou and grizzly bears. The enchanting **Pyramid Lake** and **Spirit Island** are other must-see sites.
4. **Banff National Park:** It is undeniably one of the most breath-taking places on Earth. Popular for the emerald waters of **Lake Louise**, glistening glaciers and waterfalls, the **Sunshine Meadows**, and the **Icefields Parkway**, the **Banff National Park** are some of the go-to places for awe-inspiring sightseeing and tremendous recreational activities.
5. **Waterton Lakes National Park:** One of Canada's famous mountain parks, Waterton Lakes National Park is where you can be one with nature amidst beautiful alpine meadows, prairies of wheat and grass, soaring mountain peaks, and an assortment of flora and fauna.
6. **Golden, British Columbia:** Nestled between the Purcell Mountains and the Canadian Rockies, Golden is a low-key place blessed with abundant beauty. Apart from sightseeing, it offers access to some world-class restaurants, as well as tons of adventurous activities like hiking, snowmobiling, golfing, skiing, snowboarding, and by the end of the day, soul-revitalising relaxation.

What have we planned for you?

A comprehensive itinerary has been planned to let you make the most of the charm and grandeur of the Canadian Rockies and everything it has to offer

- *Trip to the Niagara Falls, with an opportunity to see both the American and Canadian sides of the falls on the "Maid of the Mist" boat cruise*
- *A guided Trans-Canada Rail journey from Toronto, past the gorgeous sceneries, enthralling Rockies, majestic waterfalls, serene lakes, and much more*
- *Don't miss out on the spectacular view of zillions of beautiful flowers and waterfalls at the Butchart Gardens.*
- *Tour of Jasper, Pyramid Lake, Jasper Gondola, and optional cruise on the Maligne Lake*
- *Guided white water rafting trips in the Jasper National Park and the Canadian Rockies*
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Spine Surgeon, Orthopaedic Surgeon

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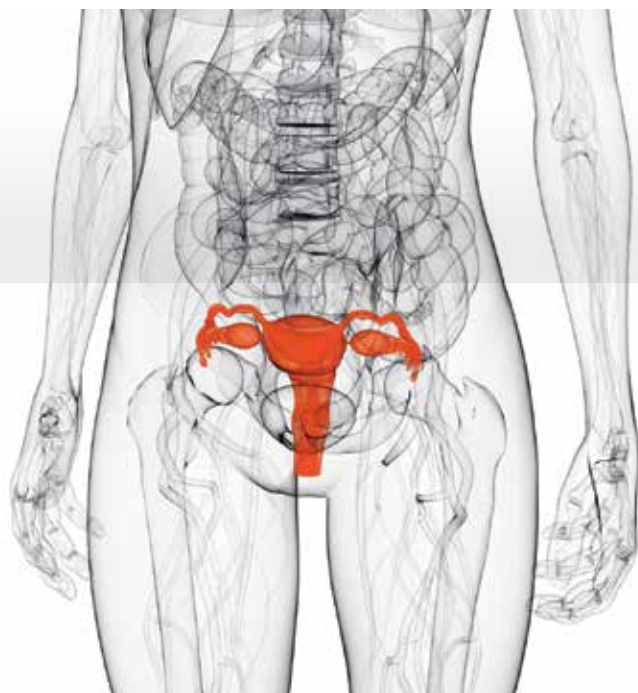
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GP Education

GP gynaecology

*CST, pelvic flaws,
heavy menstrual bleeding*



PROGRAM

6.00pm Registrations, welcome, dinner

6.30pm Presentations and discussions

Cervical Screening Testing in Australia - Where are we now?

Dr Robyn Boston, *Gynaecologist*

Water Works and Mesh debacle,

Dr Christopher Price, *Gynaecologist*

Abnormal uterine bleeding (including heavy menstrual bleeding)

Dr Lider Kukurt, *Gynaecologist*

8.30pm Evaluation and close

LEARNING OUTCOMES

- Implement current cervical screening guidelines
- Assess and manage pelvic floor problems
- Develop a care path for women with abnormal uterine bleeding

WHEN

Wednesday, 13 November, 2019

WHERE

Rumba Beach Resort,
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REGISTER BY

Wednesday, 6 November, 2019

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It's easy to register

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- Stress Echocardiogram
- Dobutamine Stress Echocardiogram
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- Left Atrial Appendage Occlusion (LAAO)

