



SCLMA President's Message

Dr Roger Faint

The year is almost done with Christmas and New Year thankfully approaching. I have been challenged and enjoyed the 'baptism by fire' of the presidency. The committee is strong, supportive and with a wealth of experience from across the broad spectrum of medical specialties from both public and private spheres. The committee and I believe representing the local medical profession is paramount however, more importantly perhaps, it believes in being an advocate for patient care. Dr Russell Stitz, previous AMA Queensland President, (to name one of his many important previous esteemed positions) mentioned to me and my JCU medical student recently that government was mediocre at health care decisions and that, as a result, the medical fraternity needed to continue advocating for patients. I agree and believe this is one of the medical fraternities' strengths.

The SCLMA, whilst not strongly medico-political, supports the education of doctors and health of patients through its monthly education meeting, forming personal bonds with local health and business authorities and supporting local health issues such as a new medical school. These bonds result in a coordinated approach to various health issues and make the Sunshine Coast community stronger.

I would like to take a paragraph to thank our wise and busy secretariat Jo Bourke who is a 'brick wall in a storm' and works with the motivation and a dedication that few could imagine, particularly for a woman of her decade (sorry Jo!). Carol who is a delight assists Jo on our monthly meeting nights and very ably steps in for Jo when necessary. Without such support the SCLMA, and particularly the President, could not function at such a high level. Thank you.

I would like to thank our generous advertisers including specialists, pharmaceutical companies and medical equipment companies without whom the magazine and monthly meetings would not be viable. I would also like to thank the most important and very relevant contributions from Kevin Hegarty, CEO Sunshine Coast Health Services and Pattie Hudson, CEO PHN Country to Coast. To have such regular contributions from these important authorities is unique.

Of course Dr Clive Fraser and Dr Michael Ryan must also be thanked for their entertaining regular columns along with the Poole Group with timely business advice. The magazine is of a high standard (as commented by Dr Scott Kitchener from Griffith University recently) and will continue to be as long as it is relevant and financially supported.



Dr Scott Masters performs an impressive role as meetings' coordinator and apparently appeals highly to the younger generation of doctors who attend. I thank you all.

A brief word on advertising in our newsletter. The monthly magazine, with the critical eye of our very accomplished editor, Dr Kirsten Hoyle, endeavours to comply with Section 33 of the National Law and Guidelines. We take no responsibility for the accuracy of advertisements (within reason) and this is stated in the Disclaimer published in each newsletter. If members are not happy, then it is their prerogative to complain to the appropriate body.

As Di Minuskin might say... my family and I are off to the UK and Italy for the Christmas holidays for the price of a small car. We will be having Hogmanay with friends in Scotland and presumably sampling a whisky or two. While there I will be thinking of the SCLMA and its opportunities for 2017.

Please all keep well

Dr Roger K Faint

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



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**FEBRUARY
2017 NLETTER
Deadline Date
will be FRIDAY
3rd FEBRUARY
2017**

The Editor would like the newsletter to reach all readers in the 3rd week of each month. So ... **ALL** reporters and advertisers - please help us achieve this challenge!

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

Contact Jo: 5479 3979

Mobile: 0407 037 112

Email: jobo@squirrel.com.au

Fax: 5479 3995

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

ARE YOU A MEMBER?

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

www.sclma.com.au.

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

Enquiries: Jo Ph: 5479 3979 or 0407 037 112

Email: jobo@squirrel.com.au

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

Directory form available on the website.



Editor's Column

It is ironic that we often resist change yet desire for things to be better.

Some may think me churlish to question how we celebrate Christmas at this time of year but I wish to proffer some thoughts for discourse.



Recently the Victorian government issued the Inclusive Language Guide, discouraging people from using "heteronormative" terms such as "husband" and "wife". Instead, workers are being schooled in adopting gender inclusive pronouns such as "zie" and "hir" (I kid you not). Political correctness seems to be encroaching upon all facets of our existence - even Christmas. Christmas cards and carol singing are being banned in public schools. "Merry Christmas" greetings are being replaced by "Happy Holidays" emblazoned on cards and banners. Has political correctness gone too far?

I point out that Christmas began its diversion from the story of Jesus around the 4th century AD with a Greek bishop named St Nicholas who had a penchant for gift giving - and became the role model for modern day Santa Claus. The festival of Christmas continues to evolve. So in a free and secular society such as ours, should we not be free to celebrate Christmas in any manner we choose? I do not suggest we should bury or deny our Judeo-Christian heritage but I do not embrace a pantheistic belief. Surely the message at this time of year, as it should be January through November also, is to transcend God and do unto others...

Even the Grinch realised he hadn't stopped Christmas coming. He puzzled, "till his puzzler was sore. Then the Grinch thought of something he hadn't before! Maybe Christmas doesn't come from a store. Maybe Christmas...perhaps...means a little bit more!" And in the end, the Grinch himself carved the roast beast(halal or not)!

Wishing our readership happy reading!

If this proves too much dissension, perhaps next year I will stick with the less controversial Hogmanay as our President, Roger, has!

*Cheers
Kirsten*

kirsten@hoyleurology.com.au

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SCLMA CLINICAL MEETINGS
6.30pm for 7pm (over by 9pm)
BOOKINGS FOR 2017**THURSDAY 23 FEBRUARY**

Speaker: Dr Christina Sander,
Dermatologist (TBC)

THURSDAY 23 MARCH

Speaker: Dr Stuart Collins,
Urologist (TBC)

THURSDAY 27 APRIL

Speaker: Dr Jenny Grew
Topic: 'Changes to the Cervical Screening Program'

Sponsor: QML Pathology
Venue: Maroochydore Surf Club

ENQUIRIES: Jo Bourke

Ph: 5479 3979 (M) 0407 037 112

Email: jobo@squirrel.com.au

Clinical meetings are for current SCLMA members. New members are welcome to join on the night. Membership Applications are available at each meeting, in the newsletter and the SCLMA website.

Website: www.sclma.com.au

If you wish to present at a Clinical Meeting in 2017, please contact Jo Bourke (details above).

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Health Service Link - December 2016

Introduction – Clinical Prioritisation Criteria

An area of ongoing importance and challenge for the Hospital and Health Service is the management of the ever increasing volume of referrals for our Specialist Outpatient Clinics.

Our specialist outpatient throughput continues to increase however the volume of referrals continues to exceed our capacity growth. Whilst it would be easy to rationalise the situation in the context that there will be a very significant boost in outpatients once the Sunshine Coast University Hospital (SCUH) opens and is fully commissioned, that is not our position nor should it be, given the imperative of patient care.

Just to illustrate the growth in demand, this financial year we expect a 12% increase in orthopaedic, a 19% increase in ophthalmology and a 26% increase in urology referrals.

As well as the planned increase in capacity that SCUH will bring, one of the many initiatives that we are introducing is the state-wide adoption of Clinical Prioritisation Criteria (CPC). Through the utilisation of the Health Pathways software, the CPCs are already being implemented locally. This has only been possible through the extensive face to face GP engagement that has already occurred and will continue. This will see the ambitious target of 100 localised pathways implemented by Christmas.

The ongoing development of the CPCs will see 200 in place by 30 June 2017.

I am keen to publicly acknowledge the great work Dr Sandra Peters has led within the Hospital and Health Service and the strong partnership we have with the PHN.

Innovation recognised

The 2016 Premier's Awards for Excellence were announced at a ceremony on the evening of Tuesday 22 November.



Until this year, the Hospital and Health Service has not had any nominations for these awards. We are very pleased that our first nomination, the Geriatric Emergency Department (ED) Innovation (GEDI), was announced as the winner of the Customer Focus category. In announcing the award the judges highlighted GEDI was chosen in recognition of reduced emergency department and hospital length of stay, decreased admission and representation rates, increased staff and patient satisfaction, increased awareness of frail older persons' unique needs, and creating a culture change around the EDs approach to frail, older persons.

