



SCLMA President's Message

Dr Roger Faint

A dramatic chain of events is occurring. Queensland is not alone.

Recent member concerns regarding Queensland Hospital outpatients accessing bulk billed Medicare item numbers for specialist appointments were addressed in part by CE Naomi Dwyer last month.

Coincidentally a very complete comprehensive article on this issue titled "double-dipping Medicare funding pool" has been published in MJA InSight last month, written by Dr Tim Leeuwenburg (rural GP/proceduralist, Kangaroo Island, SA) This article has exceptional clarity, is essential reading and is published in this newsletter.

What this article does illustrate is the blatant access to federal based specialist Medicare billings by state public hospital outpatient departments across Australia. The article also shows the angst and frustration by GPs who are often coerced into writing named referrals (amongst other issues) for their local hospital outpatient departments. It is then dubious as to whether the 'named specialist' actually does see the patient.

I attended a breakfast with the eloquent Federal Health Minister Greg Hunt MP organised by local member Andrew Wallace MP on the 2nd May. Greg Hunt volunteered that Queensland Health's access to Medicare (private patients being treated in public Hospitals) has increased by 740% over recent years and that they were observing closely (see below link). It seems Queensland is simply 'catching up' to the dubious practices of the other states.

Of course we know the cost of Medicare is escalating and that bulk billing rates are still high at around 85%. Perhaps state based Hospital Medicare access is contributing to both and perhaps the same issue did contribute to freezing of Medicare rates.

What I don't understand is why have the Federal Health Department, Federal Treasury, and our State (AMAQ) and Federal (AMA) bodies not been asking questions and expressing their concerns.

Of course it goes without saying that if General Practitioners or Private Specialists operated in the same way with regard to referrals, the Professional Services Review Board would be prepared to ask for reimbursement with an associated fine.



The SCLMA will write to the above bodies in support of our members to clarify this issue, to firmly put it on their agendas and to resolve the obvious conflicted interpretation of Medicare that is occurring. I suspect it will be akin to turning an iron ore container ship.

Of course, we haven't even touched on the issue of State based public Hospitals accessing Private Health Funds for surgery and inpatient care, which is a significant new and increasing source of funds currently. Presumably this access has significantly increased the cost of private health insurance which is also escalating.

Breakfast with Greg Hunt at the Best Western was to highlight the Federal Government's commitment of \$5 million to the Thompson Institute (formerly called Sunshine Coast Mind & Neuroscience) at the new Health Precinct, Birtinya. Local philanthropists Roy and Nola Thompson donated \$4 million towards a research based MRI. He also commented on the Federal Government's support of our new Griffith based medical school.

Regards
Dr Roger K Faint

[http://www.greghunt.com.au/Home/LatestNews/
tabid/133/ID/4598/Doorstop--Sunshine-Coast.aspx](http://www.greghunt.com.au/Home/LatestNews/tabid/133/ID/4598/Doorstop--Sunshine-Coast.aspx)

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



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JUNE NEWSLETTER Deadline will be FRIDAY 22nd JUNE 2018

DO YOU HAVE SOMETHING TO SAY?

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

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

Contact Jo: 5479 3979

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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.



Editorial

This month's edition of the newsletter appraises our membership of several upcoming events worthy of diarising, not the least of which is the SCLMA's Christmas in August, now confirmed to be at Sebel Pelican Waters! Invites will be on their way this month!



Also materialising in August will be the opening of the Sunshine Coast's first private emergency Department at The Buderim Private Hospital.

President Roger informs us of his recent attendance at a breakfast meeting with the Federal Minister for Health, Mr Greg Hunt and directs our attention to an article that clearly elucidates the machinations of public hospital outpatient billing.

Patients and doctors alike are being asked to consider signing up to MyHealth Record. In wake of the recent Facebook (and other) privacy breaches and with private health funds already lobbying the government for access to the electronic health records - on the grounds that they are 'not like other insurance companies' - do we really know who will have access to the highly personal data and could it be sequestered by venal interests? Should people be exercising their right to opt out, at least until further details are annotated?

With the school holidays fast approaching, for many it will soon be time to temporarily down tools, sojourn to a foreign land, linger with family, tarry with a choice novel or simply relax and reflect.

Wishing you all an eximious break and for those working through, I trust your quickening is on the horizon!

Regards

Kirsten Hoyle

HIGHLIGHTS in this issue:

- P 4-5: Adj. Prof Naomi Dwyer, CE, SCHHS
- P 7: Jane Schmitt, CEO - AMA Qld
- P 8: Pattie Hudson, CEO, PHN
- P 11: SCHHS GPLO Report
- P 14: Dr Wayne Herdy - AMA National Conference
- P 14-15: Wallis Westbrook, General Manager Buderim Private Hospital Updates
- P 23: Dr Plonk - 'Bird in Hand' winery
- P 24-25: "Double-Dipping Medicare Funding Pool
Dr Tim Leeuwenburg, Sth Australia

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

Website: www.sclma.com.au

SCLMA CLINICAL MEETINGS

6.30pm for 7pm (over by 9pm)

THURSDAY 21 JUNE 2018**Cardiology Presentations**

Presenter: Dr Robert Tam, Cardiothoracic Surgeon

Topic: 'Minimally Invasive Cardiac Surgery'

Presenter: Dr Douglas Wall, Cardiac Surgeon

Topic: 'Coronary Artery Disease. From Angiogram to Bypass. Current Best Practice'

Venue: Maroochydore Surf Club

Sponsor: Medtronic

THURSDAY 26 JULY 2018**Sunshine Coast Brain & Spine**

**Speakers: Dr Hazem Akil
Dr Stephen Byrne
Dr Jon Steinberg**

Venue: Maroochydore Surf Club

**Sponsors: Sunshine Coast Brain & Spine
Caloundra Private Clinic.**

**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. **www.sclma.com.au**

HEALTH SERVICE LINK - MAY 2018

Hello SCLMA Colleagues,

Whilst it might sound unusual to be planning for a winter surge on the beautiful Sunshine Coast, with our 19% increase in emergency presentations over last year, and new predictive modelling which is forecasting increasing seasonal activity, our team are preparing a number of strategies to respond to both the increasing volume and complexity of patients we will care for this winter.

Our partnerships with General Practitioners (GPs) and other medical practitioners are integral to caring for patients in the community to avoid unnecessary hospitalisation. One great example is the model of care developed by Dr Michael Bint and his team for patients with Chronic Obstructive Pulmonary Disease. Through strengthening linkages with these patients and their GPs, the aim is to enhance early management of acute exacerbation to enable safe management outside of acute facilities, and where admission is required, to facilitate early discharge from hospitalisation through a dedicated nurse led home visiting program.

Additionally, we have partnered with the Primary Health Network to provide our community with greater availability of information about how to access GPs. An iPad, which connects directly to the health direct website, has been installed in the Sunshine Coast University Hospital emergency department waiting room. This is part of our approach to enable patients who may not require emergency treatment to find GPs who are open and available for appointments. I'm pleased to report that while the iPad has been installed only a few weeks, many patients are using it already.

We have also undertaken a review of our Hospital in the Home (HITH) service to identify opportunities for expanded scope, supported by strong clinical governance so that our patients transition effectively across primary and acute care. We know there are more patients that could be cared for safely, and would prefer to be cared for in their home, rather than hospital, so I look forward to sharing more about these plans in future editions.

In an effort to keep our community better informed about the services we provide, we released the first edition of our new quarterly community newsletter last week. You can download a copy of the newsletter on our [website](#).

Outpatients

We have been working hard to improve our waiting times for patients, and since early 2018, there has been an overall decrease of approximately 920 patients (or a 14.5% reduction) who have been waiting for a specialist outpatient clinic appointment.

Gastroenterology presents a challenge, with increasing demand necessitating recruitment of additional specialist medical staff soon. Additional clinics have been scheduled where capacity has been identified and the successful rollout of the GPs with Special Interest (GPSI) program has contributed to the reduction in outpatient waiting lists.