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DR TIM NATHAN

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

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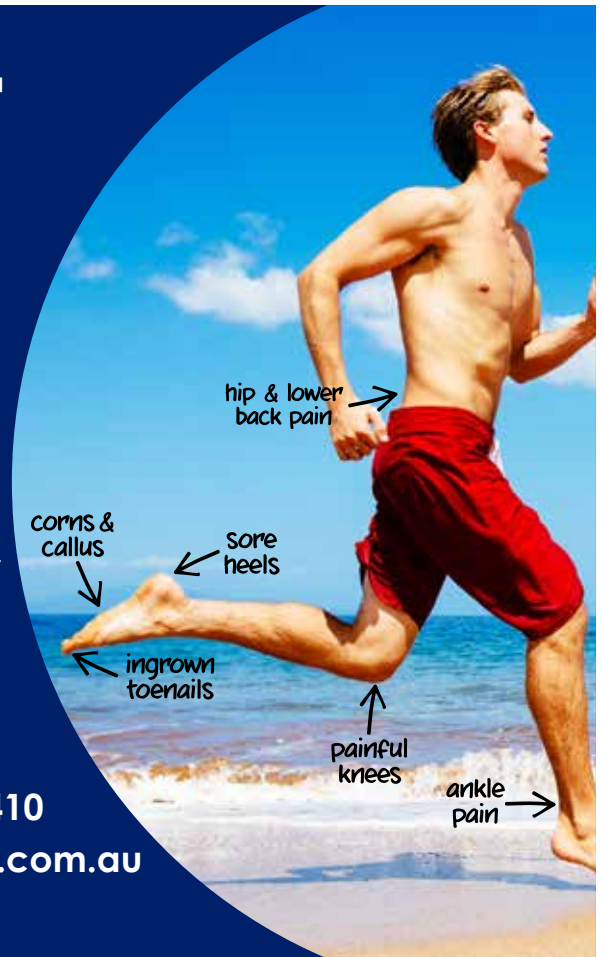
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Noosa Hospital's Oncology Unit provides a range of inpatient day services for the treatment of breast cancer and other conditions to both public and private patients.

Noosa's Breast Care Nurses are specifically trained to support patients and families through their treatment journey at Noosa Hospital.



noosahospital.com.au

Noosa Hospital
Part of Ramsay Health Care

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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 **Sunshine Coast University
Private Hospital**
Part of Ramsay Health Care

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: 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)		PLEASE COMPLETE:
Full-time ordinary members - GP and Specialist		\$ 110		Your Monthly Invitation?
Doctor spouse of full-time ordinary member		\$ 55		By Email?
Absentee or non-resident doctors		\$ 55		By Courier?
Part-time ordinary members (less than 10 hours per week)		\$ 55		By Post?
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?
Patron and honorary members		Free		By Post?
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.				

The Sunshine Coast Local Medical Association has Public Liability Insurance

**SUNSHINE COAST LOCAL MEDICAL ASSOCIATION Inc.
MANAGEMENT COMMITTEE MEETING
THURSDAY 29 AUGUST 2019
Maroochydore Surf Club Board Room
MINUTES
Accepted at Committee Meeting 19 SEPTEMBER 2019**

Attendance: Drs Roger Faint, Wayne Herdy, Mark de Wet, Peter Ruscoe, Scott Masters, Alicia Lorenz, Jonathan Last, John Evans, Kirsten Hoyle, Fabio Brecciaroli, Jack Wilkinson (student representative). Observer Jo Bourke (Secretariat)

Apologies: Drs Jon Harper, Tau Boga, Mason Stevenson, Grant Eddie, Shrey Singh.

Minutes of last meeting: 25 July 2019 (To be accepted).
Moved: Dr Peter Ruscoe. Seconded: Dr Roger Faint.
Accepted.

Business arising from Minutes: Nil

President's Report: Dr Roger Faint

Annual General Meeting:

- Tonight is the AGM. We will be welcoming a few new members and long serving members will have retired. In advance I would like to very much thank Drs Mark De Wet (Secretary) and Wayne Hardy (Vice President & AMAQ Councillor Representative) for their hard work and welcome support over the last four years. Their wealth of experience has made my work as President much more fruitful and enjoyable. The SCLMA as a whole will miss them. I am enjoying my work as President and will continue for at least one more year and presume that someone younger will challenge me for the position in the future, which of course would be healthy for any organisation. I thank all members and the committee in advance for your support.