In further recognition of the innovation that is occurring with the Hospital and Health Service, the SPOT-ON a hospital avoidance collaborative initiative between the SCHHS, the PHN, Silverchain and the University of the Sunshine Coast, was shortlisted in the Queensland Health and Department of Health Awards for Excellence.

Season's Greetings

On behalf of the Executive Leadership Team and all staff of the Hospital and Health Service, I extend best wishes for the festive season and for a safe and healthy 2017. Of course, for the Hospital and Health Service 2017 will be the year that SCUH becomes a reality.

Regards

Kev Hegarty

Kevin.Hegarty@health.qld.gov.au

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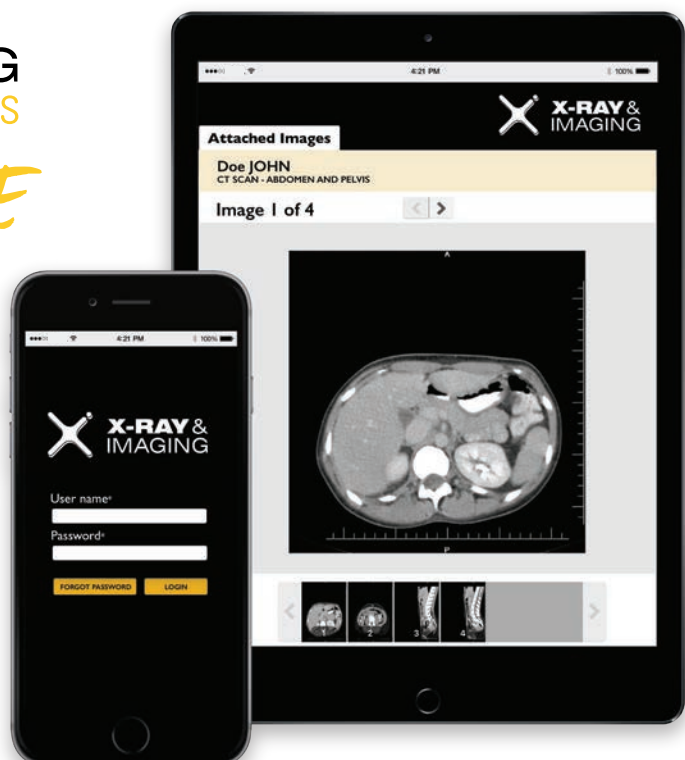
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PHN partners with the Sunshine Coast Hospital and Health Service for smarter referrals in 2017

The New Year will see Central Queensland, Wide Bay, Sunshine Coast PHN working closely with the Sunshine Coast Hospital and Health Service to implement a smart electronic referral system for specialist outpatient referrals from General Practice.

The BPAC SeNT referral system will allow general practitioners to generate an automated eReferral; in place of the 'letter writing' system currently in use. Best Practice Advocacy Centre Inc. (BPAC Inc.) is a not for profit organisation based in New Zealand with an independent Clinical Advisory Group and ethics committee.

BPAC has worked with PHNs nationally to design the innovative SeNT (Secure Electronic Network Transfer) system - a fully automated, integrated template designed to be populated automatically from a general practice's current medical record software. The PHN and SCHHS will work collaboratively to test, roll-out and train health professionals on the Sunshine Coast to use the BPAC SeNT system.

The new automated system will improve hospital triage processes and ensure patients are directed to the most clinically appropriate service in a timely manner. BPAC SeNT is also designed specifically to support general practice in the management of a patient's health through screening, risk assessment, management and referral, referred to as a Best Practice Decision Support Tool.

The system aims to improve the current technology and communication barriers between primary and tertiary care, as well as provide more efficient, effective management of care for the client.

The Sunshine Coast Hospital and Health Service have funded a PHN-based Project Officer to implement the BPAC referral system in general practices across the Sunshine Coast area. David Armstrong, who has a clinical background as a Nurse Practitioner, will work with GPs in the Sunshine Coast PHN

catchment area to install and provide training on the system.

"We're really excited to see the outcomes of this new electronic referral system," David said.

"We've already seen over 800 successful referrals by GPs using the system in 2016 and we're hoping to take the number of practices engaged with the program from 11 to 30 in the New Year.

"BPAC SeNT will work via a 'widget' that can be easily installed on a general practice's computer system alongside their current medical record software, such as Medical Director or Best Practice.

"Being that the program is designed for time-poor GPs, we're really encouraging general practices to get on board and give the BPAC system a go".

PHN Sunshine Coast office General Manager Kath Thompson said the new system will improve the overall access to and transfer of clinical information between health care sectors.

"We're proud to work with the HHS to deliver and implement the BPAC system in 2017," she said.

"It aligns with our core organisational objectives; harnessing GPs with the tools, education and support they need to make their everyday jobs easier, as well as providing primary health care in the right place, at the right time.

"More effective coordination of care for the client is a key priority for us as an organisation, and technology such as this allows us to work toward that".

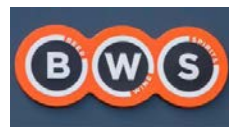
If you are a general practitioner or practice interested in the BPAC SeNT system, please contact BPAC Project Officer David Armstrong on darmstrong@ourphn.org.au.

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Epiploic Appendagitis

Findings

A small focal area of fat stranding is seen adjacent to the distal descending colon with mild thickening of the bowel wall.

Diagnosis

Findings in keeping with epiploic appendagitis.

Discussion

• Epidemiology

This condition usually affects patients in their 2nd to 5th decades with a predilection for women and obese individuals, presumably due to larger appendices.

• Clinical presentation

Clinically patients present with abdominal pain and guarding. It is essentially indistinguishable from diverticulitis and acute appendicitis (depending on location) and although an uncommon condition, it accounts for up to 7% of cases of suspected diverticulitis. Since there is focal peritoneal irritation, pain maybe more localized than in the other causes of acute abdominal pain.

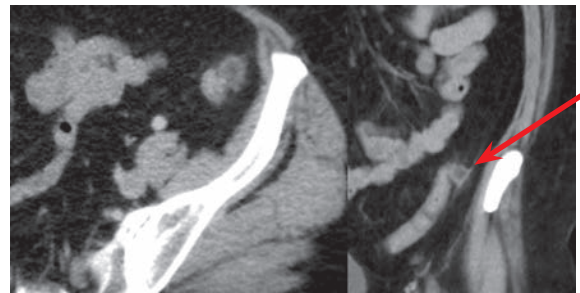
• Pathology

Epiploic appendagitis merely denotes inflammation of the one or more appendices epiploicae, which number

50-100 and are distributed along the large bowel with variable frequency.

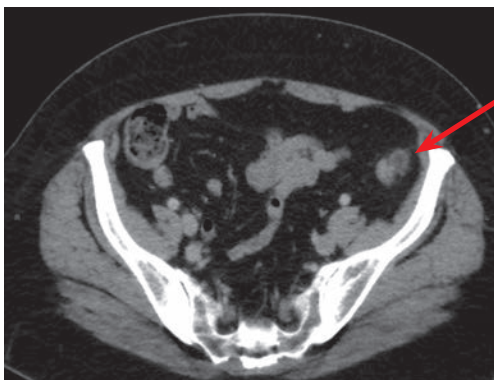
- rectosigmoid junction - 57%
- ileocecal region - 26%
- ascending colon - 9%
- transverse colon - 6%
- descending colon - 2%

The pathogenesis is thought to be due to torsion of a large and pedunculated appendix epiploicae, or spontaneous thrombosis of the venous outflow, resulting in ischaemia and necrosis.