Planning for Tomorrow's Clinicians Today

Through our Sunshine Coast Health Institute (SCHI), a joint venture between the health service, TAFE Queensland East Coast, University of the Sunshine Coast and Griffith University, we are collaborating to grow our health workforce of the future.

In August/September 2018 SCHI will host a careers/education day to showcase career opportunities within the Sunshine Coast Hospital and Health Service. The event will be centred around the theme of a "Day in the life of the Health Service" and will provide information on the variety of career opportunities available to prospective clinicians.

The day will be an important opportunity for SCHI's education partners to engage with high school students to profile their education programs and discuss pathways to employment in the health sector. This will also be a wonderful opportunity for our local students and we look forward to welcoming them to the event.

Caloundra Health Service Redevelopment Progressing Well

I'm pleased to share that the Caloundra Health Service redevelopment is progressing well and on time. The temporary relocation of the Ambulatory Care Centre (ACC) on Friday, 13 April went to plan with the ACC receiving its first patients in the new location on Tuesday 17 April. Access to the service is via the reception area of the Minor Injury and Illness Clinic. It will remain in this location for approximately four to five months while their permanent location is being redeveloped.

HEALTH SERVICE LINK - MAY 2018 / cont:

Also as part of the redevelopment, the Child Development Service (located at Maroochydore), Child Protection Liaison Unit (located at SCUH) and Child Youth and Family Health (Caloundra) will collocate in the one area at Caloundra. Post redevelopment, services at Caloundra will include expanded palliative care and ophthalmology services, a diabetes service as well as a range of outpatient and community services in addition to the existing minor injury and illness clinic.

A Great Milestone for our new Paediatric Critical Care
As you know we opened the region's first paediatric critical care unit at SCUH in January 2018.

We recently cared for our 100th seriously ill child, who would have otherwise had to travel to Brisbane for care. We're so proud to be able to offer this service to our community and congratulate Dr Paula Lister, Director Paediatric Critical Care and her team for the excellent care they are providing to children and their families.

Until next time,

Adj. Professor Naomi Dwyer

Chief Executive

Sunshine Coast Hospital and Health Service

Naomi.Dwyer@health.qld.gov.au

MAY Meeting - New Members

- Dr Jonathan Langton (Radiology)
- Dr Kathleen Houston (Medical Oncology)
- Dr Simone Kaye (Gastroenterology)
- Dr David Hogan (ENT/Otorhinolary)

Pending

- Dr Brian Lewer (Anaesthesia)
- Dr Glen Mulhall (General Practice)

A reminder that membership for doctors in training is free.

www.sclma.com.au

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Got a patient with neck or spinal problems?



Dr Greg Finch FRACS FAOrthA
Spine Surgeon, Orthopaedic Surgeon

Now practising from the Nucleus Medical Centre at The Sunshine Coast Private Hospital, Buderim, Dr Finch specialises in the care and treatment of all spinal conditions.

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LMA QUEENSLAND – MAY 2018

2018-2019 Budget Submission

AMA Queensland recently released its *2018-2019 Budget Submission*. Our Submission calls on the State Government to:

- **Reform the Office of the Health Ombudsman (OHO)** to improve its accountability and fairness.
- **Establish a new Queensland Medical Education and Training Institute (QMETI)** to improve the quality of the junior doctor training experience.
- **Extend *Resilience on the Run*** – with mandatory reporting on the reform agenda, the time is right for the Government to build on their success in helping to improve the mental health of junior doctors by extending funding for AMA Queensland's successful *Resilience on the Run* program beyond the intern years to PGY2 through 5.
- **Fund a state-wide public health awareness campaign** to help combat the obesity epidemic facing Queensland.



AMA Queensland will provide a detailed analysis to our members after the Treasurer delivers the Queensland Budget on 12-15 June 2018.

You can read the full 2018 Budget Submission at www.amaq.com.au.

Mandatory reporting laws

AMA has welcomed the agreed strategy for mandatory reporting laws that emerged at the Council of Australian Governments (COAG) meeting in April. However, there are concerns about some wording in the **COAG's communique**. AMA will work to provide feedback to the state and federal ministers towards acceptable nationally consistent mandatory reporting laws.

New Strategic Plan 2018-2020

We have finalised the *AMA Queensland 2018-2020 Strategic Plan*. I welcome you to read the new Strategic Plan at www.amaq.com.au. We will update members on progress towards these goals in the coming months.

If you have any issues you feel need AMA Queensland's attention, feel free to drop us a line. We are always happy to get your thoughts directly via membership@amaq.com.au.

Jane Schmitt

Chief Executive Officer, AMA Queensland

DIRECTING PEOPLE TOWARDS APPROPRIATE CARE

by Pattie Hudson, Central Queensland, Wide Bay Sunshine Coast PHN CEO

As a key area of focus in our health system, Our PHN is committed to helping people find and access health care that is most appropriate for their needs. A number of reviews have shown there is generally a poor understanding of the available and appropriate options for accessing primary care. These reviews have mainly looked at the After Hours period. However, there is also the challenge presented by those who attend Emergency Departments with minor symptoms that could be addressed in primary care.



If we are to make a meaningful impact on the awareness in our community then we need to explore new ways of linking people to appropriate services. There are a range of ways we can do this, from public awareness campaigns to innovative support offered directly to the individual. By keeping people informed of their alternatives, there is an opportunity to reduce the pressure on our emergency departments.

The evidence shows that patients experience better outcomes for a variety of conditions when treated in primary care rather than in the hospital setting. We know that patients experience better continuity of care, especially when treating chronic conditions and co-morbidities. We feel that it is important to identify opportunities to inform and guide patients in accessing primary care services.

As an exciting new innovative initiative, we are pleased to be collaborating with the Sunshine Coast Hospital and Health Service to place an iPad in the Sunshine Coast University Hospital Emergency Department. This iPad comes preloaded and locked to the HealthDirect app for access to a reliable information service. Patients will be able to check their symptoms, find primary health providers that are currently open and find further information on a variety of topics or conditions.

This presents a great opportunity to target individuals who are currently in contact with health services and may be better treated outside of the hospital. This includes letting them know which general practices are operating in their area.

As we are actively directing community members to refer to HealthDirect, I would encourage all practices in our region to update their details in the National Health Services Directory. If you are not registered you can complete an online form. Any change of details can be processed by emailing nhsd@healthdirect.org.au. If you need any help in this process, you can contact your local Practice Support Officer.

You can find the contact details for your local Practice Support Officer on our website at:

<https://www.ourphn.org.au/practice-support/>

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GP Liaison: Your Hospital Connection – May 2018



"In the GP Liaison unit, we're always looking for opportunities within the health service to improve communication and clinical handover to primary care.

One recent opportunity has been the review and redesign of the **internal referrals** process (when a speciality team refers the patient to the outpatient clinic of different specialty). Improvements will streamline referral pathways, and communication with GPs. These changes are part of local service alignment with the Queensland Health Specialist Outpatient Services Implementation Standard.

Improved Communication for GPs around Internal Referrals

GPs will notice some positive changes:

1. From July 1st, the patient's regular GP should receive a faxed copy of the internal referral when it is created (with patient consent).
2. Queensland Health no longer encourages non-urgent internal referrals, if the issue is not considered 'associated care' with the current issue. This is because the regular GP is best-placed health professional to determine the appropriate care and/or referral pathway for a new, non-urgent issue.

Triaging specialists are encouraged to apply the same state-wide specialty-based Clinical Prioritisation Criteria (CPC) to internal referrals that are applied to GP referrals. If an internal referral is received from another specialty unit and is determined to be non-urgent and not associated with the current issue, it will be removed. The GP will receive a letter explaining this, and the patient will be also sent a letter asking them to see their GP to discuss the issue. The GP can then review the issue with the patient, and together they can determine the most appropriate care and/or referral pathway for the new issue.