Gala Cocktail Party:

- The first Gala Cocktail Party held at Peppers Resort, Noosa, was an impressive success for a significant variety of reasons including having the involvement of the very professional 'Wishlist'. It was a very satisfying and enlightening experience to associate with CEO, Lisa Rowe, and the Events & Fundraising Manager, Lisa Wilson. They both worked on the night and organised an event that was intimate and thoroughly enjoyable for the medical profession. I anticipate a successful and ongoing long term yearly event. A heart felt thank you.
- The SCLMA looks to have raised almost \$15000 on the night which will go towards supporting vulnerable children who are fostered out on leaving Hospital. I am very, no extremely, proud of the Sunshine Coast Medical Profession and associated friends that have contributed in this way to the Sunshine Coast Community. You can all be very proud also.
- I would like to thank Dr Siavash Es'haghi for his inspiring speech regarding his escape from IRAQ, the Band M7 and those who donated towards the 'Doctors Wine Dozen'. I am hoping the 'Doctors Wine Dozen' will be a yearly custom.

*Motion: Roger moved, seconded Kirsten that the SCLMA donate \$2,000 to Wishlist.
Carried unanimously.*

Newsletter Editorial:

- In her article last month, Dr Kirsten Hoyle, our wise Newsletter Editor, pre-empted this week's news that Private Health Insurance membership numbers were dropping significantly. The proportion of the population who have Basic Hospital Cover is now 44.2% of the general population, the lowest level since 2007, with 27,000 people dropping their cover since March this year. Anecdotally Obstetricians and Colorectal Surgeons are noting significant alterations to their waiting lists and a crisis for private medicine is obviously approaching. I encourage you all to read Kirsten's article from last month, which summarises this issue succinctly.

Vice President's Report : Dr Wayne Herdy - Nil

Secretary's Report: Dr Mark de Wet

Correspondence In:

- 5/8/19 – SCHHS - re Master Clinical Service Plan
- 13/8/19 – SCHHS – re Master Clinical Service Plan
- 15/8/19 – Pacific Law - re assessments elderly patients
- 21/8/19 – Andrew Deegenars – re Releaf Cannabis Clinics
- 18/8/19 – Dilip Duphelia – re concern from Dr Bryan Palmer.

Correspondence Out:

- 5/8/19 – RF to Karen Clark, GM, Buderim Private Hospital
- 5/8/19 – RF to Dr Peta Higgs re Internal Referrals
- 6/8/19 – RF to Dilip Duphelia re concern from Dr Bryan Palmer
- 17/8/19 – RF to Andrew Deegenars re Releaf Cannabis Clinics
- 29/8/19 – RF to Hilary Somerville

Business arising from Correspondence:

- SCHHS - re Master Clinical Service Plan – either Dr John Evans or Dr Roger Faint to attend. Waiting to receive confirmation of dates.
- Pacific Law – Roger will progress
- Internal Referrals – Discussion re this, difficult for patients when they need multi-disciplinary care.

Treasurer's Report : Dr Peter Ruscoe.

(a) Accounts to be paid:

- Office National – Account June 2019
- Telstra – (part account August 2019)

**SUNSHINE COAST LOCAL MEDICAL ASSOCIATION Inc.
MANAGEMENT COMMITTEE MEETING
THURSDAY 29 AUGUST 2019
MINUTES**

Accepted at Committee Meeting 29 SEPTEMBER 2019

- Snap Printing – Newsletter July 2019.
- Australia Post – Account July 2019
- Snap Printing – Gala function flyers
- Carol Hawkins – Assist Sec (July 2019)
- Chris Bourke – Website Uploads
- Jo Bourke – Adobe Creative Cloud Sub July 2019
- Jo Bourke – Reimbursements – sub committee meeting
- Jo Bourke – Newsletter August 2019
- Jo Bourke – Secretariat August 2019

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

(b) Membership Report: Nil

Meetings Convenor Report: Dr Scott Masters

- Gala Cocktail Party – Summary on its way
- A few complaints re loudness of Band – debatable
- Discussion re options between venue with overnight stay available or not.
- Sub-committee to be continued – to meet with Lisa Rowe and Lisa Wilson for debrief.