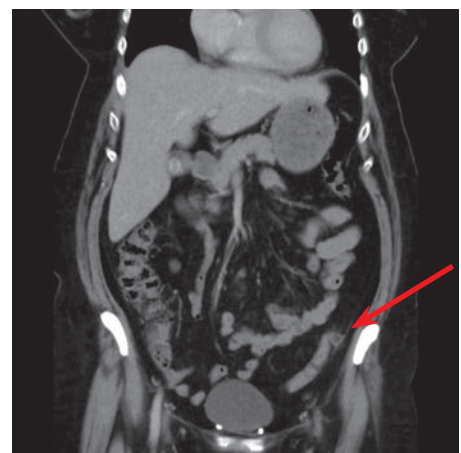


• Treatment and prognosis

Epiploic appendagitis is a self limiting disease, and thus correct identification on CT prevents unnecessary surgery. Although it sometimes mimics acute abdominal diseases for which surgery is required, treatment options for epiploic appendagitis often do not include surgery.



CLINICAL HISTORY:
6 days history
of left iliac fossa
pain, tenderness
and bloating. No
bowel changes.
Ultrasound normal.





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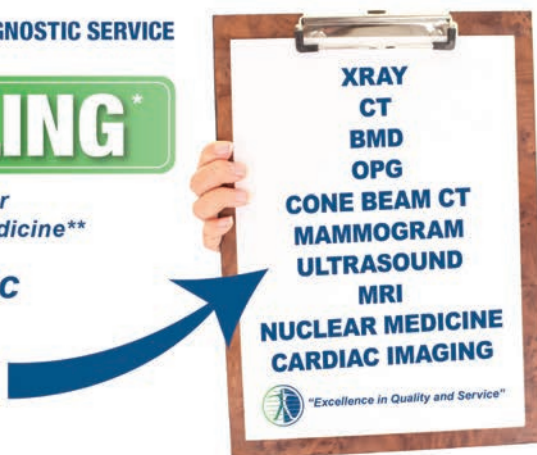


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Robotic Surgery comes to Sunshine Coast

Men suffering from prostate cancer will now be able to access the first robotic surgical system on the Sunshine Coast with the Sunshine Coast University Private Hospital at Birtinya announcing the imminent installation of the **da Vinci[®] Xi[™] Surgical Robot System**.

Currently only available in Brisbane, the installation of the robot at Sunshine Coast University Private Hospital early next year will allow minimally invasive surgical procedures to be conducted at the hospital in a range of areas beginning with urology and developing across other specialities including gynaecology and general surgery.

Hospital CEO Oliver Steele said he was delighted that the **da Vinci Xi** Surgical System would allow minimally invasive surgery to be available to patients and adds to the hospital's existing capabilities in Urological services including Green Light laser and ESWL.

In particular, the Robot would be key to expanding urological services at the hospital with urologists welcoming the availability of the technology for prostate cancer patients who currently travel to Brisbane for this surgery.

"This is the next frontier for men's health on the Sunshine Coast," he said. "We've invested \$3.5M into this robotic system."

Several Sunshine Coast University Private Hospital Urologists have already been successfully trained in performing the robotic surgery for prostate cancer.

"The da Vinci prostatectomy is innovative technology that offers extraordinary benefits to patients and has revolutionised the treatment for prostate cancer," said Sunshine Coast Urologist Dr Stuart Collins.

"The da Vinci Surgical Robot System enables urologists to operate in the difficult to get to lower pelvis through very small incisions with unmatched precision. It is very effective and one of the least invasive surgical approaches to prostate cancer treatment," Dr Collins said.

In the USA, over two thirds of all radical prostatectomies are currently performed using this technology where the robot replicates the surgeon's hand movements. It makes for an intuitive approach with a high level of precision, allowing surgeons to perform this complex procedure using keyhole surgery, needing four incisions each of less than 1cm and a slightly larger incision at the umbilicus compared to an incision of up to 25cm for a traditional radical prostatectomy.

"Benefits to patients include less pain, shorter stay in hospital, and less risk of infection," Dr Collins said.

"For me as a surgeon, the superior visualisation coupled with the integration of advanced wristed instruments allow for far greater dexterity, which translates into greater precision and less operator fatigue. Most importantly the robotic procedure can be performed with equivalent cancer specific outcomes," he said.

"Robotic surgical platforms have traditionally only been offered in metropolitan areas and I have had to take my patients to Brisbane to afford them this technology. It is fantastic that patients on the Sunshine Coast will soon have the technology available in their own backyard which will make it easier for them and their families in the post-operative period."



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Sunshine Coast Orthopaedic Clinic

The Acute Knee Clinic

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

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

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

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

or an appropriate non-operative treatment programme.

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

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

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

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

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

For appointments contact

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

Examples of these injuries include:

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

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

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

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

Early ACL surgery in the young active patient/sportsman.

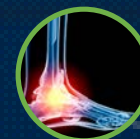
Happy Holidays!

From the team at **SPORTS & SPINAL PHYSIOTHERAPY**

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We would like to take this moment to say thank you and send our best wishes to you and your families. May the New Year be filled with success and happiness!

We look forward to continuing to provide you and your patients with the very best evidence based treatments and rehabilitation in 2017.



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WHAT'S YOUR PLAN?



Last night I received a text from my Bank that my credit card had been fraudulently used, I was asked to reply Yes for me No for Fraud. I reluctantly responded No, with the thought in my mind that it couldn't possibly happen to me and this was just a scam. The text response I received back advised I would receive a call within 20 minutes. At 10pm a lady with poor English phoned me to discuss the incident, I promptly advised her that no bank would call at 10pm at night and that she was a hoax and then I hung up.

Well wasn't I wrong! Friday morning on the way to work I entered the local service station to fill up my car with fuel. As I stood at the cash register (wearing my Poole Group uniform) both of my cards were unceremoniously declined. Suffering severe embarrassment the next thought that entered my mind, was how was I going to pay for this? I rarely carry cash like every other person I know and rely heavily on my cards. In sheer desperation and as the sweat beads ran down my face I called the bank. They felt my pain and lifted the ban for two minutes to process my fuel purchase. Then I was advised my cards were useless again. Being Friday sheer panic again overcame me, how would I survive the weekend? Again the bank came to my rescue and allowed me to do a cardless withdrawal at the ATM.

So why am I writing this article? With events of that morning freshly etched in my mind and with Christmas approaching I thought it might be a good idea to challenge everyone to think of your backup plans, not just financial backup plans but life in general.

As experienced that morning what is your plan if this happens to you? It's a possibility over Christmas that it could. The transaction on my card was for a US business, the Bank flagged the payment as the business itself is real, but a high volume of fraudulent transactions has been charged to them recently.

Although this event in hindsight is minor it does serve as a reminder to have a contingency plan in place. There are so many events in life that can bring both your life and business to a screeching halt fire, flood, death, GFC, fraud, sickness, power blackouts, job loss, divorce.

I think we would all be smart to think about what we can do to minimise the impact of these events in our life. I thought I was quite organized and had a plan for all of the above events. I have completed my Will, supplied my executors copies, have a Will folder setup for them and discussed with them all of my financial and personal wishes. I have life insurance, superannuation, trauma, income protection, car, house, private health insurance. My cupboards at home are stocked with food & water that would keep me going for a week.

It's funny, in spite of all of my planning I couldn't pay a \$60.80 fuel bill that morning. I'm not sure what the solution is other than to think and prompt you all to take the time to consider what you need to do for you, your family and your business and develop your own contingency plan.

And me, I figure I'm well covered, but when I get home tonight, my gold coins are going straight in my piggy bank tin.

From all of us at Poole Group, Happy holidays everyone. May you all have a fabulously Festive Christmas and a Happy New Year.

