



SCLMA President's Message

Dr Jon Harper



I have a keen interest in health system integration, collaboration and reform. I have been working for the PHN for a while, almost 10 years as a GP liaison officer, and as senior clinical editor of the HealthPathways website.

I hope to bring to the role of president some of my experience in working with local, state and federal health systems - without falling into despair!

I believe the LMA provides a unique platform for much-needed peer support, it holds a diverse range of experience and opinion to inform local health system improvement, and it models a culture of best-practice through education to the local medical community.

I look forward to the coming year.

Jon Harper, SCLMA President

Merry Christmas!

I am delighted to take on the role of president. I have been sitting on the LMA committee for some years and have had the benefit of learning from some very wise past presidents - Roger, Di Minuskin, Mason Stevenson, Wayne Herdy.

I thought I would tell you a little bit about myself. I was born in the English heatwave of 1976 which I think gave me a misguided expectation about English weather and it wasn't long before I emigrated to somewhere warmer.

I almost became a psychiatrist, before switching to general practice and then developing an interest in skin cancer.

I have worked in the NHS, Queensland Health, general practice and most recently a private specialist clinic.



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and ADVERTISERS EACH MONTH!**

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**REMINDER: ALL NEWSLETTERS ARE ON
OUR WEBSITE:**

<https://www.sclma.com.au/newsletters/>



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

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**FEBRUARY 2024
NEWSLETTER**

**Deadline FRIDAY
16th FEBRUARY
2024**

NO JAN NEWSLETTER!!!

Our circulation via email, Mail Chimp reaches more than 1,500 recipients! It is also uploaded to the SCLMA website and FaceBook page.

Contact Jo: Mobile: 0407 037 112

Email: admin@sclma.com.au

We welcome new content - case studies, local news and photos.

If you are a new member, please send in a short bio and a photo to introduce yourself.

NOTE: *We have changed to digital only newsletter distribution*

ALL Newsletters are posted to our website

<https://www.sclma.com.au>

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: 0407 037 112

Email: admin@sclma.com.au

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

Directory form available on the website.

www.sclma.com.au



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Please 'like', 'share' and 'follow' our Facebook page: *sunshinecoast local medical*

<https://www.sclma.com.au>

SCLMA MEMBERSHIP 2023

Thanks to all who have renewed for 2023 please contact Jo via email: admin@sclma.com.au if you would like a receipt or phone 407 037 112. Sadly there are approx 140 long time members who have not yet renewed for 2023. YOUR FINAL RENEWAL IS N ITS WAY!

THE SCLMA IS FAR MORE THAN THE MONTHLY MEETING - MUCH WORK IS DONE BEHIND THE SCENES WITH LIAISONS WITH LOCAL HOSPITALS, COUNTRY to COAST AND ALLIED HEALTH. VERY EASY TO PAY BY CARD TOO!

*Please contact Jo
 ph: 0407 037 112 or
 email admin@sclma.com.au with any queries.*

*Are you listed on our Members' Directory?
 Do your details need to be updated?*

<http://www.sclma.com.au/members/>

Contact: Jo - admin@sclma.com.au Ph: 0407 037 112 **ALL NEWSLETTERS ARE ON OUR WEBSITE** <https://www.sclma.com.au>

**TAKING BOOKINGS FOR 2024!**

MEETINGS are held LAST Thursday of each month except December and January.

**We have interest from:
 Dr Robert Stephens
 Dr John O'Bryen
 Dr Colin Dicks**

**Available dates:
 February 29 - Chiesi
 March 28 – available
 April 25 ANZAC DAY - ?? TBC
 May 30 – Lungscreen
 June 27 - Dr Peter Georgius
 July 25 – probably SC Health Report - to be confirmed.
 August 29 – available
 September 26 – available
 October 31 – available
 November 28 – available**

More to follow up - should be a good year!

We are considering recording meetings - is this a good idea? Corporate sponsorship welcome!

Speakers and topics need to be approved by SCLMA Meetings Convenor (Dr Scott Masters and Dr Alex Matthews)

Presentation time for speakers is 20 minutes plus Q&A

**Queries: Jo Ph: 0407 037 112
 Email: admin@sclma.com.au**

GP Liaison

Your hospital connection, together we can deliver better healthcare.

Dr Edwin Krays and Dr Michelle Johnston



New Oral & Maxillofacial Surgery Service at the Sunshine Coast University Hospital

SCHHS is excited to announce the commencement of Dr Nicolas Beech, Oral and Maxillofacial Surgeon.

The new Oral & Maxillofacial Surgery service at the Sunshine Coast University Hospital has now commenced and is accepting referrals.

Referrals within scope of the service include complex dental extractions, pathology of the mandible & maxilla, treatment of trauma to the face.

Further details to come in the following weeks.

Congratulations to Dr Jon Harper

GP Liaison Unit would like to congratulate Dr Jon Harper on becoming President SCLMA and we look forward to continue working with you in the New Year.

Merry Christmas

The GP Liaison Unit wish you and your families a very **Merry Christmas** and would like to thank all the GPs on the Sunshine Coast for your hard work in community, looking after your patients.

NEW Occupational Therapist Servicing the Sunshine Coast



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Choosing the right surgeon for your patients on the Sunshine Coast isn't rocket science - it's brain surgery.

Sunshine Coast Neurosurgery is the specialist practice of Dr Stephen Byrne, who has worked on the Sunshine Coast since 2017.

Dr Byrne MBChB, MRCSEd, FRACS underwent his neurosurgical training in Melbourne, Adelaide & New Zealand before gaining his Fellowship of the Royal Australasian College of Surgeons.

In fact, Stephen is the only fellowship-trained spine surgeon on the coast endorsed by both the Australian Orthopaedic Association and the Neurosurgical Society of Australasia.

At Sunshine Coast Neurosurgery all patients receive one-to-one pre-operative counselling and tailored personalised care using the latest techniques to deliver world-class healthcare.

Please feel free to call Sunshine Coast Neurosurgery to discuss any neurosurgical issue and we look forward to helping your patients along the road to recovery.