As always, if you would like to provide any feedback or alert us to areas for improvement within the GP-hospital interface, we welcome your emails and phone-calls on the contact numbers listed on this page. "



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Contact the GP Liaison Unit

Dr Michelle Johnston (GPLO)
Dr Marlene Pearce (GPLO)
Dr Edwin Kruijs (GPLO)
 Merrin Godwin (Clinical Nurse)
 Peta-Maree Willett (Project Officer)
 Sue Hawkins (Administration)

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

AMA NATIONAL CONFERENCE

Dr Wayne Herdy

As I do most years, I attended AMA National Conference in Canberra from 25th to 27th May.

One of the highlights of National Conference is the address by the Minister for Health.

This year, Greg Hunt started by getting the audience (of doctors) on side by reminding us that "Australia has the best doctors and the best medical workforce in the world" and the best medical outcomes in the world. I am fond of quoting that Australia has the second-longest life expectancy in the world, and if we excluded our indigenous failures and excluded the small population of centenarians on the Japanese island of Okinawa, we would probably have the highest life expectancy in the world. The Minister went on to say that we achieve this with a medical budget of 10% of our GDP, about the same as OECD averages. This compares very favourably with 20% of GDP spent in USA for much less attractive health outcomes.

The Minister continued on a positive note by reminding us that indexation of MBS rebates would resume in July for GP's (he forgot to mention that specialists will have to wait much longer, or that GP's have foregone \$100M while he rebates were frozen). He kept on the positive note by reminding us that a review of the MBS is taking place, although he did not add to our joy by giving any details of the review.

He was proud to announce the ongoing implementation of My Health Record, the central electronic health record, as an opt-out model. He expects participation by 75% of GP's and 75% of hospitals by the end of 2018. He was not so optimistic about specialist engagement.

He made several mentions about reform of private health insurance, espousing the principles of affordability and value for money. Throughout his speech, he was unable to give any more detail about what reforms are actually going to see the light of day.

The Minister reiterated what we already know about the third wave of reform detailed in the recent Budget – the workforce reforms, research funding, money for primary care, mental health care, and aged care. He was particularly proud of the changes to the PBS, even though the expensive additions will only benefit a small number of patients and have rather little real impact on life expectancy.

Specific measures contemplated in the Budget included Cystic Fibrosis screens, more funding for cataract surgery, MRI funding for prostates, and 3D mammograms.

The Minister made another new announcement about specific proposed new funding for wound management, but this is still subject to referral to a Medicare Task Force (don't hold your breath).

On the topic of the proposed Health Care Homes, he ceded that the project was "failing to meet its targets". Later in the day, the opinion was voiced that Health Care Homes are dead in the water, although there are still some who hope that the project can be resuscitated.

On workforce issues, the Minister repeated the usual mantra of need for special care to the rural and regional workforce, to teach and train and retain doctors in the bush, but there was not a lot of substance to the mantra. He did announce 100 extra junior doctor places with incentives for young doctors to train and stay in rural and regional locations.

Minister Hunt finally turned his attention to the future. He made a new announcement about primary care, advocating universal coverage and a level playing field, but I did not hear any details about what this meant. He spoke about indigenous health, with special attention to the HTLV virus. What did attract the attention of the audience was when he addressed the problem of the mental health of health workers, acknowledging the stress and challenges of our profession, but he attracted applause when he predicted an imminent national end to mandatory reporting. The Minister acknowledged that this will encourage and allow doctors to seek help from people they know and trust, without attracting a penalty.

Overall, the audience came away with a sense that this is a Minister who is not anti-doctor and who has a sincere intent to improve health outcomes by recruiting the cooperation of the medical profession.



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Buderim Private Hospital

SCLMA column

May 2018



Dear SCLMA colleagues,

I am writing to let you about some exciting developments taking place at the Buderim Private Hospital over the coming months.

Private Emergency Centre

Firstly, it gives me great pleasure to announce that the Sunshine Coast's first private Emergency Centre will open here at the hospital in August. The Emergency Centre's experienced emergency physicians will provide specialist care for medical emergencies 24 hours seven days a week, including all public holidays.

Buderim Private Hospital will team up with experienced independent medical specialist emergency group, Care 24/7 to deliver the service. Care 24/7 already provides private medical emergency care to other major hospitals, including Calvary Wakefield Hospital in Adelaide.

Any member of the community will be welcome to present at the Emergency Centre. No health insurance is needed, however like all private emergency centres, most people will have an out-of-pocket fee regardless of whether or not they have private health insurance.

For those patients requiring admission to a hospital and further treatment:

People with private health insurance could be admitted directly to the Buderim Private Hospital and access its leading specialists;

Patients without private health insurance could choose to either self-fund their hospital stay at the Buderim Private Hospital or be transferred to a public hospital;

Children with complex medical issues requiring further treatment and admission to hospital will be referred or transferred to the Paediatric Ward at the Sunshine Coast University Hospital.

We would like to invite you to attend a special information night prior to the launch which will also include a tour of the facility – stay tuned to receive your invitation to this exclusive event. Other opportunities for GPs to find out more about the private Emergency Centre will also be made available over the coming months.

New outpatient programs

We have recently launched three new outpatient day programs in both rehabilitation and mental health to benefit your patients. Like our new private Emergency Centre, these programs have been developed based on strong feedback and demand from our local community.

Overcoming Pain Program: The Overcoming Pain Program uses an interdisciplinary 'whole-person' approach, which focuses on promoting self-management plans to meet individual needs by providing education to improve patients' knowledge and understanding. Patients learn to implement strategies to improve their ability to manage their condition and pain experience, and gain control over their life.

The referral form is available by accessing buderimprivatehospital.com.au/pain. Call our rehabilitation team on 07 5430 3273 for more information.

Dialectical Behavioural Therapy (DBT) Skills Training Program: The Dialectical Behavioural Therapy Skills Training Program is aimed at helping people learn skills to better tolerate high levels of distress, regulate emotions and improve resilience to 'negative' emotions, and be more effective in interpersonal relationships. The program is a group program which is held once per week for three hours, for a period of 26 weeks.

Call our Cooina Mental Health Service team on 1300 780 413 or visit : buderimprivatehospital.com.au/DBTProgram for more information.

Women's Health Clinic: The Women's Health Clinic offers a one-on-one physiotherapy based service which utilises the latest technology and multi-disciplinary expertise.

/ cont: next page

The clinic appreciates the individuality of each woman and caters to her unique needs and includes education, assessment, pelvic floor and core re-training and exercise programs, prescription of supportive garments or devices, development of home-based programs and self management techniques.

The referral form is available by accessing buderimprivatehospital.com.au/womenshealthclinic. Call our rehabilitation team on 07 5430 3273 for more information.

Men's Health GP CPD Conference

Come along to our annual Men's Health GP Conference at the Mantra in Mooloolaba on Saturday 28 July to hear the latest updates about men's health from our specialists. Registration is free and 40 Category 1 QI&CPD points have been applied for.

For more information about the day's program, including the speakers and their presentations, as well as to register for the event online, visit buderimprivatehospital.com.au/gpeducation.

I invite you to reach out to me about any of the services, programs or events mentioned above - I would be happy to answer any questions you may have.

I also encourage you to subscribe to receive our *GP Nexus* e-newsletter to have the Buderim Private Hospital's news delivered straight to your inbox – simply visit buderimprivatehospital.com.au/publications to enter your details and subscribe.