Written By Kerri Welsh (Manager) Poole Group 07 5437 9900.

OVERLAND TRACK Wayne Herdy



If you open any website proclaiming the best ten long-distance treks in the world, you can practically guarantee that Tasmania's Overland Track will rate a mention.

Every year, more than 8,000 hikers traverse the 6-day 65-km walk from Cradle Mountain to Lake St Clair. Most add at least a few of the side-trips which can add another 30-odd km to the walk. Only 40 hikers are allowed to start the Track each day during the peak season (from 1st October to 31st May, you can only walk the Track from North to South). Traditionally the Track is walked in set stages, from one overnight hut to the next. The smallest huts only sleep 16 on the designated wooden platforms (that's right, no bunks), so many walkers sleep on the floor or outdoors in tents.



In December this year, I walked the Overland a second time. I don't usually visit treks a second time, but when I walked the Track 2 years ago the weather was so lousy that I got few photographs. I also had company this year, my daughter and her partner.



A lot of the Overland Track boasts boardwalks, but don't be deceived. There are enough natural surfaces, including tree roots and shin-deep mud or rocky rivulets, to make the going arduous. As a walk in the national park goes, this is no "walk in the park". 10 km a day doesn't sound a lot, until you wind up and down hills and through creeks and close scrub, carrying a load that might start at over 20kg (plus about 3kg of camera if you own a couple of Nikons).

The low point for every Overland walker is the second hour of day one. At a time when your muscles are not yet tuned in, and your pack is at its heaviest, there is a 60-degree scramble up a rocky incline pulling yourself along a chain rope. After that, the rest is (relatively) easy.

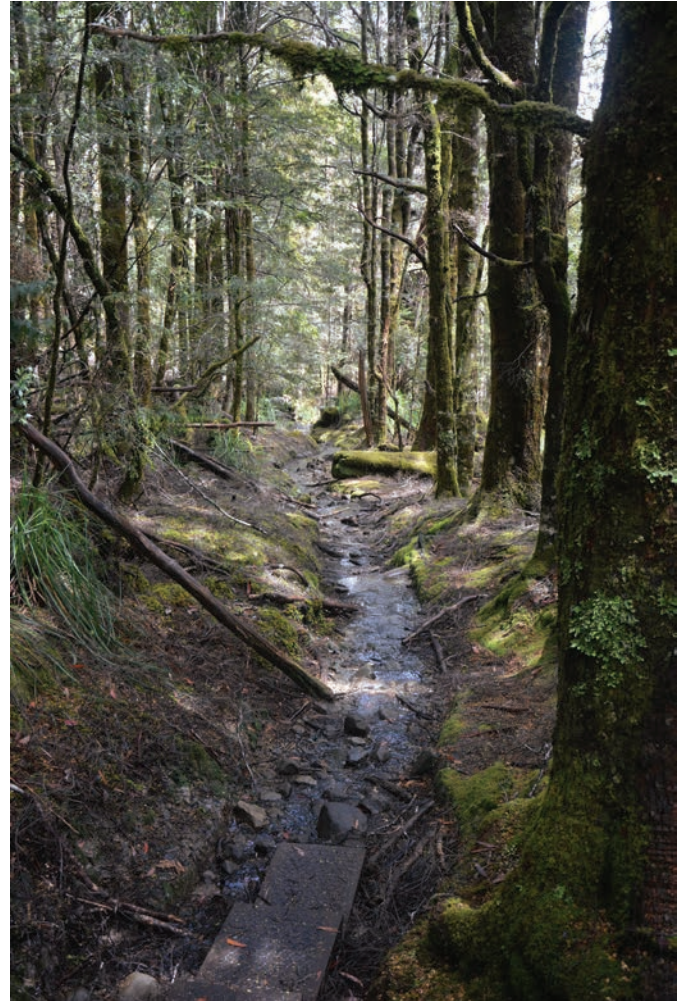
The highlight of this year's expedition was a delightful surprise on day 3, when we woke to about 4cm of snow (Australia in December!). Enough to make some pretty pictures but not enough to make it dangerous.

Or, rather, more dangerous. Overland trekking is not a trivial pursuit. The Overland saw two deaths this year from hypothermia – in summer. If you get into real trouble, the only way out other than walking is by helicopter, which can only find you if somebody is carrying a Personal Locator Beacon. No overland trek is undertaken without foreknowledge and preparation. Anybody planning a distance trek for the first time has to plan – if you want to not only survive the walk but even enjoy it, you cannot have too much information.

OVERLAND TRACK Wayne Herdy



You have to carry the right gear, including your food for the entire trip and enough water to last to the next known water point. And the planning always boils down to a balance between your fitness and your payload in a hostile and potentially lethal environment. Fitness and training are essential, because when you get out into the boondocks, you are the one who has to carry every gram of kit on your back. The websites and guidebooks are pretty good, but you cannot beat the first-hand knowledge of somebody who has done it. And the one piece of kit that you cannot skip on is a first-class pair of boots, well worn in long before you start. Everything else is a footnote.



But for those prepared to put in the preparation and the effort, the reward is priceless. At the most superficial level, you get to live in some of the most spectacular and unspoiled natural scenery that Australia has to offer. Less superficially, you get to meet dozens of like-minded souls from all around the world, sometimes for fleeting friendships and sometimes for long-lasting relationships, but always with shared and diverse experiences of what life in the modern world is all about. And, to my mind at least, the most profound experience is the opportunity to reflect on the real meaning of life. As one of the signs on the Track says (paraphrased): "you don't come out here to get away from it all; you come here to get back to it all." It is a reality that pitting yourself against nature with only your own resources brings each individual back to the basics of who and what they really are.





Special Interests

- General Adult Psychiatry
- Mood disorders
- Anxiety disorders
- Psychosis

Contact Details

Caloundra Private Clinic
96 Beerburum Street
Caloundra Qld 4551

All appointments:

P: (07) 5492 0221

F: (07) 5492 0279

DR AMIR SHAMELI

MD MRCPsych CCT MSc FRANZCP

Psychiatry

Dr Amir Shameli is a Consultant in General Adult Psychiatry. Having done his specialist psychiatry training in the world-class Oxford training scheme in England, he holds specialist qualifications in both United Kingdom and Australia, and has worked in both countries as a Consultant Psychiatrist.

Dr Shameli's Specialist qualifications include Fellowship of The Royal Australian & New Zealand College of Psychiatrists (FRANZCP), Membership of Royal College of Psychiatrists, London (MRCPsych), Certificate of Completion of Training (CCT) in General Adult Psychiatry, UK and Masters of Science (MSc) in Clinical Neuropsychiatry, UK. He completed his general medical training and obtained Doctorate of Medicine (MD) in Iran.

His main areas of interest are mood disorders (such as depression and bipolar affective disorder), anxiety disorders (including generalised anxiety, social anxiety and obsessive compulsive disorder) and psychosis.

Dr Shameli is passionate about high quality patient care and evidence-based practice (use of best available and most up to date research evidence). His professionalism and respect for patients and colleagues has been consistently noted by others throughout his career.

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THE BIG MAN TELLS ALL



A unique opportunity was seized upon when through a friend an acquaintance who was divorced from some one's sister told me that Santa was doing a "recon". Apparently he was feeling jovial and granted me an exclusive interview.

At first I thought I could discuss world peace or ask how the new non gender discrimination of toys was going etc. But through a casual remark he started telling me about some of the beverages that had been left for him especially from the medical world. The following is a brief but true description of his tale.

Santa- "Hmm, *Neurosurgeons*. They can be pretty uptight and precise. Not super flashy but like to let you know they are at the top of their game. So often I find a good glass of Vintage champagne, say a 2008 Paul Louis Martin Blanc de Blanc. 100 % Chardonnay with a deep yellow color and soft fine bead of bubbles. The nose is fresh with peach and citrus notes. The aging toasty aromas are starting to develop. Full sweeping fruit and acidity make this a well-structured wine.