Sunshine Coast University Private Hospital
Suite 17, 3 Doherty Street, Birtinya QLD 4575

T 07 5437 7256
E info@scneuro.com.au

List of Services

Sunshine Coast Neurosurgery use their extensive experience to treat many common conditions such as:

- Cervical and lumbar degenerative conditions
- Brain tumours
- Spine tumours
- Pituitary tumours
- Chiari malformations.

Plus they have a specialist interest in minimally invasive brain and spine surgery.



**SUNSHINE COAST
NEUROSURGERY**

www.scneurosurgery.com.au

Sunshine Coast

Hospital and Health Service

SCLMA Profile December 2023 – Gemma Turato, Sunshine Coast Health Executive Director Allied Health



Gemma Turato embraces the varying nature of her role as the Executive Director of Allied Health.

She is responsible for high level operational management of the acute and subacute sector allied health workforce, including ensuring the services are safe, effective and efficient, as well as delivered to the highest and most ethical standards.

“I am also responsible for transforming allied health services at the health service through promoting new ideas and being actively involved in strategic planning, research and education that assists the Executive team to deliver on the organisation’s vision and plans,” Gemma explained.

Helping others cope with what comes their way is a driving factor for Gemma – whether that be with patients, staff or the community.

“Life is so unpredictable, and I am grounded in reality about what we can achieve, but that doesn’t stop me from having the passion to push the boundaries and keep on going,” she said.

Gemma says leadership is the most rewarding, yet challenging, aspect of her role.

“I get such a kick out of watching others grow and succeed and being part of that journey, I love seeing a smile or the look of excitement in my teams’ eyes when they kick goals.”

Looking to the future, she wants to see Sunshine Coast Health continue to grow its reputation of being a great workplace with a positive and supportive culture.

When she’s not working, Gemma loves to get outside and make the most of the stunning Sunshine Coast environment.

“I am up with the early risers around 4.30am, either doing a session in the gym or out for an 8-10km run – it sets my body and mind up for the day ahead.”

“I have exercised my whole life and would highly recommend it – great for the mind, body, and soul!”

“The other suggestion I’d have is to push yourself out of your comfort zone every so often – one I will share is bungee jumping in Queenstown, NZ – it was exhilarating, and the elated mood lasted for days!”

She also recently achieved a huge personal goal of completing her first marathon.

The Sunshine Coast's only integrated Cancer Centre

Our facility is home to:

- Highly experienced team of Medical Oncologists & Clinical Haematologists
- Day infusion unit providing the latest & cutting edge treatments (including chemotherapy, immunotherapy, targeted therapy, blood products, iron infusions & venesections)
- GenesisCare Radiation Oncology
- Cold cap therapy to prevent / minimise hair loss caused by certain chemotherapy treatments
- Allied Health including Clinical Psychology, Exercise Physiology, Dietetics & Oncology Massage Therapy
- McGrath Breast Care Nurse
- Clinical Trials



Our Team:



Dr Hong Shue
Medical Oncologist
MBBS (Monash), FRACP



Dr Brenton Seidl
Medical Oncologist
MBBS, BSc, FRACP



Dr Sorab Shavaksha
Clinical Haematologist
MBChB (Leeds), FRACP,
FRCPA (2013)



Dr Joshua Richmond
Clinical Haematologist
MBBS(Hons), FRACGP,
FRACP, FRCPA



Dr Alice Livings
Clinical Haematologist
BSc(Hons), MBBS(Hons),
FRACP, FRCPA



Dr Manjunath Narayana
Clinical Haematologist
MBBS, FRACP, FRCPA



Samantha Clutton
Clinical Psychologist
MPsychClin, FCCLP



Sarah Bloomfield
Dietitian & Nutritionist
APD, APN



Jesse Goldfinch
Exercise Physiologist
BClinExSc, ESSAM, AEP



Tania Shaw
Massage Therapist
DipRM, CLT, OMT



SUNSHINE COAST
HAEMATOLOGY & ONCOLOGY CLINIC
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GP/Specialist Priority Line:
07 3054 0758

10 King Street, Buderim QLD 4556 | P: 07 5479 0000 | F: 07 5479 5050 | schoc.com.au

Common Entertainment for Businesses – Christmas Parties and Gifts

It is nearly that time of the year again when employers hold Christmas parties for their employees. Christmas parties constitute 'entertainment benefits', and to the extent that the expenditure relates to employees and their associates attending the function, the expenses may be subject to fringe benefits tax (FBT) unless an exemption applies, such as the 'minor benefits' exemption.

Where the Party is Held and Who Attends

Where the Christmas party is held on a working day on the business premises and for current employees only, no fringe benefits tax (FBT) is payable on the food or drink provided. Where the employer provides taxi travel home after the party, the taxi travel is a residual benefit provided in connection with the provision of food or drink; no FBT is payable on the taxi fares incurred by the employer, where the requirements of s.58Z of the Fringe Benefits Tax Assessment Act 1986 (FBT Act) are met.

Where the Christmas party is held at a location that is not the business premises, or the party includes associates of employees such as their partners, no FBT is payable if the party is a 'minor benefit' valued at less than \$300 inclusive of GST per person (discussed below).

If clients attend the Christmas party, no FBT is payable for costs that relate to them.

Minor benefits exemption

A minor benefit is a benefit that is provided to an employee or associate on an 'infrequent' or 'irregular' basis, which is not a reward for services and costs less than \$300 inclusive of GST 'per benefit' provided. If you give employees a Christmas gift, no FBT is payable if the value of the gift is less than \$300 per person, and it would be considered unreasonable to treat it as a fringe benefit.

Providing Gifts

Gifts provided at Christmas parties to employees, including working directors (and contractors), are considered entertainment but are usually FBT-exempt if they cost less than \$300 inclusive of GST, they are not provided on a frequent or regular basis, and the gift is not provided wholly or principally as a reward for services rendered.

Non-entertainment benefits provided to employees at the Christmas party, such as a hamper, are considered separately when applying the \$300 minor benefits exemption.