Kind regards,

Wallis Westbrook
General Manager

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



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Dr Marcel Knesl

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- Wide-ranging practice
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admin.maroochydore@roc.team
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BOOK NOW

2018 Men's Health Conference



Get the latest updates on men's health from your local specialists
40 category 1 QI&CPD points have been applied for
Online registrations can be completed by visiting buderimprivatehospital.com.au/gpeducation



 **X-RAY & IMAGING**

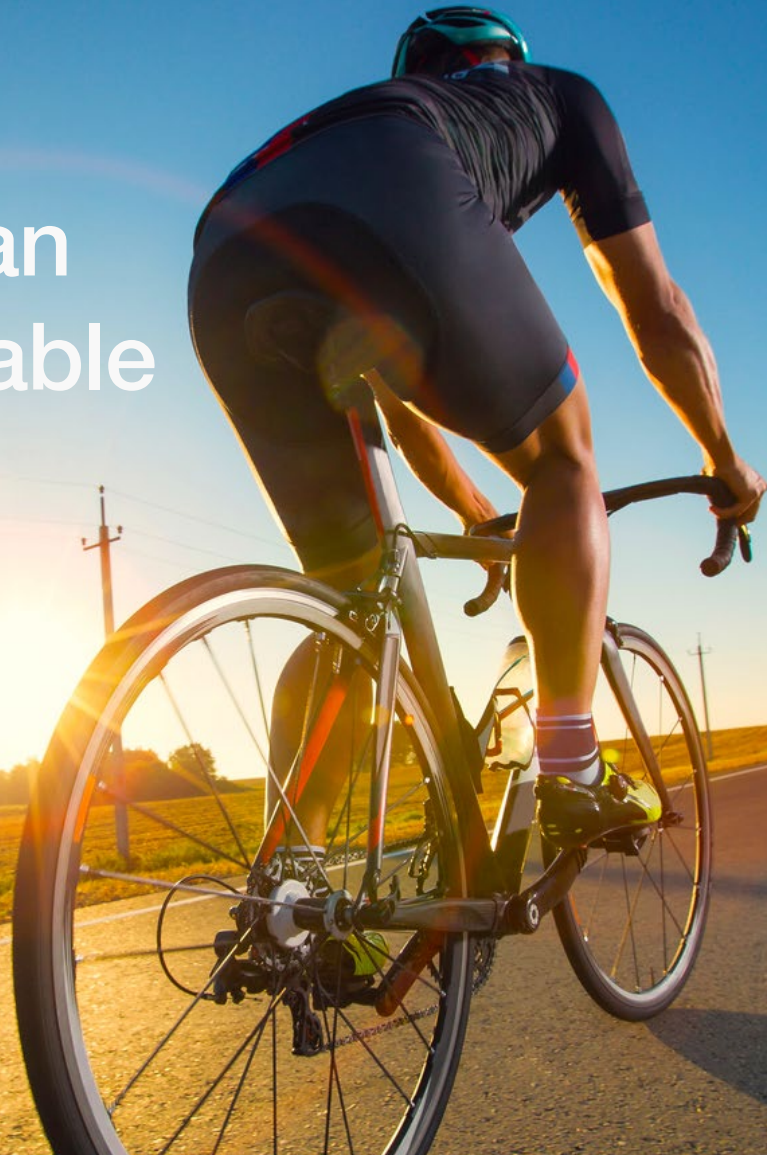
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A/Prof Troy Gianduzzo

Surgeon of Excellence in
Robotic Surgery TM



A/Prof Troy Gianduzzo is accredited as a Surgeon of Excellence in Robotic Surgery TM by the Surgical Review Corporation in conjunction with the Wesley Hospital's accreditation as a Centre of Excellence in Robotic Surgery TM.



Dr Tony Gianduzzo

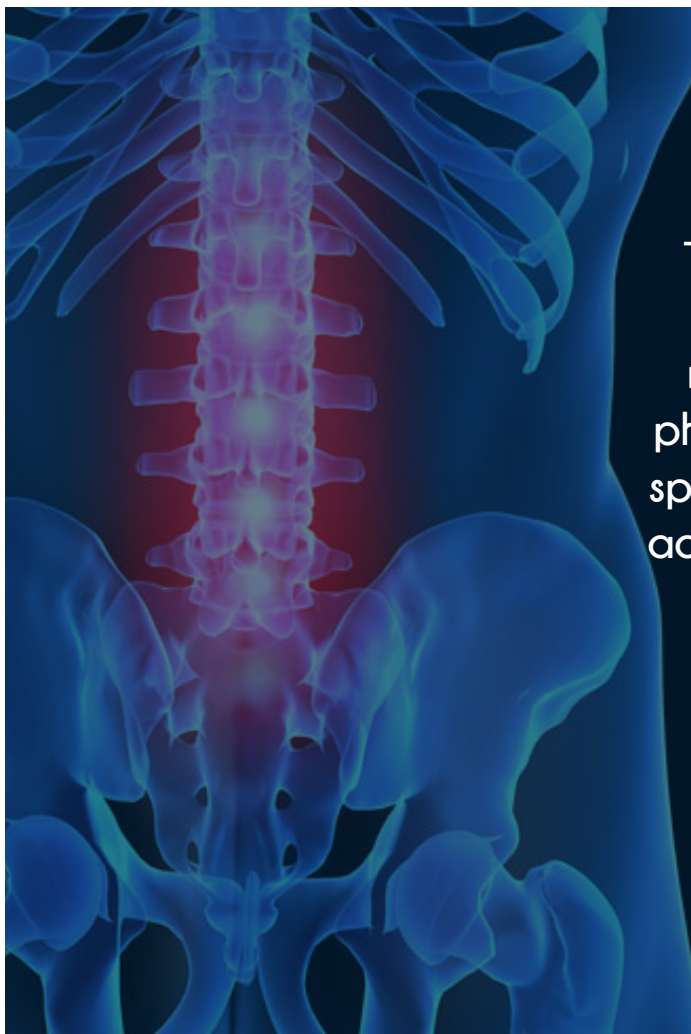
Prostate cancer diagnostics
MRI/ Robotic-assisted biopsy

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P 07 5444 0672 **F** 07 5444 0997
E info@buderimprostateclinic.com.au
A Suite 2, 5 Lyrebird Street,
Buderim, Queensland, 4556.
W buderimprostateclinic.com.au

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



BACK REHAB PROGRAM

The Functional Back Rehabilitation program aims to improve and/or restore the ability to perform daily physical tasks, occupational or sports specific tasks, simple or complex motor activities with ease, efficiency, strength and control.



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JUNE 30 2018 IS JUST AROUND THE CORNER



Over the years the ATO has continued to wise up and reduce or completely remove previously available deductions.

Years ago when year end approached it was a crazy shuffle of money, cheques and paperwork. The ATO has sealed a lot of the old cracks, but there are still a few legitimate areas remaining that you can address prior to year end.

Below are a few standard business items for you to look at prior to the end of the Financial Year 30th June 2018 -:

- Are you under the \$10M turnover? You may be eligible to claim a 100% immediate write-off for eligible items of plant < \$20,000 (GST exclusive amount) This concession was to cease at midnight 30th June 2018 but has been extended to 30th June 2019 in Federal Budget 8th May 2018.
- If you are wanting to reduce your annual profit
 - Pay any superannuation liabilities before June 30 so it reduces the 2018 tax position. The contributions must be cleared funds by 30.06.2018 in the recipient's Superfund to claim a deduction for 2018. With super clearing houses and electronic transfers we would suggest making these contributions no later than 21st June to ensure they clear;
 - Review your depreciation schedule for obsolete items;
 - Perform a full stock-take and write off obsolete stock;
 - In limited circumstances prepayments of interest, subscriptions or insurances can be deductible;
 - Consider paying bonuses to staff;
- If you have to purchase consumables consider purchasing them prior to 30th June, this gets your deduction in this year;
- The maximum concessional superannuation contribution for 2018 is \$25,000 per taxpayer, irrespective of age.

Superannuation: Changes applicable from 1 July 2017:

1. The annual non-concessional cap has dropped to \$100,000. (this is non deductible contribution by you into your super fund)
 2. The brought forward rule also dropped to \$300,000 for anyone under 65.
 3. The amount which can be in a tax-free pension became \$1.6M per individual from 1st July 2017.
 4. Anyone with over \$1.6 M in superannuation will not be eligible to make non-concessional contributions.
 5. Make sure over the next few months you remain under the \$25,000 concessional component.
- The existing superannuation age requirements and work test will continue to apply.