Orthopaedic surgeons- Most of them are mad wine drinkers, with a penchant for Pinot Noir, sorry I mean Red Burgundy. Once this Ortho from Toorak left me a vertical tasting of 4 vintages of Nuit Saint Denis. But I must say his poorer country cousin from Ipswich did leave me some 1994 Bass Phillip Pinot Noir from Gippsland. Strawberries and truffles and funky notes with a broad sustained palate really excited me.

Plastics- These guys are a bit regionally variant, say the flashy Gold Coast or the Hunters Hill mob. But they all seemed to have discovered Nebiollo from Piedmont in Italy. No doubt on their way to the fashion capital Milan. A patriotic Plastics guy left me out an Amant Margaret river Nebiollo- Complex nose of plums roses and herbal notes. Juicy palate but a little less tannin than the Italian ones.

Breast Surgeon- This amazing female breast surgeon, who once helped Mrs. Claus, left me out a sensational but sensible wine. A David Franz Adelaide Hills 2014 Brothers Ilk Chardonnay. Vibrant yellow color. A bouquet of white peach, lemon and hints of funky lees notes. The palate was sublime with hints of lemon curd and supporting acids.

It was a Goldie locks wine –just right!

Family Physician- Yes well these guys have hearts as big as Texas. Occasionally a grateful patient gives them a good tippie for Xmas. In their true spirt they will often leave me a taste. Usually a good decent Shiraz does the trick. E.g. a Woodstock, the Stocks 2008 Shiraz. Deep red to purple with aging brown color. A complex nose of stewed plums, dates but with the McLaren Vale spicy notes. Luscious palate and great tannins.

Anaesthetists- you know they are like nocturnal animals, you know they exist but you hardly see them. A Riesling is often their choice. They know it's under stated, and shunned by most. But they realize its potential. A Frenchman's Cap 2015 Tasmanian Riesling made by Julian Alcorso hit the spot. I know Julian well and he has just retired from winemaking. The wine has classic Coal River bouquet of melon and limes. The palate appears rich and there is amazing raft of acidity. Julian, Santa will miss you. Maybe I'll visit you on your Yacht, "The Last Vintage".

Santa- "There are many more specialties I could go onto. But it is always a privilege to sample these gifts from a group of people who are sometimes underappreciated, attacked from all sides of politics, bureaucracy and not to mention medico legal areas. Doctors do this from an innate sense of caring and it is not about the money (or in GPs case-the lack of). So when Santa tries these wines he feels the love.

Merry Xmas everybody Ho (hic) Ho!



MEDICAL MOTORING with Dr Clive Fraser

Jaguar XE *"The Best of British"*



In 1600 the English East India Company was established to exploit the riches of the Far East.

Trading with Asia meant that Britain would need something to sell to its Far Eastern trading partners.

From 1730 India was the conduit via which illegal opium went to China and tea and spices were shipped back to England.

When China confiscated 20,000 chests of opium in 1839, England responded by confiscating a small island off the Chinese coast named Hong Kong.

But the British always saw India as its most valuable Asian asset.

Over nearly 350 years Britain extracted tons of tea, mountains of spices and piles of precious stones from India.

By the time of Indian independence in 1947 the British had left behind a legal system, democracy, railways and a game called cricket.

Fast forward to 2008 and a reversal of fortunes when the Indian-based Tata Group purchased the iconic British brands Jaguar and Land Rover.

Under Indian ownership these brands have gone from strength to strength.

Last year Jaguar launched an all new mid-sized XE model.

The previously released X-Type from 2009 was disappointingly just a re-badged Ford Mondeo.

But the Jaguar XE is mostly not borrowed from a parts bin with a new Ingenium diesel motor coming from Jaguar's Wolverhampton factory and an all new aluminium monocoque body assembled at Solihull.

My first Jaguar XE experience began compliments of a colleague who'd traded in his one year old Mercedes C250 on a Jag.

He just didn't like the harshness of the Mercedes run-flat ride or the noisiness of the Mercedes diesel.

The petrol XE Jaguar was definitely ahead of the Mercedes on both fronts.



Whilst the Mercedes C-Class is undoubtedly attractively styled, the Jaguar XE is also particularly pleasing to the eye.

That styling does seem to limit the space in the rear seat though.

Under the bonnet there are four engine options starting with a 2.0 litre four cylinder petrol with either 147 kW or 177 kW.

Then there's Jaguar's 2.0 litre four cylinder Ingenium diesel with 132 kW.

The Ingenium diesel engine is a modular design which can be mounted longitudinally or transversely.

Finally there is a 3.0 litre super-charged V6 with 250 kW.

Performance from the lowest spec petrol engine is acceptable rather than out-standing with 0-100 km/h in 7.7 seconds.

There is an eight speed ZF automatic transmission.

As usual the ride and handling of the Jaguar are its outstanding features.

There is double wish-bone suspension and electric power steering which has excellent feel.

So how will the Jaguar XE fare against its German competitors?

Pretty well I think.

Whilst the pricing is on a par with rival BMW, Audi and Mercedes models, servicing costs are way less.

MEDICAL MOTORING / cont: *with Dr Clive Fraser*

There also seems to be plenty of room to negotiate a deal as my colleague found out when the Jaguar salesman offered him \$20,000 more on his C250 as a trade-in.

And just in case anyone is wondering how my colleague was offered such a great deal, I can assure you that no opium was exchanged.

Safe motoring,

Doctor Clive Fraser



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From the Radiologists and Staff of Sunshine Coast Radiology, we would like to thank our referrers and patients for their continued support.

We would like to wish you and your family a Merry Christmas and a safe and Happy New Year.

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GP Education

GP Cardiology

Sunshine Coast University Private Hospital is pleased to invite you to a GP education evening featuring **Drs Peter Larsen and Stuart Butterly**, Cardiologists, Sunshine Coast Heart Specialists who have recently commenced consulting in Gympie.

Join us for an evening of discussion on the latest updates in cardiology treatments for your patients.



LEARNING OUTCOMES:

- Outline latest management options for people with AF
- Identify new targets for CV risk factor management
- Formulate a care pathway for managing people with ACS

PROGRAM:

6.00pm Registration and dinner

6.30-8.30pm Presentation and discussion

Topics include:

2017 cardiology update

AF – a quick guide

Risk factor management – new targets

ACS management pathway

TAVI for severe AS

8.30pm Evaluation and close

Flag a topic – it's your night, so if you have a topic you would like addressed, please email bullp@ramsayhealth.com.au

Eligible RACGP 4 Category 2 QI&CPD points



WHEN

Wednesday, 22 February 2017

WHERE

Kingston House "Impressions"
11 Channon Street
Gympie 4570

RSVP

Wednesday, 15 February 2017



Bristol-Myers Squibb



It's easy to register

Register online www.sunshinecoastuniversityprivate.com.au |

Email bullp@ramsayhealth.com.au | **Call** Pam Bull, GP Liaison on 0427 327 321

Please email if you wish to be removed from our mailing list

By registering for this event, I confirm that I have read the RHC Personal Information Collection Statement www.bit.ly/RHC_PICStatement



**Sunshine Coast University
Private Hospital**

Part of Ramsay Health Care

SKI RESORTS IN 'SNOW JAPAN'

A unique country with a distinct culture, Japan is a world-class skiing destination with over 500 ski resorts spread across the cluster of islands from north to south. If you are not up for skiing or snowboarding, head to the snow play areas offered by most resorts for sledding, snow tubing, and snowmobile biking. For a relaxing day, hit one of Japan's therapeutic *Onsen* (hot spring) for rejuvenation of the body, mind and soul:



Play with snow to your heart's content

1. **Snow Country:** Trekking through snow at Daigata in the Niigata Prefecture, pit stop for crispy tempura and Soba noodles, partaking in their joyful festivities, finest skiing opportunities, visit to the magical "kamakura"—Snow Country igloo, and plenty of exploration opportunities are what makes the mountains of the Snow Country area so memorable.
2. **Naeba:** One of the renowned ski resorts in Japan, Naeba offers illuminated night skiing. Besides, you can enjoy a 20-minute Dragondola ride to experience the postcard-perfect winter scenery of the area, indoor and outdoor ski programs for children, and Wakuwaku Snow Land with snow train rides, snow rafting and much more.
3. **Zao Onsen:** Apart from being famous for the best skiing conditions, Zao Onsen ski resort is also visited in hordes for its stunning natural Juhyo "Ice Monsters". The resort village's famous hot springs, snow courses, exciting Family Snow Park, Snowboard Park, besides inexplicable scenery are other attractions.
4. **Sapporo:** Great skiing, ice sculpture spectacle at the annual Snow Festival and plenty of other snow sports and activities are what makes Sapporo ski resort a hit among tourists.
5. **Hakuba:** Located a convenient *Shinkansen* (bullet train) ride from Tokyo city, the Hakuba Valley—with 10 ski resorts and over 200 runs—is the heart and soul of snow sports in Japan. This valley is well-known for its spectacular scenic beauty, and perfect consistent snowfall which is ideal for great skiing and boarding.
6. **Nozawa Onsen:** This traditional Japanese ski resort village is popular for great ski fields, and Onsen (hot spring). One of the three major fire festivals of Japan which is held in Nozawa Onsen is definitely worth attending.

What have we planned for you?

A comprehensive itinerary has been developed to include all the skiing and après-skiing attractions of Japan.

- An overnight stay at the Naeba ski and snowboarding resort for night floodlit skiing, snowboarding, snow tubing, snow train rides, Dragondola-rides among plenty of other options
- Root for the daredevils at the 2016 Alpine Skiing World Cup to be held in Naeba in February.
- Trip to Nozawa Onsen with plenty of opportunities for skiing, and recreation by the famous onsens (hot springs) of the region
- Shiga Kogen is the go-to place for skiing, visiting some popular temples, and witnessing the breath-taking sight of spectacular snow monkeys by the hot onsens in the nearby forest.
- Don't miss the traditional Sapporo Snow Festival in Sapporo—located on Hokkaido Island—in February
- Stay at Niseko—the ski resort on Hokkaido Island—for the best skiing, and lively après parties

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Dr John Collee, Former Emergency Doctor and Screenwriter of world famous film scripts including *Happy Feet*, *Master and Commander* and *Walking with Dinosaurs*.

LOOKING TO THE FUTURE OF PATIENT-CENTRED CARE AND COMMUNICATION

Dr Renee Lim, Director of Program Development, Pam McLean Centre, Actress and TV Presenter (cast in *All Saints*, *East West 101* and ABC2's latest program *Please Like Me*).

EMERGENCY MEDICINE IN THE ICE AGE: CHALLENGES AND ADVICE FOR JUNIOR DOCTORS

Professor Gordian Fulde, *Senior Australian of the Year 2016*, Senior Staff Specialist, St Vincent's Private Hospital, Melbourne (with special appearances on *Kings Cross ER*).

THE STORY OF AUSTRALIA'S FIRST HAND TRANSPLANT TEAM AND WHAT'S ON THE HORIZON FOR TRANSPLANT SURGERY

Professor Karen Dwyer, Transplant Physician, St Vincent's Private Hospital, Melbourne Researcher and Deputy Head of School, Deakin University, Victoria.

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

| | | | | |
|---|--|-------------------|---------------------------------|--|
| NAME | Surname: | | First Name: | |
| EMAIL: | | | | |
| 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: | | 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: <i>Retired doctors who wish to join the Association are required to attach a letter of good standing from their respective College.</i> | | | | |
| PROPOSERS: (to comply with the Queensland Associations Incorporation Act, two financial members of the Association are required to nominate each applicant for <i>new</i> membership. Members <i>renewing</i> their membership do not need proposers). | | | | |
| 1. NAME: | | Signature: | | |
| 2. NAME: | | Signature: | | |
| ANNUAL SUBSCRIPTION (GST included): | (Please tick) | | DELIVERY OPTIONS? | |
| Full-time ordinary members - GP and Specialist | \$ 77 | | Your Monthly Invitation? | |
| Doctor spouse of full-time ordinary member | \$ 33 | | By Email? | |
| Absentee or non-resident doctors | \$ 33 | | By Courier? | |
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| Residents & Doctors in Training | Free | | By Email? | |
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| 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 OR: FAX TO 5479 3995 PLEASE NOTE HALF PRICE MSHIP CONTINUING THIS YEAR! | | | | |
| 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 27 OCTOBER 2016
Ebb Waterfront Restaurant, Duporth Avenue, Maroochydore
MINUTES
(Accepted at Committee Meeting 24 November 2016)

Meeting opened 1815.

President Dr Roger Faint took the chair.

Attendance: Drs Roger Faint, Wayne Herdy, Scott Masters, Marcel Knesl, Mason Stevenson, Kirsten Hoyle, John Evans, Fabio Brecciaroli, Jon Harper (PHN). (Observer Jo Bourke).

Apologies: Drs Di Minuskin, Peter Ruscoe, Mark de Wet.

Minutes of last meeting: 15 September 2016 (*To be accepted*).

Moved: Mason Stevenson. Seconded: John Evans.

Accepted.

Business arising from Minutes: Nil

President's Report: *Dr Roger Faint*

Medical students for new University Hospital:

- Health District requesting an additional 15 students (currently 35)
- Opposed by AMA and AMAQ
- Our primary tactic will be to persuade Chris Zappala to accept and respect the LMA position
- SCLMA has clearly expressed its preference for supporting the development of a local medical school.

Vice President's Report: *Dr Wayne Herdy*

Nothing new to report.

Secretary's Report: *Dr Mark de Wet (apology) –*

Correspondence tabled by Wayne Herdy.

Correspondence In:

- 20/9/16 - M McArdle – Congratulating Di Minuskin on her Presidency
- 22/9/16 - PHN Chair & CEO – support for student medical places 2017
- 22/9/16 - Chris Zappala – to Di Minuskin re SCLMA's support to student medical places
- 29/9/16 - Chris Zappala – to R Faint – re student medical places on Sunshine Coast
- 4/10/16 - Sean O'Connor – complaint re advertisement in September SCLMA newsletter.
- 18/10/16 - USC – Signed agreement re yearly Bursary donation
- 20/10/16 - S Coverdale – response to Roger Faint
- 27/10/16 - Siavash Es'haghi – response to advertising complaint (includes emails from Kirsten Hoyle)

Correspondence Out:

- 21/9/16 - Di Minuskin to M McArdle
- 22/9/16 - Di Minuskin to Chris Zappala re student places
- 13/10/16 - Roger Faint – to S Coverdale

Business arising from Correspondence:

Discussion was held with regard to divergent opinions expressed in correspondence to the Editor.

- It is not the role of the SCLMA to resolve differences of viewpoint between members;
- But the SCLMA has a duty to ensure that material published is balanced;
- If material submitted is inflammatory or derogatory, the author should be given an opportunity to rephrase the submission;
- The Editor has ultimate rights of refusal or acceptance;
- The Association always disclaims that we do not necessarily attest to the factual correctness of material submitted, not does the material published necessarily reflect the views of the Association.