Tax Deductions and GST Credits

Where the Christmas party is held on a working day on the business premises for current employees only, as no FBT is payable, there is no tax deduction for the cost, and GST credits cannot be claimed.

Where the Christmas party is held at a location that is not the business premises:

- Where a minor benefit provided to employees and associates is less than \$300 GST inclusive per head, no FBT is payable, the employer cannot claim a tax deduction for the cost, and GST credits cannot be claimed.
- Where the benefit provided to employees and associates is more than \$300 GST inclusive per head, FBT is payable, and the employer can claim a tax deduction and claim the GST credits.

Where the employer applies the minor benefits exemption for gifts classified as entertainment (and recreation) gifts costing less than \$300 inclusive of GST, tax deductions and GST credits cannot be claimed.

- **Example:** Where a Christmas party is held at a location that is not the business premises for employees and associates and the cost is \$200 GST inclusive per person, no FBT is payable, the employer cannot claim a tax deduction for the cost, and GST credits cannot be claimed. Where employees are also provided with a hamper, a non-entertainment gift costing \$150 inclusive of GST per person, no FBT is payable where the minor benefits exemption applies, but the employer can claim a tax deduction and the GST credits on the non-entertainment gift.

Generally, a tax deduction and GST credits can only be claimed on entertainment or recreation gifts where fringe benefits tax applies.

If you require any advice or assistance regarding fringe benefits tax, please get in touch with our experienced accountants at Poole Group on 07 5437 9900 or poole@poolegroup.com.au



Designing better care

GenesisCare radiation oncology

We provide modern radiation therapy techniques and continuously invest in cancer treatments and technology with the aim of reducing side effects and improving quality of life.

Our team of radiation oncologists have experience across many types of tumours in adults. They aim to combine their knowledge, experience, and a multidisciplinary approach to offer personalised, evidence-based care to all patients.



Dr Debra Furniss

Regional Medical Director

Gastrointestinal, breast, lung, skin and haematological malignancies, benign disease and palliative treatments



Dr Bradley Wong

Radiation Oncologist

Wide field skin cancer, breast, prostate and urological lesions, benign conditions and palliative treatments

On the Sunshine Coast, GenesisCare provides:

- Radiation therapy for most adult cancer types
- Treatment for non melanoma skin cancer
- Rapid access palliative radiation therapy
- Treatment for benign conditions e.g Dupuytren's disease, plantar fasciitis and keloid scars
- Stereotactic radiation therapy for cranial, lung, spine, prostate, bone, and liver lesions
- Personalised care, treating the individual, not just the condition
- Patient transport service

Treatment centres:

Buderim 10 King Street
Nambour 10 Mapleton Road

Get in touch:

Tel: 5374 8100

receptiononcologybuderim@genesiscare.com

Coming soon:

Noosaville
90 Goodchap Street

Consulting clinics:

Caboolture • Dr Debra Furniss
Noosa • Dr Debra Furniss
• Dr Bradley Wong
Gympie • Dr Bradley Wong

Disclaimer: Any procedure including treatments involving radiation carry risks, including skin irritation and associated pain. Before proceeding with a referral for treatment, patients should be advised to seek a second opinion from an appropriately qualified health practitioner. As in any medical procedure, patient experiences and outcomes will vary.

genesiscare.com

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BUDERIM PRIVATE HOSPITAL MONTHLY UPDATE

SHANE MITCHELL
GENERAL MANAGER

E: shane.mitchell@uchealth.com.au
P: 07 5430 3260

DECEMBER 2023

Below is a short reflection on 2023 here at Buderim Private Hospital and how we have contributed to our Mission to help people *"live life in all its fullness"* John 10:10.

I am proud to provide you with this update and communicate how patients are truly at the heart of everything we do here at Buderim Private Hospital.

February 2023

- Launch of robotic gynaecology surgery
- 'Role of the Leader Program' launched to empower leaders

June 2023

- Ngaire Roberts Breast Care Nurse Bursary recipients announced

July 2023

- Launch of orthopaedic robotic surgery

August 2023

- Debra Buchanan, Nurse Manager, announced as winner of 2023 Elsa Wilson Award
- Buderim Emergency Centre celebrates 5th anniversary
- Welcomed 44 local High School student as part of our High School Experience Day program

September 2023

- Auxiliary celebrates 40th anniversary

October 2023

- Cindy Mackenzie Breast Cancer Program raised \$44,000+ during its [Think Pink](#) campaign

November 2023

- Mel Daniels, (Assistant Director of Clinical Services

Perioperative & Surgical) presented with the 2023 Outstanding Achievement in Nursing/Midwifery Leader Award at the Association of Queensland Nursing & Midwifery Leaders Conference

December 2023

- 98 staff members recognised for 1090 years of service at the annual staff awards celebration

January – December 2023

- Supported 311 students (245 nursing, 34 medical, 11 physiotherapy, 19 midwifery and 1 vocation)
- 14 graduates supported with seven study days and 37 preceptors trained
- 100% of theatre lists allocated
- Welcomed 14 new Visiting Medical Practitioners
- Admitted around 25,000 patients
- Conducted approximately 15,000 surgical procedures
- Delivered more than 600 babies
- Cared for more than 13,000 patient presentations to the Emergency Centre
- 15 workshop programs delivered to staff including, ventilation, cardiac study sessions, wound care, CVAD, maternity emergency management, Advanced Neonatal resus, and end-of-life care

On behalf of the Buderim Private Hospital team, I would like to take this opportunity to wish you a happy and safe Christmas and New Year. I look forward to providing you with further hospital updates in 2024.



Acute Admissions 5430 3314

buderimprivatehospital.com.au

Proudly part of



**Buderim Private
Hospital**

Do you have a patient suffering from Chronic pain?

We can help.