We are here to help if you have any questions so please call **07 5437 9900**.

Kerri Welsh
Senior Manager

Next Month – We will review the Federal Budget in detail and let you know the important issues that could affect you or your patients.

Please note - The above does not constitute tax advice and readers should seek advice for their individual circumstances from their trusted advisor.



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.



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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.



New Medicare Support for Prostate 3T and 1.5T MRI Scans

Sunshine Coast Radiology is pleased to announce that from 1 July 2018 there will now be Medicare support for MRI prostate scans, when referred by urologists, radiation oncologists and medical oncologists.

We provide access to advanced MRI prostate scans at several locations, including a full license 3T MRI at the Sunshine Coast University Private Hospital and a 1.5T MRI at its Maroochydore clinic. The referred service can be performed at both of these locations.

The increase in field strengths give the 3T MRI the following advantages:

- Increased spatial resolution for improved anatomical detail
- Increased number of high resolution images during dynamic contrast enhancement
- Higher diffusion (values) are better at 3T because of increased signal
- An endo-rectal coil is not needed at 3T which ensures less discomfort for your patient

Widely recognised and respected throughout Australia for quality imaging, diagnostics and patient care, Sunshine Coast Radiology was inducted into the Sunshine Coast Business Awards Hall of Fame in 2017 for excellence in business. Our entire team continues to strive to improve health outcomes across the region, through prostate MRI scans and other high quality diagnostic imaging services.

Full license 3T MRI at SCUPH

Sunshine Coast University Private Hospital

3 Doherty St, Birtinya, QLD 4575

Partial license 1.5T MRI at Maroochydore

Maroochydore

60 Wises Road, QLD 4558

All GP and Specialist referrals are accepted.

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GP Network Groups

GP Network Coordinators Required

- South Sunshine Coast (Caloundra & surrounds)
- Central Sunshine Coast (Maroochydore, Buderim, Nambour)
- Gympie
- North Coast Hinterland (Cooroy & Surrounds)

Growing a connected community of GPs

The PHN is committed to helping GPs connect with each other through:

- Educational events
- Peer networking
- Advocacy for the profession

General Practice is the cornerstone of Australia's healthcare system and requires a strong clinical leadership to ensure successful integration with other healthcare organisations. The PHN provides opportunities for GPs to become more connected.

✓ Join a GP Network

The PHN has a number of GP Network groups that meet several times a year for educational events. These are held over breakfast or dinner at a café within the GP Network catchment area. They are financially supported by the PHN and other sponsors. We are always looking for more GP Network Co-ordinators to help organise these events. To join a GP Network, or for information about becoming a GP Network coordinator, please contact Karen Mansley kmansley@ourphn.org.au

✓ Subscribe to the **GP Matters** e-newsletter

The PHN produces a weekly clinical eNewsletter, tailored to the needs of GPs. We will keep you up to date with primary health news in our region. To subscribe to *GP Matters* or if you have something you'd like to submit to our newsletter, please get in touch at communications@ourphn.org.au



"Bird in Hand - Digging for Gold!"



The Adelaide Hills, some 30 minutes, north of Adelaide, is one of the most picturesque and accessible wine areas in the world. The warm climates of Barossa and McLaren Vale hover nearby but swelter in the summer, resulting in big bold super Aussie wines.

400-600 m above sea level places the Adelaide hills in to the cooler climate category but still allows the fruit to ripen. Andrew Nugent and his father Michael, founders of Bird in Hand Winery, recognised the desirability of a slower ripening process thus leading to elegance and structure. The Bird in Hand vineyard derives its name from the old gold mine formerly on the 80-acre site.

Andrew studied agriculture at Roseworthy and was drawn to viticulture. He had a clear vision of wanting to make world class wine. With a methodical metred plan, the family owned company is an internationally award-winning winery. Massive export trade, a wonderful onsite restaurant and other facilities including a concert stage featuring rock, jazz and classical events makes this a truly a 5-gold star industry leader.

The Nugent family is close, encompassing all involved with the winery. Whilst some have found their calling in medicine, Andrew and Justin Nugent help the flight path of Bird in Hand. Justin has shone in his brief of marketing and sales export. Justin believes that one of the keys to success of Bird in Hand was the development of olive production in the early days. Restaurants became familiar with the superior product of olives and olive oil. He believes this imprinted the Bird in Hand brand in the gastronomic circles and facilitated the insertion of the wine portfolio.

Grapes grown include Shiraz, Cabernet Sauvignon, Merlot, Chardonnay, Sauvignon Blanc and Italian varieties such as Montepulciano, Nero D'Avlo, and Arneis. Riesling is grown in the Clare valley and Pinot Grigio/Gris is sourced from around the Adelaide Hills region.

Four tiers of wine exist. "Two in Hand" for every day drinking, "Bird in Hand" for that higher end occasion, The "Nest Egg" for cellaring and long-term maturation. "The Tribute series" is made only in certain vintages and represents the crème de la crème of the portfolio.

Kim Milne MW is the master wine maker. A graduate of Roseworthy, he travelled to New Zealand and was instrumental in the international development of Villa

Maria. He is a Sydney Wine Show judge and was Australian winemaker of the year in 2014 and 2015. Dylan Lee and Jared Stringer with multi regional and international experience round out this formidable wine making team.

The Bird in Hand team excel in clonal selection for grape varieties, appropriate use of new and vintage French oak and have the uncanny knack of expressing many facets that make up the local terroir. When you drink Bird in Hand, you are tasting the passion and vision of the whole family.

Wines Tasted (Plenty of them)

- Bird in Hand Adelaide Hills Sparkling Pinot Noir 2017- Light Salmon pink in colour with nice bead. Strawberries and cream in a bottle. Enjoy as an event starter.
- Bird in hand Adelaide Hills Pinot Rose' 2017- Pale pink colour, with strawberries into cherries. Balanced fruit and acidity with very fine tannin from a few hours skin contact make this a great Rose'. Enjoy with Gravlax salmon.
- Bird in hand Adelaide Hills Chardonnay 2017- Pale yellow. White peach, lemon citrus and slight yeasty notes. Wonderful fruit, acidity and restrained oak make this a cracker.
- Bird in Hand Adelaide Hills Shiraz 2016- dark garnet colour, plums, olive, spice on the nose, abundant fruit supported by restrained tannins. Cellar 10 years
- Bird in Hand Adelaide Hills Cabernet Sauvignon 2016- ruby with purple hues. Savoury Cassis notes with tobacco and violet notes. Voluptuous fruit integrated with bold tannins that create an outstanding wine. Cellar 12 years.



DOUBLE-DIPPING MEDICARE FUNDING POOL

Dr Tim Leeuwenburg

COST-shifting. Ask any doctor at the primary care coalface and they'll tell you about the tension between public hospital services (funded by the states) and services provided in primary care (privately billed, but for which eligible services attract a Medicare rebate).

Funding rules for health in Australia are carefully laid out in the [National Health Reform Agreement](#) (NHRA). This makes it clear that states are to manage public hospitals and that charges against the Commonwealth are not to be raised; while the Commonwealth carries the lead responsibility for primary health care and other private health services.

But there is a loophole. NHRA clause G19(b) allows patients to claim Medicare rebates for their public hospital visits when they have chosen a specific named consultant who treats them "as a private patient":

G19. An eligible patient presenting at a public hospital outpatient department will be treated free of charge as a public patient unless:

- a. there is a third party payment arrangement with the hospital or the State or Territory to pay for such services; or
- b. the patient has been referred to a named medical specialist who is exercising a right of private practice and the patient chooses to be treated as a private patient.