Hospital Liaison Report: Dr Shrey Singh – Apology

PHN Report: Dr Jon Harper – Apology.

General Business:

- Newsletter – Compliant re Divorce Specialist advertisement.
- Discussion resulted with most in favour of advert. To be included for three months, to be monitored with regard to any complaints.

Meeting Close 7.00pm

Next meeting Thursday 19 September 2019.

- Dr James Moir and Dr Precious Lusumbami
- Sponsor: Qld Fertility Group

www.sclma.com.au

Have you had a look at our website lately?

Are your details correct in the Directory ?

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.



AMA QUEENSLAND ANNUAL CONFERENCE
20 - 26 SEPTEMBER 2020

LISBON
Portugal

Doctors, practice managers, registered nurses and other medical industry professionals from around Australia are invited to attend the *Annual AMA Queensland Conference in Lisbon, Portugal from 20-26 September 2020.*

The program will feature high-profile International and Australian speakers on a range of medical leadership and clinical topics in an exciting, and unique location, RACGP points will be on offer.

To find out more about the conference program or to register, please contact:

Neil Mackintosh,
Conference Organiser
P: (07) 3872 2222 or
E: n.mackintosh@amaq.com.au

Download a
conference
brochure from the
events calendar at
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The future of CT has arrived

Noosa Radiology is pleased to announce the arrival of a new state of the art CT Scanner. This investment in patient care is the first of its kind on the Sunshine Coast.

The Siemens® SOMATOM go.Top incorporates the latest in medical imaging technology. Scans can now be completed faster than ever before with reduced radiation doses, improved image quality and new clinical applications.

Dual Energy TwinBeam

TwinBeam Dual Energy enables the acquisition of high and low energy spectra, delivering improved diagnostic quality without an increase in x-ray dose. Applications include Oncology, Gout, Renal Stones and CT Angiography.

CT Coronary Angiography - CTCA

CTCA provides, crisp, clean images of the heart and coronary arteries. This non-invasive imaging allows early detection and assessment of disease which leads to myocardial infarction (heart attack).

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Ultra Low Dose Sn Filter

The state of the art Sn filter allows us to perform some CT scans for the same dose as plain x-rays. Extremities, Sinus, Dentascans, Chest, Ribs, Renal Stones and Skeletal Surveys can all be done with ultra low dose Sn filter imaging.

Tablet Control

Hand held control via a tablet allows our technicians to manage procedures from the bedside for patient comfort.



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M: 0468 488 444
E: reception@coastalgeneralsurgeons.com.au
www.coastalgeneralsurgeons.com.au
October 2019

VACCINE FRIDGE WANTED

Does anyone have a small vaccine fridge they no longer need? North Coast Women's Health is a Not for Profit women's GP practice at Mooloolaba. We see women for STI checks. IUCD devices, pregnancies and other gynae/ reproductive issues. We've been operating for 20 years but with the medicare freeze, we're struggling to keep the doors open. We've now discovered we have to replace our domestic fridge with a purpose built vaccine fridge. Would anyone be able to help us out with this? If you can help, please contact Wendy Stephenson at womenshealthcare@bigpond.com or phone 0416 938 040.
October 2019

LAKEVIEW IMAGING WARANA CLOSURE

Lakeview Imaging Warana will cease operations on Friday November 1. The Bone Densitometry machine will be relocated to Pacific Radiology Caloundra. Lakeview Imaging Maroochydore (co-located with Pacific Radiology) will continue to offer all general nuclear medicine services 5 days/ week, as well as stress ECGs and holter monitoring. We would like to thank our referrers for all your support over the past 14 years, and hope to continue to offer a high quality service from our rooms at Maroochydore. If you require further information please contact our Office Manager Anne-Marie or Dr Andrew Paszkowski on 54931649
October 2019

EXPERIENCED RADIOLOGY/ULTRASOUND RECEPTIONIST REQUIRED - BUDERIM

We are seeking an experienced Radiology/Ultrasound Receptionist or Practice Manager to help launch our new centre located in Buderim. The role will be a senior position and will initially provide guidance and leadership to the business set up. Ongoing the role will evolve into a variety of responsibilities relating to management, patients, accounts/billings and marketing functions. To apply, please submit your resume and cover letter addressing your experience in radiology and marketing to info@sneakpeekultrasounds.com.au.
October 2019