Dr Ramsey Jabbour

BSc (Hons), MBBS, FAFOEM,
FFPMANZCA

**Specialist Pain Medicine
Physician**



Dr Frank Thomas

BSc (Hons), MBCHB, FANZCA,
FFPMANZCA

**Specialist Pain Medicine
Physician**

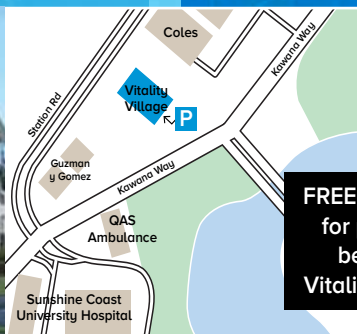
Let Dr Ramsey Jabbour and Dr Frank Thomas, together with the trusted team at QPain look after your patient.

Help your patients get **back** to what they love doing most...

Special interests:

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Please feel free to contact QPain to discuss management options of your patients with chronic pain.



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PSYCHIATRIC SERVICES - THE MISSING MIDDLE

Dr Andy Hughes, Psychiatrist, Cooina Clinic, Buderim.

Medicare Bulk Billing.

This is all about 291/293 and 294. A 291 is a psychiatrist plan of treatment for a GP to follow for a 12 month period. It should be a comprehensive assessment with diagnosis and treatment recommendations provided in a timely letter. It can then be followed up a few months later (say 3 months) using 293 to assess progress and provide further recommendations. These can only be done once per year. 294 is a 50% loading on top of these items to support online remote area psychiatric consultations via bulk billing. No gap for patients, no travelling or fuel/hotel bills. Usual practice is for GP to have dedicated room for videoconferencing with practice nurse/receptionist to coordinate the process. GP pops in at the beginning to explain what they're looking for and pops in at the end to receive interim feedback verbally rather than waiting a week for letter to commence treatment. GP initiates treatment most of time. I used to take 90 minutes, others do it in 60 minutes.

Companies that provide Online Assessments

There are a growing amount of these. Just google online psychiatry consultation. Off the top of my head are Dokotela, Call to mind, psych2u, Hello Doc. Each of these can have up to 30 psychiatrists on their books (some of whom work one day per week and others every day) If you want an assessment in short time frame for your missing middle then this is the best option. I worked with Dokotela for several years. GPs are comfortable dealing with 33% of mental health, 33% are clearly public psychiatry or can wait for private but the final third require guidance for the GP to follow. This is where the 291/293 process helps.

Online Platforms

You can use any but need to be mindful of privacy issues. Whilst most patients have the usual apps on phones, I found that doing outside the GP practice was not conducive to sensible/stable assessments. I've had a few in pyjamas walking around their house or in cars doing their chores for the day-not ideal. My best was a crane driver who was hundreds of feet above the ground at a Qld power station (no one was killed!) Coviui is a great Australian platform with lots of extras for a monthly fee. We use doxy.me in Cooina which is free. FaceTime for apple is fine.

Psychiatric information online for GPs

eMHPPrac is a great website for everything you could possibly want regarding online options in Psychiatry. Psychscenehub is a smorgasbord of webinars/podcast and online resource library for GP's, psychiatrists and medical students.

"All in the Mind" podcast on ABCRadio National/ABC listen app is a good resource regarding numerous psychiatric issues whilst driving somewhere remote!

Psychology whilst you wait.

What to do if you're waiting for a psychologist or there isn't one in rural areas? "Mindspot" or "This way up" are great online psychology resources which have been proven to be effective. Mindspot is free. "This way up" has a small fee. In North Wales where I worked/trained, there was one psychologist per 50,000 patients. The Welsh government developed Bibliotherapy which is essentially using self-help psychology text whilst you wait. If you don't get better (which was often the case), you'll be much more ready for psychology input when it occurs. [Overcoming.co.uk](https://overcoming.co.uk) is a great website with all the books a patient might need for any disorder. Just look it up, ask the local library to get it or buy it.

General Practitioners

Want to get involved in this trial as an investigator?

We want to hear from GPs who feel they can assist with trial recruitment and/or medical screening visits.



Your patients will receive vascular assessments, travel costs and a free Revitive device for their participation.

The Foot-PAD Trial is testing a new therapy for Peripheral Artery Disease (PAD) using a footplate stimulation device.

The therapy is aimed at improving walking distance and reducing lower limb pain during exercise.

We need enthusiastic General Practitioners to help us find eligible participants for our study. Here are two simple ways you can get involved:

1. Simply screen potentially eligible patients within your clinic. Our streamlined recruitment and screening system makes this easy, so it won't take much of your time or your staff's.
2. Display promotional leaflets and posters about the trial in your clinic. This way, your clinic can become a central place for potential participants to easily join our study.

We will pay you. You will receive an honorarium/ administration fee for each patient recruited through your clinic.



UniSC HREC: A211659
TPCH (The Prince Charles Hospital): 78962

6345/0823

More information

Dr Mark Windsor
Trial Coordinator
Email: footpad@usc.edu.au
Tel: 07 5456 5364

usc.edu.au/footpad





NUCLEAR MEDICINE BONE SCANS

When are they most useful?

Dr Andrew Paszkowski
MBBS FRACP, AANZSNM
Clinical Director of
Nuclear Medicine



STAGING OF CANCER

Bone scanning, combined with SPECT CT, is very sensitive for the detection of osseous metastases from most cancers, in particular breast, prostate and lung.

ASSESSING THE ACTIVITY OF PAGET'S DISEASE AND TREATMENT RESPONSE

The degree of uptake on bone scintigraphy can help determine activity and extent of conditions such as Paget's disease. Serial imaging following therapy for Paget's or cancer is very helpful in assessing treatment response.

EVALUATING ABNORMAL BONE LESIONS

Incidental sclerotic and lucent lesions are commonly reported in other modalities. A bone scan is beneficial in assessing the metabolic activity of lesions and determining their significance.

LOCALISING SITES OF BONE PAIN

Imaging with X-rays, CT, or MRI will often identify multiple sites of degeneration or other pathology that may be causing pain, such as facet joint arthritis, degenerative disc disease or sacroiliitis. Studies have shown a higher success in pain relief when the sites showing the most marked activity are injected with cortisone and local anaesthetic. Bone scintigraphy with SPECT CT may also show other possible osseous causes of pain.