While Medicare in general does not require referrals to be "named", NHRA clause G19(b) does, specifically to support patient choice. Meanwhile, NHRA clause G17(c) is very specific that referral pathways must not be controlled so that a referral to a named specialist is a prerequisite:

G17. Services provided to public patients should not generate charges against the Commonwealth MBS [Medicare Benefits Schedule]:

- a. except where there is a third party payment arrangement with the hospital or the State, emergency department patients cannot be referred to an outpatient department to receive services from a medical specialist exercising a right of private practice under the terms of employment or a contract with a hospital which provides public hospital services;
- b. referral pathways must not be controlled so as to deny access to free public hospital services; and
- c. referral pathways must not be controlled so that a referral to a named specialist is a prerequisite for access to outpatient services.

This is why primary care doctors are frustrated with repeated requests from hospital outpatient departments for named referrals for specific consultants in public hospital outpatients. These requests are often crafted to imply that a named referral is a mandatory requirement for the patient to be seen – with the (sometimes explicit) corollary that failure to comply will deny access. Requests may offer patients the opportunity to be bulk-billed and not the choice to be treated as a private patient. Sometimes a named referral officer may claim to have contacted the patient and obtained their informed consent.

There's another loophole: because Medicare does not require a named referral, once a named referral has been obtained, the patient's choice of doctor is dismissed as an inconvenience and a clerk allocates the patient to any doctor or clinic that suits the State. The patient might even be treated by a registrar in "Dr X's" clinic.

This cost-shifting from the State to the Commonwealth funding pool flies under the radar of both Medicare and the [Professional Services Review \(PSR\) panel](#). The PSR exists to monitor appropriate billing of Medicare item numbers and has no oversight of the NHRA requirements. Medicare seems to lack any means to match data between Commonwealth and State activity, and is thus blind to this cost-shifting cash grab by state hospitals.

The biggest lever to improve Medicare rebates for primary care is the political desire to keep the populace happy. Primary care doctors are concerned that bulk-billing rates are being artificially inflated as public hospitals cost-shift into Medicare and bulk bill for outpatient services, which would be ineligible if a named referral had not been extracted.

But there ain't no such thing as a free lunch! Medicare is not a magic pudding because there is a single, finite [National Health Funding Pool](#).

Primary care doctors who are members of the 5800-strong GPs DownUnder Facebook group, are concerned that demands to legitimise public hospitals access to the community care end of the funding pool are increasing. Meanwhile, the most cost-effective component of the health system – primary care – remains stranded in the frozen shallow end of Medicare rebates. It just doesn't pass the "pub test" that patients who choose to be treated as a private patient of a named specialist lose that choice as soon as the public hospital extracts the Medicare funding.

Link to full article :

<https://www.doctorportal.com.au/mjainsight/2018/19/double-dipping-medicare-funding-pool/>

Dr Tim Leeuwenburg is a rural proceduralist on Kangaroo Island, South Australia. He spends his time balancing primary care, emergency medicine and anaesthesia, as well as writing "roadkill recipe" cookbooks and fiddling with chainsaws. When not working, he is an active contributor to FOAMed (free open access medical education) and social media. He's an administrator for the GPs DownUnder and Rural Anaesthesia DownUnder closed Facebook groups. He blogs at Kldocs.org and tweets as @kangaroobeach. This is the fifth article in a monthly series from members of the GPs Down Under (GPDU) Facebook group, a not-for-profit GP community-led group with 5800 members, that is based on GP-led learning, peer support and GP advocacy.

**SUNSHINE COAST LOCAL MEDICAL ASSOCIATION Inc.
MANAGEMENT COMMITTEE MEETING
THURSDAY 22 MARCH 2018
Maroochydore Surf Club Board Room
Accepted at Committee Meeting 26 APRIL 2018**

Attendance: Drs Roger Faint, Mark de Wet, Wayne Herdy, Peter Ruscoe, Kirsten Hoyle, Scott Masters, Jon Harper, Mason Stevenson, John Evans, Tau Boga, Fabio Brecciaroli, Alicia Lorenz, Jonathan Last. Observer Jo Bourke. SCHHS Chief Executive Adj. Professor Naomi Dwyer attended the later part of the committee meeting.

Apologies: Drs Tamer Aly, Marcel Knesl, Grant Eddie.

(1): Minutes of last meeting: 30 November 2017

Due to the absence of a Quorum at meeting held 22 February 2018, a Flying Minute was circulated in relation to draft Minutes 30 November, Approval of accounts for payment and Acceptance of membership application from Dr Troy Gianduzzo. The Minutes were accepted via responses to the Flying Minute.

(2): Minutes of last meeting: 22 February 2018

Moved: Mark de Wet. Seconded: Roger Faint. Accepted.

Business arising from Minutes: Nil

President's Report: *Dr Roger Faint*

- Meeting with Adj. Prof Naomi Dwyer, CE, SCHHS held 22 February (with Drs John Evans and Jon Harper present) was pleasant and worthwhile.
- Items discussed included; Outpatients' waiting list, Ramsay contract and surgical trainees regaining accreditation;
- Jon Harper reported on meeting with Tania Morris – Pain Clinic (Chronic). Wait times are within timeframe. Tanya Morris happy to give advice regarding patients with pain. Phone number for AO (rather than Reception) to be published in the newsletter.
- John Evans discussed credentialing, pointing out inefficient and clumsy process, poor computer access/usage, difficult program.

Vice President's Report: *Dr Wayne Herdy*

- AMAQ National Congress – positions have been taken.
- Wayne has volunteered for the position of Queensland Area Representative on the AMA Federal Council.

Secretary's Report: *Dr Mark de Wet*

Correspondence In: Nil

Correspondence out: Nil.

Business arising from Correspondence: N/A.

Treasurer's Report : *Dr Peter Ruscoe*

(a) Accounts to be paid:

- Australia Post – Account Feb 2018
- Australia Post – PO Box Renewal
- Insurance – Directors & Officers Liability
- Telstra – (part account Feb-Mar 2018)
- Jo Bourke – Secretariat Feb 2018
- Jo Bourke – Adobe CC subscription Feb 2018
- Jo Bourke - Newsletter March 2018
- Snap Printing - Newsletter March 2018
- Snap Printing – Mship Renewals & Receipts 2018

The Treasurer moved that the accounts as presented be approved for payment. Seconded: Mark de Wet. Approved.

(b) Membership Report:

- Dr Siobhan MacDonald (General Practice)
- Dr Simone Kaye (Gastroenterology)

Peter Ruscoe moved that the membership applications as presented be accepted. Seconded: Mark de Wet. Accepted.

AMAQ Councillor's Report: *Dr Wayne Herdy - Nil*

Meetings Convenor Report: *Dr Scott Masters*

- Social function date set for Saturday 18 August 2018.
- Suggested venue is Headlands Golf Club.

Hospital Liaison Report: *Apology*

PHN Country to Coast Report: *Dr Jon Harper*

Stepped Care Mental Health Program – PHN has commissioned Artius Health to provide the new Commonwealth funded mental health services. Stepped Care is a paradigm shift away from a one-size-fits-all model of psychological therapy. Referred patients have an assessment of their level of need and circumstances and are streamed into one of the following:

**SCLMA MANAGEMENT COMMITTEE MEETING
THURSDAY 22 MARCH 2018
Maroochydore Surf Club Board Room
Accepted at Committee Meeting 26 APRIL 2018**

- Low intensity Cognitive Behaviour Therapy (LiCBT) individual program.
- Child and youth primary mental health care services - Clinical care-coordination.
- Psychological therapies for under-served groups (similar to previous ATAPS program).
- Services for people with severe mental health illness - Clinical care coordination by mental health nurse.
- Suicide prevention after-care services.
- Aboriginal and Torres Strait Islander mental health services - Clinical care coordination.

- Number of specialists in both private and public work
- The closure of the GP government clinic in Noosa.

Meeting Close: 19.10

Next meeting: Thursday 26 April 2018

Maroochydore Surf Club Function Room.

Dr Mark de Wet, Honorary Secretary.