Treasurer's Report : *Dr Peter Ruscoe – Apology (to be tabled by Past Treasurer, Dr Mason Stevenson)*

(a) Accounts to be paid:

- Australia Post – September Account
- Office National – September Account
- Jo Bourke – Secretariat September 2016
- Jo Bourke – Adobe CC subscription September 2016
- Snap Printing – Newsletter October 2016
- Jo Bourke – Newsletter October 2016
- USC – Donation Bursary student
- Cittimani - Niki pump
- C Hawkins – Assist Sec September 2016

Moved: Mason Stevenson 'that the accounts be approved for payment'. Seconded: Roger Faint. Carried.

Charitable Donations (Wayne Herdy):

- Pursuant to previous resolutions of the Committee approving a donation of up to \$2,600 to The Shack, the Committee has received three quotes for a new washing machine and clothes dryer.

Moved: Wayne Herdy - 'that the SCLMA accept the quote of \$1,250 from Joyce Mayne and approve the payment of that amount to purchase a new washing machine and clothes dryer for The Shack. Seconded: Kirsten Hoyle. Carried.

It is noted that the approval was for a total donation of \$2,600 to The Shack. The Shack expressed a desire to purchase a number of swags at a cost of approximately \$100 each. Wayne Herdy to communicate with The Shack.

(b) Membership Report:

- Dr Scott Kitchener (General Practice)
- Dr Mome Terblanche (Anaesthetics)
- Dr Anita Ponniah (General Practice)
- Dr Kirsten Price (Breast Surgeon)
- Dr Alicia Lorenz (General Practice)
- Dr Chris Lawson (General Practice)
- Dr Michael Naue (General Practice)

Moved: Mason Stevenson – 'that the membership applications be accepted. Seconded: Roger Faint. Carried.

AMAQ Councillor's Report: *Dr Wayne Herdy*

A: New AMAQ Constitution already has proposed amendments raised by the Board and to be voted at EGM early November.

Two amendments raise concerns:

1. That retired members no longer have voting rights;
 2. That Board minutes are no longer published to Council.
- Both of these will be vigorously opposed by Council.
- B: AMAQ annual conference in India – see report in October newsletter. 2017 conference to be held in Rome.

Meetings Convenor Report: *Dr Scott Masters*

- Final clinical meeting for 2016 to be held at the Maroochydore Surf Club, Thursday 24 November, Tim Nathan, Urologist.

Hospital Liaison Report: *Dr Marcel Knesl*

- We have now started the process of EMR (electronic medical records) to be rolled out as we transition to the new hospital site. No further new news from the hospital side at present.

PHN Country to Coast Report: *Dr Jon Harper*

- Health Pathways for the Sunshine Coast and Gympie area is due to go live in just two weeks' time. A significant amount of work has gone into localising the 'pathways' with the relevant contact details for local public and private services. Our priority has been to focus on those conditions that are subject to Queensland Health's Clinical Prioritisation Criteria (CPC) for GP referrals into public hospitals.

- The CPC team has been working closely with the creators of Health Pathways in New Zealand to provide a platform for the Criteria that GPs will find easy to use. Our goal is to enable GPs to readily access the required information (for investigations etc.) for referrals into public hospitals. However, it will be several months before all the original New Zealand pathways have been fully localised. Health Pathways will be available to all health practitioners, public and private. Feedback is welcome, via the 'feedback' button, as each pathway can be easily edited to reflect changes in services and treatments.
- Integrated care activities continue at system and service levels. The SPOT-ON hospital avoidance project is showing promising early results reducing low-acuity QAS transports to emergency departments. The PHN Sunshine Coast clinical council is investigating the need for a multi-agency strategy to improve outcomes for older people at risk of falls. The Integrated Care Alliance will soon ratify its terms of reference and create a system-wide workflow for integrated care activities.

General Business: Nil

Meeting Close: 1915.

*Dr Wayne Herdy,
Acting Honorary Secretary.*

REDCLIFFE LOCAL MEDICAL ASSOCIATION NEWSLETTER

Redcliffe LMA produces a similar newsletter

For full details re advertising go to their website:

www.rdma.org.au or email: RDMAnews@gmail.com

ADVERTISING GUIDELINES:

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

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

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

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

PLEASE NOTE THE FOLLOWING:

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

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

TAKE FIVE



Christmas Joke

Three men died on Christmas Eve and were met by Saint Peter at the pearly gates.

'In honour of this holy season' Saint Peter said, 'You must each possess something that symbolises Christmas to get into heaven.'

The Englishman fumbled through his pockets and pulled out a lighter. He flicked it on. 'It's a candle', he said.

'You may pass through the pearly gates' Saint Peter said.

The Scotsman reached into his pocket and pulled out a set of keys. He shook them and said, 'They're bells.'

Saint Peter said 'You may pass through the pearly gates'.

The Irishman started searching desperately through his pockets and finally pulled out a pair of women's panties.

St. Peter looked at the man with a raised eyebrow and asked, 'And just what do those symbolize?'

Paddy replied, 'These are Carols.'

And So The Christmas Season began

Football Seat in Stand

Freddie and John were fortunate enough to have a season ticket to watch Chelsea. They could not help noticing that there was always a spare seat next (B14) to them and they had a friend who would love to buy a season ticket, especially if all three could have seats together.

One half-time Freddie went to the ticket office and asked if they could buy the season ticket for B14. The official said that unfortunately the ticket had been sold. Nevertheless, week after week the seat was still empty.

Then on Boxing day, much to Freddie and Eddie's amazement the seat was taken for the first time that season. John could not resist asking the newcomer, 'Where have you been all season'. Don't ask he said, the wife bought the season ticket back last summer, and kept it for a surprise Christmas present.

Christmas Drink

Two days before Christmas Jimmy set-off in his minibus to collect a batch of open prison inmates. His mission, as usual, was to take them for their radiation treatment at a nearby hospital. Since it was Christmas, one of the 12 offered to buy Jimmy a drink. So they stopped off at the Rose and Crown pub, and all had a nice drink. On the way out Jimmy detoured to the gents, when he came out of the loo, all the prisoners had disappeared. He looked in all the pub's bars, drove around for half an hour, no sign of the inmates. They had all made their escape.

What could Jimmy do? Thinking quickly, he braked at a particularly long bus queue, and told the waiting people that he was a relief bus. Where-upon he picked up the first 12 and drove them to the open prison. He then radioed ahead to the warders giving a 'Code Yellow' message. This was a pre-arranged signal that some of the prisoners were playing up. Jimmy unloaded his passengers, he then beat a hasty retreat. Amazingly, his trickery wasn't discovered until the New Year.

Christmas Pudding

Martha decided to move with the times and try the delights of microwave cooking. Whereupon, her devoted husband Archie went out and bought her a brand new top-of-the range Sharp Microwave oven.

Christmas approached and Martha got out her Christmas pudding recipe and assembled the ingredients. She proceeded along traditional lines and even got the each member of the family to stir the mixture 'for luck'. When Martha consulted the microwave's manual for the cooking time, she could not believe that ten minutes would be enough for a traditional Christmas pudding. Consequently she decided to substitute her normal cooking time of 50 minutes. Dog Christmas Pudding Story

As Martha was in the lounge watching her favourite T.V. programme she did not see the pudding spitting in the microwave oven, nor did she hear the mini-explosions. When she finally extracted the pudding from the microwave after nearly an hour of cooking on 'High', it smelt of burnt sugar and looked like a ball of tar. Naturally, the Christmas pudding was a disaster, so much so, that Martha could not even prod it with a fork. In fact the black ball stuck to the bottom of the bowl and Archie had to get a screwdriver to prize it from its base.

Financial Planning explained by an Irishman in the Outback.

Paddy bought a camel from a farmer for \$100.

The farmer agreed to deliver the camel the next day. In the morning he drove up and said, 'Sorry son, but I have some bad news. The camel's died.'