EVALUATING PAINFUL JOINT PROSTHESES

Joint prostheses cause a range of technical problems, which make the interpretation of radiographs, CT and MRI difficult. Bone scans are not affected by these technical factors and are very useful for the evaluation of loosening, periprosthetic fracture, particle disease and infection. A normal scan carries a high negative predictive value for the exclusion of these conditions.

Dr Paszkowski welcomes calls from referring health professionals.
We kindly ask that the direct referrers line is not shared with the general public.

Nuclear Medicine Direct Referrers Line ☎ 07 5458 4400

🌐 xrayimaging.com.au

✉ nucmed@xrayimaging.com.au

We are looking for coeliac patients for a clinical study.

We are looking for coeliac patients, who still have symptoms despite following a gluten-free diet, for a phase IIb clinical study. The double-blind, randomised, multicentre, placebo-controlled, comparative phase IIb study investigates the effect and tolerability of ZED1227, a tissue transglutaminase (TG2) inhibitor in the form of a hard capsule for oral administration, in the treatment of coeliac disease.

Main Inclusion criteria

1. Patient is between 18 and 80 years of age
2. Biopsy proven diagnosis of coeliac disease at least 12 months prior
3. Adherence to a gluten-free diet (GFD) for at least 12 months
4. Human leukocyte antigen DQ (HLA-DQ) typing compatible with coeliac disease (if known)
5. Symptoms (diarrhoea and/or abdominal pain and/or bloating and/ or nausea) despite GFD
6. Negative diagnosis of Helicobacter pylori infection and no eradication within the last two months (if known)
7. BMI between 17.0 and 35, inclusively
8. Willing to maintain current GFD throughout participation in the trial

Should you be interested in referring potential candidates to us, have questions or need more information, please contact:



Dr Hans Seltenreich
Coastal Digestive Health
503/5 Emporio Place, Maroochydore
07 5408 0900
admin@coastaldigestivehealth.com.au



NEW

Elastography Service

Elastography, Sometimes referred to as a Fibroscan, is a non-invasive procedure used to measure the elasticity of the liver. Because fibrous tissue is harder than 'normal' liver tissue, the degree of hepatic fibrosis can be detected.

BULK BILLED

Clinical Indications

- Fatty Liver Disease
- Alcoholic Liver Disease
- Chronic Hepatitis C & B
- Cirrhosis Obesity
- Other liver problems
- Non-invasive
- Painless
- Quick results
- Next-day appointments

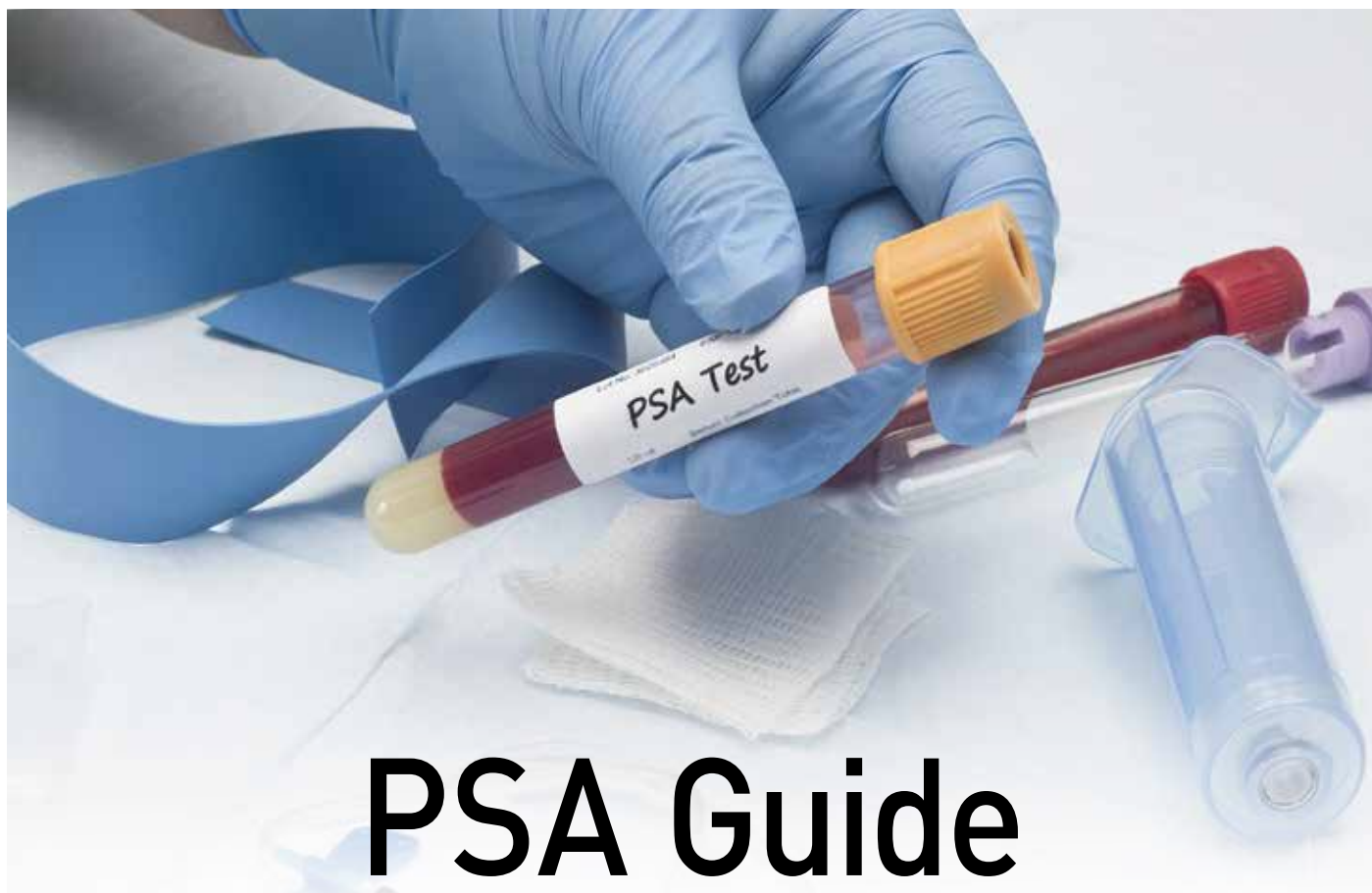


SCAN TO
BOOK ONLINE



Call 07 5391 0366 or
Email Reception@theradiologyclinic.com.au
31 Plaza Parade, Maroochydore Q 4558
www.theradiologyclinic.com.au

theradiologyclinic



PSA Guide

Early detection saves lives

PSA >3 is a red flag

(>2 if positive Family Hx, BRCA)