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October 2019

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

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Tewantin Specialist Centre- sessional suites available. Good opportunity for cross referral with current specialists in General/ Bariatric/ Colorectal/ Orthopaedic surgeons; Gastroenterologist; Oncologist; Endocrinologist; allied health. Maroochydore Specialist Centre- sessional suites available. Brand new rooms opened recently with current specialists in General/ Bariatric/ Upper GI and Colorectal surgery; allied health. Contact the Practice Manager for more information. Michelle Underwood M: 0428 411 033 or E: practicemanager@drgarthmcleod.com.au
October 2019

LANDSBOROUGH & MOOLOOLAH FT/PT VR GP

Required for a busy doctor owned, growing general practice with two sites in the Sunshine Coast Hinterland. Accredited & GP owned. Large patient base with continuous new patient registration. Fully computerised (Best Practice) Mixed Billing, No On-Call, DWS available. Practice Nurse support, including CDM. 65% of billings. Pathology, Pharmacy & Physiotherapy facilities adjacent. Great working environment & family friendly. E: lmc@lmcmed.com.au
September 2019

SEEKING FULL TIME / PART TIME GP

Immediate start to replace a relocating doctor. GP-owned and operated mixed billing family practice established for 27 years on the Sunshine Coast. Family friendly hours 8.00 am – 6.00 pm Monday to Friday with no after hours or weekends. Fully computerised practice with excellent support, reception and nursing staff. Flexible hours and competitive remuneration. For more information please do not hesitate to contact Penny on 07 5476 011, alternatively send you CV to: practicemanager@annstfamilymedicine.com.au. **HAVE A HOLIDAY AND GET PAID!** Sunshine Coast 2bed, 2bath modern furnished accom near beach at Kawana. Min 3 months with option to extend. Practice in Nambour. Long established, mixed billing, to replace departing Doctor. High gross, High Percentage. Please contact Penny 07 5476 0111. practicemanager@annstfamilymedicine.com.au.
August 2019

SUNSHINE COAST MAROOCHYDORE PT/VR GP

Highly respected practice with long established patient base. Very busy 3 Doctor general practice looking to reduce their hours. Excellent location close to the new proposed CBD of Maroochydore, Not far from the new University hospital and Buderim private hospital. Central to Specialist facilities; Best Practice software. Mixed billing 8am-5pm; Excellent RN and admin assistance. P: 5443 6777 E: admin@armpdoc.com.au
August 2019

CLASSIFIEDS GUIDELINES FOR 2019

- Classifieds are FREE for current SCLMA members
- Classifieds have a placement life of 3 newsletters
- Cost for non-members is \$100 + gst
- Maximum word count 100 ideally.

Queries: Contact Jo 0407 037 112

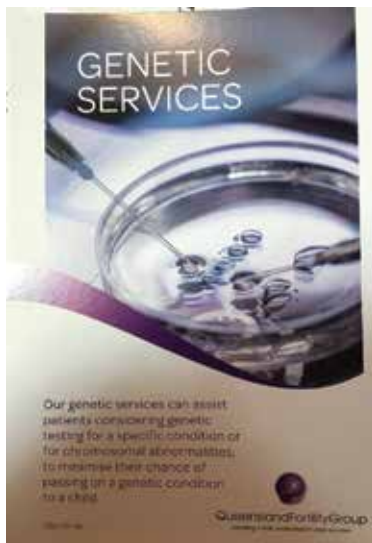
SCLMA Clinical Meeting - 19 September 2019
 Maroochydore Surf Club Private Function Room
 Dr Precious Lusumbami, *"Do gynae conditions always cause infertility?"*
 Dr James Moir, *"The genetics revolution"*
 Sponsor: Queensland Fertility Group.



Presenters: Dr Precious Lusumbami and Dr James Moir
 with Sue Wordsworth from Queensland Fertility Group



Drs Raewyn James, Val Taylor, Robyn Hewlan,
 Marlene Clout and Trish Pease.



Lenka Stratford-Smith
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Sunshine Coast Local Medical Association Inc

PO Box 549 Cotton Tree QLD 4558



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