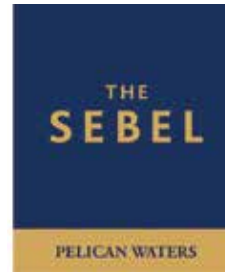
General Business:

Adj. Prof Naomi Dwyer, CE, SCHHS joined the meeting and was welcomed by all.

Informal discussion on a number of subjects –

- SC vocational forum – students at school to have work experience (Mark de Wet spoke to this;
- Noted that Noosa patients have long trip to SCUH

CHRISTMAS IN AUGUST - 18 AUGUST 2018



INVITATIONS TO ATTEND

AND INVITES TO SPONSOR

WILL BE SENT THIS MONTH!

REDCLIFFE LOCAL MEDICAL ASSOCIATION NEWSLETTER

Redcliffe LMA produces a similar newsletter

For full details re advertising go to their website:

www.rdma.org.au

Email: RDMAnews@gmail.com

ADVERTISING GUIDELINES:

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

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

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

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

PLEASE NOTE THE FOLLOWING:

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

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



Take a moment

- CALLER: Is this Tony's Pizza?
- GOOGLE: No sir, it's Google Pizza.
- CALLER: I must have dialed a wrong number. Sorry.
- GOOGLE: No sir, Google bought Tony's Pizza last month.
- CALLER: OK. I would like to order a pizza.
- GOOGLE: Do you want your usual, sir?
- CALLER: My usual? You know me?
- GOOGLE: According to our caller ID data sheet, the last 12 times you called
- you ordered an extra-large pizza with three cheeses, sausage, pepperoni, mushrooms and meatballs on a thick crust.
- CALLER: OK! That's what I want ...
- GOOGLE: May I suggest that this time you order a pizza with ricotta, arugula, sun-dried tomatoes and olives on a whole wheat gluten-free thin crust?
- CALLER: What? I detest vegetables..
- GOOGLE: Your cholesterol is not good, sir.
- CALLER: How the hell do you know?
- GOOGLE: Well, we cross-referenced your home phone number with your medical records. We have the result of your blood tests for the last seven years.
- CALLER: Okay, but I do not want your rotten vegetable pizza! I already take medication for my cholesterol.
- GOOGLE: Excuse me sir, but you have not taken your medication regularly. According to our database, you only purchased a box of 30 cholesterol tablets once, at Drug RX Network, 4 months ago.
- CALLER: I bought more from another drugstore.
- GOOGLE: That doesn't show on your credit card statement.



Maroochydore Surf Club is offering FREE Membership to SCLMA members! This entitles members to a number of discounts and information re coming events and promotions. Go to reception any time, mention you are SCLMA and eligible for free membership and complete an application.

Those who completed a form at the March meeting have already had their Maroochy Surf Club membership cards mailed to them.

- CALLER: I paid in cash.
- GOOGLE: But you did not withdraw enough cash according to your bank statement.
- CALLER: I have other sources of cash.
- GOOGLE: That doesn't show on your last tax return unless you bought them using an undeclared income source, which is illegal.
- CALLER: WHAT THE HELL?
- GOOGLE: I'm sorry, sir, we use such information only with the sole intention of helping you.
- CALLER: Enough already! I'm sick to death of Google, Facebook, Twitter, WhatsApp and all the others. I'm going to an island without internet, cable TV, where there is no cell phone service and no one to watch me or spy on me.
- GOOGLE: I understand sir, but you need to renew your passport. It expired six weeks ago.



Your pathology provider on the Sunshine Coast

Results (24 hours)

P: 1300 778 555

Added tests

P: (07) 3377 8528

Sonic Dx / IT Support

P: 1800 100 769

Doctor Stores Request

F: (07) 5459 1440

Faxed Pathology Request Forms

F: (07) 5459 1440

www.snp.com.au

Local Laboratories

Birtinya P: (07) 5459 1400

Kawana P: (07) 5459 1433

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

MEMBERSHIP APPLICATION

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

NAME	Surname:		First Name:	
EMAIL: _____				
<i>THE SCLMA PREFERS TO CONTACT MEMBERS VIA EMAIL WHEREVER POSSIBLE.</i>				
PRACTICE ADDRESS: For members who wish to receive hard copies (instead of by email) of the monthly invitation & newsletter by Sullivan Nicolaides Pathology Couriers to avoid postage costs.				
	Practice/Building			
	Street:			
	Suburb:		Postcode:	
	Phone:		Mobile:	
PRACTITIONER DETAILS:				
	Qualifications:			
	Date of Birth:		Year of Graduation:	
	Hospital employed / Private Practice (cross out one)			
	General Practice / Specialist (cross out one)			
	Area of Speciality:			
PLEASE NOTE: <i>Retired doctors who wish to join the Association are required to attach a letter of good standing from their respective College.</i>				
PROPOSERS: (to comply with the Queensland Associations Incorporation Act, two financial members of the Association are required to nominate each applicant for <i>new</i> membership. Members <i>renewing</i> their membership do not need proposers).				
1. NAME:		Signature:		
2. NAME:		Signature:		
ANNUAL SUBSCRIPTION (GST included): Full-time ordinary members - GP and Specialist Doctor spouse of full-time ordinary member Absentee or non-resident doctors Part-time ordinary members (less than 10 hours per week) Non-practising ordinary members, under 60 years old Residents & Doctors in Training Non-practising ordinary members, over 60 years old Patron and honorary members	(Please tick)		PLEASE COMPLETE:	
	\$ 110		Your Monthly Invitation?	
	\$ 55		By Email?	
	\$ 55		By Courier?	
	\$ 55		By Post?	
	\$ 55		Your Monthly Newsletter?	
	Free		By Email?	
	Free		By Courier?	
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: <i>Membership applications will be considered at the next Management Committee meeting.</i>				

The Sunshine Coast Local Medical Association has Public Liability Insurance

CLASSIFIEDS

KON-TIKI MEDICAL CENTRE IS HIRING DOCTORS -

Join the Sunshine Coast's best new Medical Centre!
www.kontikimedical.com.au

- We are recruiting GPs on a permanent basis to join our dynamic team of Doctors, Nurses and Specialists.

For a confidential discussion, contact – Kimberley on 0414 889 079 or email Kimberley@krsolutions.com.au
February 2018

GENERAL PRACTITIONER (VR) - MIXED BILLING - SUNSHINE COAST QUEENSLAND

- Fantastic opportunity for a VR GP to join our extremely busy medical practices in the beautiful Sunshine Coast hinterland, only 10 minutes from pristine beaches.
- Minimum \$4000 a week guarantee for 3 months (full time equivalent)
- Established over 50 years, we have placed ourselves as one of the best in terms of quality patient care in our area. We offer the very latest in technology and facilities, flexible working conditions and a very attractive remuneration.

Why work for us?

- Minimum \$4000 a week guarantee for 3 months (full time equivalent)
- Non-corporate practice, avoid restrictive agreements
- Well-established, busy practice in the hub of the Sunshine Coast
- Well-established patient base, hit the ground running
- Outstanding support from the administration and nursing team
- Very loyal patient base
- On-site parking
- Large rooms with windows
- Fully computerised with remote access

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

March 2018

GP WITH EXPERIENCE AND INTEREST IN COSMETIC MEDICINE

We are looking to expand our cosmetic services in a thriving and modern Dermatology practice on the Sunshine Coast.

- A special opportunity exists for a GP with experience in Botox, Peels and Laser treatments with a keen interest to learn new techniques.
- Flexible sessions for cosmetic consultations and treatments are available.
- We offer state of the art rooms and equipment, a large patient base and a very friendly team to support you.
- Hands on training and ongoing professional dermatological support will be provided. Does this interest you?