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

Refer if:

Second PSA is still >3 (2)

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

Refer to:

Dr. Tony Gianduzzo or A/Prof. Troy Gianduzzo



Sunshine Coast Urology Clinic

Buderim Prostate Clinic

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- Patients with care that is fragmented and needing coordination and linkage with support services/coordination of existing services

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Thank you for supporting the Sports & Spinal Group!
We look forward to continuing to work with you in 2024 and providing patients with the very best, evidence-based healthcare.



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SAVE THE MENISCUS –
AN UPDATE ON ARTHROSCOPY

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

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

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

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

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

For appointments contact

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

Season's Greetings

Wishing you and your loved ones a safe, joyful and refreshing festive season.

Thank you for supporting our Ramsay specialists and hospitals in 2023.

We look forward to working together to keep delivering quality health care on the Sunshine Coast in 2024!

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Ramsay
Health Care

Lord Howe, Australia

Formed by volcanic activity and located between Australia and New Zealand, this paradisiac island is a beautiful holiday spot that's perfect for a visit at any time of the year. With its tropical ambience, blue waters all around and its warm native inhabitants, this place is surely a treat for all the senses.

Feed the fish at Ned's beach

Ned's beach is a beautiful sight with its clean white sands and shady spots to laze in. The clear blue waters make snorkeling and exploring aquatic life a fun and engaging activity.

You can easily purchase a cup of fish food at the beach and feed the fish that venture close to the shore.



Kayak to Ball's pyramid

This formation is certainly one of the many natural wonders of the world, with its rocky peak poking out of the ocean, extending skywards almost half a kilometer. Ball's pyramid is the world's tallest volcanic stack. You can rent a boat and ride up to Ball's pyramid where, depending on the season and sea condition you may be allowed to dive around it. Just gazing at this beautiful masterpiece though is a treat in itself.

Pretty castles under water

Coral reefs are like underwater gardens with their rich ecosystem and variety of shapes and colors. Lord Howe island, being a relatively remote place, has some of the most beautiful coral reefs. Snorkeling is the best way to truly experience the coral reef gardens and the rich biodiversity teeming underwater.

Relax, take it easy!

One cannot come to a tropical paradise and not take the time to sit back and bask in the sun kissed glory of nature. Take your time floating in the calm tide pools or lazing in the sands of the warm shore. Also don't miss the incredible sunrise and sunsets.

What we have planned for you:

- Rise with the sun as you hike up to Kim's Lookout to catch a beautiful panoramic view of the island and the ocean.
- Rent a kayak and go off exploring the sea arches along with your camera.
- Sample some of the fresh fish at one of the many restaurants.
- Take a glass bottom boat ride to spot the aquatic life below.
- Alternatively, you can choose to go snorkeling for a more authentic feel.
- Camp under the stars for a glamorous view of the starry night. Since this island is far from civilization and light pollution, the night sky is one of the most beautiful vistas it has to offer!

123Travel – Cheryl Ryan <https://123travel.com.au>



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PRESIDENT AND CEO REPORT

In a busy turn of events to wrap up the year, AMA Queensland advocacy has seen further payoffs for members and the community with government support on vaping, regional health workforce and flu jabs.



MEMBERSHIP RENEWAL – A MESSAGE FROM PRESIDENT DR MARIA BOULTON

AMA Queensland has achieved so much for our members and the community this year. It's time to renew your membership so we can continue working for you in 2024.

The biggest honour and privilege of being elected AMA Queensland President is working for you, our members.

It is only through you that we hear about important issues and can both raise the alarm and advocate for solutions that benefit our profession and patients.

We know many members bravely do this even when they fear for their jobs.

This was seen again this year with GP specialist members who contacted us about payroll tax and hospital specialist members who raised the alarm about maternity services and ambulance ramping.

We are proud to be able to give voice to your concerns when you can't.

Our work also would not be possible without the help of our Board, Council, Committees and Working Groups.

They tirelessly represent your interests on top of delivering best practice care to their patients and we thank them for their dedication.

This year we have advocated on many issues of concern to members in meetings and correspondence with Queensland Health, the State and Australian Governments, other health stakeholders and in the media.

We can only continue to do this work with your support and we urge you to rejoin us next year.

[Renew your membership for 2024](#)

THE PREMIER'S RESIGNATION

In breaking news on Sunday 10 December, Queensland Premier Annastacia Palaszczuk announced her resignation.

This is most certainly a time to reflect on her achievements and efforts during the challenge that was the pandemic, and we thank her for her nine years of service to Queensland.

Premier Palaszczuk implemented most of the recommendations of the AMA Queensland Ramping Roundtable, and we will continue to work with the newly appointed Premier Steven Miles to see it finished.

A change in leadership is a great opportunity for a refreshed government to make further positive and tangible changes for our communities.

Read more at <https://www.ama.com.au/qld/news/retirement-Premier>



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CHILDHOOD CHECKS PRIOR TO VACCINATION

AMA Queensland has continued to advocate for community health and, specifically, preventative healthcare for children.



After the state government expanded regulations to allow pharmacists to vaccinate all children two years and over – well beyond that currently permitted in any other jurisdiction in Australia -- we have warned of the health risks and publicly opposed the unjustified decision.

Childhood immunisation appointments are more than just a vaccine appointment, they are a vital opportunity to track a child's developmental growth and general health, assess for any delays in hearing or speech, and check in with the parents.

Allowing pharmacists to provide such vaccinations could lead to missed diagnoses and lost opportunities for early identification of post-natal depression and domestic and family violence.