Paddy replied, 'Well just give me my money back then.'

The farmer said, 'Can't do that. I've already spent it.'

Paddy said, 'OK then, just bring me the dead camel.'

The farmer asked, 'What are you going to do with him?'

Paddy said, 'I'm going to raffle him off.'

The farmer said, 'You can't raffle a dead camel!'

Paddy said, 'Sure I can. Watch me. I just won't tell anybody he's dead.'

A month later, the farmer met up with Paddy and asked, 'What happened with that dead camel?'

Paddy said, 'I raffled him off.'

I sold 500 tickets at \$2 each and made a profit of \$898'

The farmer said, 'Didn't anyone complain?'

Paddy said, 'Just the guy who won. So I gave him his \$2 back.'

Christmas Quote

Happy, happy Christmas, that can win us back to the delusions of our childhood days, recall to the old man the pleasures of his youth, and transport the traveler back to his own fireside and quiet home!

Charles Dickens

CLASSIFIEDS

CONSULTING ROOMS AVAILABLE

- New consulting rooms are available for sessional or lease basis In Pulse Oceanside building
- In close proximity of Sunshine Coast University Public and Private Hospital.
- Close to Parking Lot and local bus stop
- Two consulting rooms facing lake side and New University hospital and one additional procedural room
- All Electricity, heating and air conditioning included.
- Able to provide secretory support if needed.

Contact Number 07 5437 7390

Email : reception@drjayverma.com.au

December 2016

CENTRAL DERMATOLOGY CLINIC - OPENING SOON

- Dr Christina Sander will open her state of the art specialist dermatology practice "Central Dermatology Clinic" in January 2017.
- The clinic offers a wide range of dermatology services including skin cancer screening and spot checks, surgery and PDT, general and paediatric dermatology, specialist clinics for melanoma, hair loss and vulval diseases, phototherapy and biologics as well as state of the art cosmetic treatments with a focus on laser and IPL treatments. Preference for Referrals is via Medical Objects (Provider: 4170554W) or can be mailed or faxed.

Level 1, 11-55 Maroochy Boulevard, Maroochydoore QLD 4558

Ph: 07 5345 5150 Fax: 07 5345 5140

Email: reception@centraldermatologyclinic.com.au

Web: www.centraldermatologyclinic.com.au

November 2016

NEW OBSTETRICIAN/GYNAECOLOGIST – COASTAL IVF

- Dr Anders Faber-Swensson FRANZCOG is joining the Coastal IVF practice from December 1, 2016. He will be providing obstetric management with deliveries at the Sunshine Coast Private Hospital, general gynaecological care and infertility assessment and treatment in association with Dr Stokes and the Coastal IVF team.
- **All appointments Ph: 5443 4301 or fax 5443 4352.**

November 2016

CONSULTING ROOM AVAILABLE FOR LEASE

- Session or long term available
- Located in a prominent position at Bokarina on the Sunshine Coast
- Close to the Sunshine Coast Private University Hospital
- Features two new well equipped consulting / procedural rooms, utility room and waiting room.
- All electricity, air conditioning and heating included
- Plenty of off street parking for patients
- Underground parking for the lease holder

For further information or to inspect please contact

Wendy Meyer 0448 202 274 wendy.meyer@pmc.net.au

November 2016

NOOSA. FULL TIME VRGP POSITION

- Busy established practice.
- Accredited; Nursing support, with pathology and radiology onsite
- Good surgical facilities and special interests encouraged.
- Modern doctor owned clinic, mixed billing and NO after hours.

Visit our website, www.noosaclinic.com

Contact Kate: info@noosaclinic.com.au Ph: 07 5449 7600

November 2016

VR GP FEMALE REQUIRED FOR CALOUNDRA

- Small privately owned Medical Practice
- Fully Computerised using MD & Pracsoft
- Fully Accredited practice
- Nursing & long term staff assistance
- Mixed billing. No weekends

Please contact Practice Manager on 07 5491 2911

Email: practicemanager@medicaltrust.com.au (Nov 16)

CHILD PSYCHIATRIST - OPEN TO REFERRALS SHORT WAITING LIST

- Dr Brenda Heyworth now consults 5 days/week from Nucleus Medical Suites, Buderim.
- Please fax specialist doctor referral
- (No Mental Health Plan needed)

Ph. 5444 5022 Fax. 5444 5033"

September 2016

GP WANTED TO JOIN FRIENDLY TEAM - BUDERIM

- This is a full time position
- Full nursing support with a CDM nurse and a fully equipped treatment room
- Our practice is accredited and fully computerised using Best Practice and is mixed billing.

Please contact Nicola on (07) 5456 1600

Email: pm@betterhealthonbuderim.com.au

September 2016

CONSULTING ROOM AVAILABLE FOR LEASE

- Located in central Cotton Tree
- Modern Specialist Room with a well-recognised name and reputation
- Available Long-term or sessional basis
- Included in lease is electricity and cleaning. We are able to offer full secretarial services if required
- Private location with ocean views and waiting area

Ph: 07 5479 2922 Email: info@plasticsurgeon.net.au

September 2016

GPs REQUIRED FOR BUSY BUDERIM PRACTICE

- Vacancies exist for GPs to join us in-hours, or after-hours, in our busy 24 hour, 7 day medical practice in Buderim.
- GPs urgently required to join our long-established staff, who serve the Sunshine Coast community with quality healthcare in a newly refurbished and spacious practice.
- We are fully accredited with RN nursing support and pathology on-site, great diagnostic tools including Molemax HD Pro.
- Visit our website on www.scchealthcentre.com.au.
- Situated centrally on Buderim, you can enjoy both lifestyle and purpose in a caring environment.

Email shanti@scchealthcentre.com.au

Ph; 0418 714 864.

September 2016

SPECIAL OPPORTUNITY -MAROOCHYDORE

Special opportunity for a VR GP who is seeking to take up an existing patient load of a departing colleague at our busy, well established non-corporate Family Practice.

We are a fully accredited, fully computerised, mixed billing practice with a friendly and happy professional team including nursing support and a fully equipped treatment room. Please contact the Practice Manager:

pm.wrnc@yahoo.com.au or 0409 447 096

Continuing as per request.

VR GP REQUIRED – PELICAN WATERS FAMILY DOCTORS

VR GP required for doctor owned Family Medical Centre in Pelican Waters, Caloundra.

Long established, accredited and fully computerised, General Practice with full time experienced Nurse and Receptionist support. Visiting Allied Health Professionals and pathology on site. Mixed billing and flexible working hours available. For further information please contact Practice Manager: **Karen Clarke on 07 5492 1044 or e-mail gbmedcentre@bigpond.com.au. (Afterhours on 0438 416 917)**

Continuing as per request.

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

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

SCLMA CLINICAL MEETING - 24 NOVEMBER 2016

Maroochydore Surf Club Function Room

Dr Tim Nathan, Urologist - *'Improving outcomes in prostate cancer' and
'Urodynamics - more precise diagnosis of urinary symptoms'*

Also Chris Raine - *'Hello Sunday Morning'*

and Dr David Morgan OAM - *'The Queensland Medical Board - Why is it so disliked?'*

Thank you to our Sponsors: Ipsen and Neotract



Presenter: Dr Tim Nathan, Urologist



Presenter: Dr David Morgan, OAM



Presenter: Chris Raine
'Hello Sunday Morning'



Kevin Hegarty, CEO, SCHHS
with Dr Steven Coverdale



Meeting Sponsors:

Left: Robert McNamara
from Neotract

Right: Keryn Hartvigsen
from Ipsen

**REMINDER!!
NO JANUARY
NEWSLETTER
AND NO JANUARY
CLINICAL MEETING**