Please send any enquiries to: cosmetic4558@gmail.com
March 2018

CONSULTATION ROOM AVAILABLE AT SPECIALIST SUITE - BUDERIM

- Prime location at Sunshine Coast Private Hosp, with leafy outlook and natural lighting
- Modern, well equipped rooms
- Close to pathology and radiology facilities
- Convenient patient parking
- Suited for Allied, Specialist or GP
- Sessional basis with different levels of services offered From Meet and greet only to full reception service with our friendly experienced staff

For further information please contact the Practice Manager or Dr Dana Moisuc on 5478 3533 or reception@danamoisuc.com.au
/February 2018

CONSULTATION ROOM AVAILABLE for SESSIONAL RENTAL in HEALTH HUB at BIRTINYA

- Prime location – Sunshine Coast University Private Hospital Specialist Suites
- Professionally appointed suites
- Large reception / waiting room
- Close to all ancillary providers – pathology, radiology, pharmacy
- Sessional rental – meet and greet or full services available
- Convenient patient parking
- Suitable for Specialist Medical or Allied Health provider

For further information please contact the Practice Manager on 5437 7633 or admin@coastalcancercare.com.au
February 2018

VR GP REQUIRED

VR GP required experienced with woman's health- Caloundra Central Family Clinic

- Long established practice, fully accredited with experienced Nurses and very competent reception staff
- Mixed billing with flexible working hours
- Percentage of billing
- No on call hours

Caloundra Central Family Clinic

Ph 07 54912911

practicemanager@medicaltrust.com.au

February 2018

GENERAL PRACTITIONER WITH INTEREST IN MENTAL HEALTH

Caloundra Private Clinic is looking for a GP to work with us to complete admission physical examinations for our Mental Health patients on Monday and Thursday afternoons (approx. 2.5 hours both days).

- The Clinic offers a dedicated GP examination room, administration fee, administration support and free onsite parking.

For all enquiries, please contact Donna Kain, Chief Executive Officer at kaind@ramsayhealth.com.au or phone (07) 5491 1522.

February 2018

BRAND NEW CONSULTING SUITES AVAILABLE FOR RENT IN TEWANTIN/ NOOSA

Located in the Cooloola Centre in the main street of Tewantin

and just 3 minutes from Noosa Private Hospital

Brand new fit out with modern suites and facilities

Warm and welcoming reception

QML laboratory down stairs / QDI and Noosa Radiology minutes away

Available for half and full day consulting with competitive rates and inclusions

Suitable for surgical and medical specialists or allied health

On site boutique gym with commercial quality functional trainer/

treadmill/ workout punch bag- ideal for EP/ Physio/ PT

Current occupancy General/ Bariatric Surgeon; Oncologist;

Endocrinologist; allied health including dietitian, EP and psychologist

CALL PRACTICE MANAGER (MICHELLE UNDERWOOD) ON 0428 411 033 TO VIEW OR DISCUSS OPTIONS

February 2018

Classifieds are free for members.

Email: Jobo@squirrel.com.au

Classifieds are placed for 3 months unless otherwise arranged.

Always let us know when you no longer need your classified.

CLASSIFIEDS

CONSULTING ROOMS AVAILABLE FOR LEASE

- Sessional or full time available
- Close to the Sunshine Coast Private University Hospital
- Located in a prominent position at Bokarina on the Sunshine Coast
- Features two new well-equipped consulting / procedural rooms,
- utility room and waiting room.
- All electricity, air conditioning and heating included
- Convenient free off-street parking for patients
- Underground parking for practitioners

**For further information or to inspect please contact
Wendy Meyer 0448 202 274 wendy.meyer@pmc.net.au
April 2018**

WORK WANTED

I am currently studying Medical Business Administration and looking for a position in this area.

- I have a Bachelor's Degree in Child Psychology and speak three languages.
- I am passionate about my job and would like to work in a place where I will be able to show my talents and abilities.
- I am honest, trustworthy, on time, energetic and always interested to learn new techniques.
- I am a motivated team player.

**Shirin Jedari 0413 085 788 Email: Sh.jedari@gmail.com.
April 2018**

GENERAL PRACTITIONER (VR) - PALMWOODS - SUNSHINE COAST QUEENSLAND

- Fantastic opportunity for a VR GP to join our extremely busy medical practice in Palmwoods, located in the beautiful Sunshine Coast hinterland, only 10 minutes from pristine beaches.
- Established over 50 years, we have placed ourselves as one of the best in terms of quality patient care in our area. We offer the very latest in technology and facilities, flexible working conditions and a very attractive remuneration.

Why work for us?

- Non-corporate practice, avoid restrictive agreements
- Well-established, busy practice in the hub of the Sunshine Coast
- Well-established patient base, hit the ground running
- Outstanding support from the administration and nursing team
- Very loyal patient base
- On-site parking
- Large rooms with windows
- Fully computerised with remote access

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

March 2018

ROOM FOR RENT - "PULSE SPECIALIST CENTRE"

- Located opposite the new SCUH Hospital
- Professionally appointed Suites located in the new health "hub" at Birtinya – Medical, Specialists, Ancillary Providers.
- Fully serviced if required.

**Phone Sandy 0411 898 156 or 5408 7419
Updated February 2018**

GENERAL PRACTITIONER REQUIRED

- **NOT your average practice but life with spice and a challenge. Long term or permanent vacancy in Nambour.**

Contact Kelly on 5491 5666.

LANDSBOROUGH & MOOLOOLAH - FT VR GP

Required for Immediate start within a busy, growing general practice with two sites in the Sunshine Coast Hinterland

- Accredited & GP owned
- Fully computerised (Best Practice)
- Mixed Billing, No On-Call, DWS available
- Practice Nurse support, including CDM
- 65% of billings, Large patient base
- On-site Diabetes Educator, visiting Psychologists & Hearing Clinic
- Pathology, Pharmacy & Physiotherapy facilities adjacent
- Great working environment & family friendly

**E: Imc@lmcmed.com.au Ph: 07 54941799
<https://www.landsboroughmedicalcentre.com.au/>
Facebook <https://www.facebook.com/Landsboroughmedicalcentre/>
February 2018**

CONSULTATION ROOM AVAILABLE for SESSIONAL RENTAL AT SUNSHINE COAST UNIVERSITY PRIVATE HOSPITAL

Prime location in Specialist Suites, Ground Floor, Sunshine Coast University Private Hospital, Kawana Health Campus

- Modern, well equipped suite of rooms, consultation rooms include windows
- Generous reception and waiting room area
- Treatment room available
- Onsite pathology, radiology and pharmacy facilities and coffee shop
- Bathroom and kitchen facilities
- Suitable for Medical, Surgical or Allied Health Specialist
- Reception services available for negotiation
- One parking space available and convenient patient parking
- Sessional basis with half or full day sessions available

For further information please contact Operations Manager, Damian May via dmay@heartcarepartners.com.au or 07 3028 2602

February 2018

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 gmedcentre@bigpond.com.au.
(Afterhours on 0438 416 917)
Continuing as per request.**

SCLMA CLINICAL MEETING - 26 APRIL 2018

Maroochydore Surf Club Function Room
Dr Bernard Tamba-Lebbie, Orthopaedic Surgeon
"Shoulder Arthroplasty - Reverse or not to Reverse"
Michelle Crew, Physio Professionals
"Role of Physiotherapy with Shoulder Patients"



New SCLMA member Dr Chris Whight
with Dr Tim McNamara



Presenters Dr Bernard Tamba-Lebbie and
Michelle Crew from Physio Professionals



Dr Bernard Tamba-Lebbie with
Mike Mortimer from Amplitude



Dr Ian Markwell, Dr Raouf George,
Dr Peter Jacobs and Dr Stephen Kettle

2018 - Monthly Meeting Dates:
Usually last Thursday in month but
sometimes changed due to
school / public holidays.

Thursday 21 June 2018
Cardiologists - Dr Robert Tam
and Dr Douglas Wall
Thursday 26 July 2018
Saturday 18 August 2018 (Social)
Thursday 30 August 2018 (AGM),
Thursday 20 September 2018
Thursday 25 October 2018
Thursday 29 November 2018.