We support other changes to allow [pharmacists to deliver vaccinations in general practice](#) and aged care facilities, as these are among the safest settings for pharmacists to use their full training in vaccine administration.

However, we cannot support what goes so clearly against the role of the Therapeutic Goods Administration (TGA) which is the rightful body for determining what vaccines can be safely administered without prescription from a doctor – not the Queensland Government.

Read more at <https://www.ama.com.au/qld/news/vax-decision-gambles-kids-health> and <https://www.legislation.qld.gov.au/view/pdf/published.exp/si-2023-0152>

MEMBERSHIP MILESTONES

On 1 December 2023 we recognised and celebrated our dedicated doctors who have been members for decades over a special breakfast.

As AMA Queensland is a member association, our members are, and will always be, our most precious resource. We want to thank you all again for your support.

Event recap at <https://www.ama.com.au/qld/news/Membership-Milestone-2023>



GLUCOSE MONITOR ACCESS

In an article published by the DVA, it is now easier to access Continuous Glucose Monitors (CGMs) for patients with diabetes.

From 1 November 2023, requests for CGMs have been able to be prescribed by a client's GP, diabetes educator, diabetes clinic, Registered Nurse, and specialists.

Read more at <https://www.ama.com.au/qld/news/easier-access-to-continuous-glucose-monitors> and <https://www.dva.gov.au/providers/provider-news/it-now-easier-access-continuous-glucose-monitors-your-patients-diabetes>



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FREE FLU JABS

We applaud Health Minister Shannon Fentiman for her proactive announcement that flu jabs will be free for all Queenslanders in the 2024 influenza season.

Ensuring up to date vaccinations is crucial to prevent people getting seriously ill or dying.



We understand that the cost of living pressures are very real, and can put people off getting the vaccine. We have seen this already with the number of this year's influenza cases reaching nearly three times the five-year average.

Ensuring the flu vaccine is free from the get go, rather than halfway through flu season, is just one way we can ensure preventative healthcare for our community.

It will also make it much easier for practices to plan ahead to delivery this vital service.

We will continue to advocate for the influenza vaccine to be made free for all Australians and call on all other state and territory governments to follow Queensland's lead.

Read more at <https://www.ama.com.au/qld/news/Free-flu-jabs-will-protect-Queenslanders>

PAYROLL TAX

AMA Queensland continue to advocate hard for a payroll tax exemption for all private medical practices and better clarity of existing exemptions requirements for all medical businesses.

The Queensland Revenue Office (QRO) released an updated public ruling that provided much-needed assurance for all medical businesses on steps they can take to ensure they are not burdened with this crippling tax.

We also encouraged all eligible members to register for the Queensland Revenue Office's general practice payroll tax amnesty.

Participating practices now have until mid-2025 to implement the necessary business structure changes set out in the QRO's ruling.

Latest payroll tax update at <https://www.ama.com.au/news/payroll3Nov>

RESIDENT HOSPITAL HEALTH CHECK

Results from our annual Resident Hospital Health Check with ASMOFQ found unsatisfactory reports from large proportions of survey respondents.

More than 30 per cent felt their safety had been compromised at work due to verbal or physical intimidation or threats from patients or other staff, with over 50 per cent expressing fatigue concerns.



Patients deserve our best, and chronic understaffing means fatigue and overwork is inevitable, affecting our ability to make good judgements and perform to the best of our ability.

AMA Queensland will continue to work with the HHSs to fight for the prioritisation of junior doctors' wellbeing, workload and training.

Read more at <https://www.ama.com.au/qld/news/RHHC23> and https://www.ama.com.au/sites/default/files/2023-11/2023_Resident_Hospital_Health_Check_FINAL.pdf



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MEMBER NETWORKING EVENT

Early last month, AMA Queensland gathered at Audi Brisbane for a member networking event, toasting the end of another busy year.

AMA President Professor Steve Robson discussed relevant issues the federal body is working on and awarded AMA Doctor in Training of the Year to Dr Natasha Abeysekera and the AMA Indigenous Medical Scholarship to Torres Strait Islander man T'Kido Titasey.

We also updated the audience on payroll tax, regional healthcare workforce issues, maternity care, and pharmacy prescribing, all while celebrating the year that was.

Event recap at <https://www.ama.com.au/qld/news/member-networking-event>



AMA QUEENSLAND FOUNDATION CHARITY GALA



Also last month, we gathered with the AMA Queensland foundation to raise much needed funds for homelessness charity Beddown.

Beddown is an innovative group who turn unused public spaces into safe places for people to sleep at night.

With the cost of living crisis spiralling, and homelessness rates in Queensland rising at almost three times the national rate, it is more important than ever that we support the most vulnerable members of our community.

If you weren't able to attend the AMA Queensland Foundation Charity Gala, but would still like to donate, please do so [here](#).

Event recap at <https://www.ama.com.au/qld/news/FdnCharityGala>

If you would like to donate, you can do so at <https://www.amafoundation.com.au/donation/>

VAPING CRACKDOWN

After advocating for the government to respond to the rise of vaping among children and adolescents, we endorsed their decision to crackdown on the importation of vapes from 2024.

While some groups argue that vaping can be an option to ease people off cigarette addiction, it is most certainly the last resort.

GPs working to help people who want to quit smoking or vaping have many more evidence-based ways to help patients quit.

In addition to protecting children, this is another reason why vaping products must not be accessible in non-medical settings.

We hope to see the tighter regulations reduce the prominence of vapes among young people and the risk of creating the next generation of vapers and smokers.

Read more at <https://www.ama.com.au/qld/news/Transcript-ABC-Brisbane-vaping-crackdown-had-to-be-done>



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AMA QUEENSLAND FOUNDATION BURSARIES



In another recent effort from the AMA Queensland Foundation, we saw four GP Registrars and/or Fellows receive \$20,000 training and research bursaries in honour of the legacy of General Practice Training Queensland (GPTQ).

Drs Sarah Andela, Joshua Faint, Nicholas Snels, and Kellie West are the inaugural recipients of the AMA Queensland Foundation GPTQ Training and Research Bursary.

Read more at <https://www.ama.com.au/qld/news/Four-GP-Registrars-awarded-Bursaries>

INCENTIVISING REGIONAL HEALTH WORKFORCE

After actively calling for the state government to provide urgent assistance to our struggling regional health workforce, we are exceptionally pleased to have seen Minister Fentiman look and act on the evidence.

Through our advocacy the government has extended the \$70,000 incentive to interstate and overseas doctors and healthcare workers to relocate to regional Queensland to GPs and other private specialists.

We commend the government for taking action and hope this scheme will help address workforce shortages and maldistribution across the state.

Our current healthcare workers are also dedicated and amazing at what they do and must be likewise recognised.

We will seek to ensure that they are similarly supported alongside overseas and interstate recruits.



Read more <https://www.ama.com.au/qld/news/Incentives-boost-regional-health-workforce>

DOCTOR SHOPPING

Our members have raised concerns that QScript has not been adequately detecting patients who seek multiple/denied medications from different practitioners.



Practitioners have suggested that this issue may be arising because QScript is not nuanced enough to recognise potential slight discrepancies between identifying information and Medicare details.

QScript has since provided additional advice on this issue and steps practitioners can take to ensure patients are not being prescribed

medications in breach of the requirements, and we encourage all practitioners to consider and act on this advice.

Read more at <https://www.ama.com.au/qld/news/QScriptdetection>, https://www.health.qld.gov.au/data/assets/pdf_file/0033/1158639/qscript-troubleshooting.pdf and <https://www.ama.com.au/qld/campaigns/qscript>

A clinical research study for people with excess weight and heart disease



TRIUMPH-3

TRIUMPH-3 is a clinical research study for people with excess weight and heart disease. The study will test how safe and well the investigational medicine (the medicine being studied) works for weight management.

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Can I join this weight management study?

Yes, you may be able to join the research study if you:

- » Are aged 18 years or older
- » Have obesity, with a BMI of 35 or higher
- » Have heart disease
- » Have not been able to lose body weight on your own



BMI stands for **body mass index**. It is a number that compares a person's weight to their height. It can be used to tell if a person may be at risk of some health conditions.



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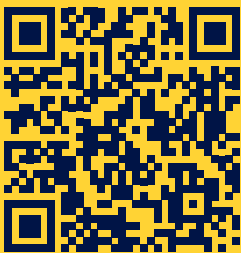
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A clinical research study for people with excess weight and knee osteoarthritis pain



TRIUMPH-4

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The study will test how safe and well the investigational medicine (the medicine being studied) works for weight management and knee osteoarthritis pain.



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Can I join this weight management study?

Yes, you may be able to join the research study if you:

- » Are aged 18 years or older
- » Have knee osteoarthritis pain
- » Have a BMI of 27 or more
- » Have not been able to lose body weight on your own



BMI stands for **body mass index**. It is a number that compares a person's weight to their height. It can be used to tell if a person may be at risk of some health conditions.



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TRIUMPH-4



MEDIA RELEASE

Saturday, 16 December 2023

Governments must be guided by experts and evidence in pandemic responses

Australia must put aside politics and seize a crucial opportunity offered by the COVID-19 Response Inquiry, to ensure the country is adequately prepared for future pandemics.

In a [submission to the federal government's inquiry](#), the Australian Medical Association has urged all governments and political parties to listen to the advice of medical and scientific experts in the handling of pandemics.

AMA President Professor Steve Robson said the success of Australia's response was primarily because governments generally listened to the advice of the medical and scientific community, particularly in the first 18 months.

"This inquiry provides a crucial opportunity to learn from past missteps and improve the country's preparedness for future pandemics," Professor Robson said.

"While it was far from perfect, Australia's pandemic response was quite effective. We had among the lowest excess mortality rates of comparable nations — despite relatively low additional health system spending during the pandemic — and achieved world-leading rates of vaccination by the end of the rollout's first year. Our response saved many Australian lives.

"But we don't want to see governments put the past behind us. We want them to evaluate and learn from Australia's pandemic response, with a focus on listening to experts and ensuring consistency in policies and communication across jurisdictions."

The AMA submission also notes that Australia's response was most effective when federal, state and territory governments cooperated to manage the impact of the virus.

"Overall, the AMA was very supportive of a range of measures, policies and programs implemented during the pandemic such as isolation periods, social distancing and income support," Professor Robson said.

"However, as the pandemic progressed, we saw the response take on a political nature, where state leaders actively undermined their chief health officers in public. Not only did this undermine the public's trust in policies, but it also undermined the medical profession's faith in their politicians to make the right decisions.

"It is essential this engagement with experts is built into responses consistently at all levels of government going forward."

Issues like failure to meaningfully engage with and support general practice early enough and addressing existing issues in our health system — in particular public hospitals and aged care — are also addressed in the submission. The AMA's submission also highlights the importance of an adequately resourced Australian Centre for Disease Control (CDC), which can undertake several pandemic response functions including rapid risk assessment, scientific briefings, public education and disease prevention. The findings of this review must help guide the work of the CDC.

Contact: AMA Media: +61 427 209 753 media@ama.com.au



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Nov 2013.

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Email: RDMAnews@gmail.com

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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"

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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.

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Open Monday to Friday 8.00am to 5.00pm – no after hours. (Rotational Saturday roster of a 3-hour session may be required in 2024)

Childcare facility located next door.

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The Team: Practice Manager, five nurses, including CDM, and six receptionists.

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April 2023

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March 2023

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WELCOME!

2023 -2024 SCLMA MANAGEMENT COMMITTEE

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THANK YOU ROGER FOR THE PAST SEVEN YEARS!

CONGRATULATIONS JON - SCLMA PRESIDENT!

PLEASE NOTE: NO JANUARY 2024 CLINICAL MEETING.

NEXT CLINICAL MEETING - THURSDAY 29 FEB 2024

Maroochydore Surf Club Function Room

SPONSOR: Chiesi. Speakers and topics to be confirmed.

