

The Elms



Family Medical Centre

Quarterly Newsletter

Keeping you in touch with developments at our Medical Centre

www.theelms.com.au



Autumn 2018

Having a family doctor is an important part of keeping well, whether it is treating an acute illness or injury, managing a chronic condition, or carrying out preventative care. One of the defining characteristics of the family doctor is the continuity of care. Put in other words, it means that your doctor knows you as a person. The development of this two-way relationship takes time and it is often not apparent how beneficial this can be. The visit for “just a script” or “only a cold” is in fact an opportunity to build this relationship.

Doctor news

Dr Carmen Lei will be away for the first half of the year to complete a six-month placement in Daylesford as part of her rural GP experience. Patients who have seen Carmen will be pleased to know that she will be back at The Elms in August this year. Dr Syed Hussain has recently completed his term with us and has moved on to his next posting. We wish him all the best as he continues his general practice registrarship.

Starting in February are Dr Davina Mareels and Dr Fortunato Mazzei. Davina has previously been working in Gisborne and she will be with us for the next 12 months. Fort comes to us from Daylesford and will be at The Elms for 6 months before returning to Daylesford. Both Davina and Fort are registrars in the specialist GP training program and we are confident that they will settle in well.

Our permanent doctors (Rob, Woody, Anmar, Sue, Amit, Ummu and Ayesha), remain unchanged.

Medical student news

Our 2017 Deakin University medical student, Jared Harris, who was attached to The Elms for the entirety of last year, has passed his 3rd year examinations with a distinction grade. We congratulate him on his achievement and thank all our patients who contributed to Jared’s learning by involving him in their care. Jared is now in his final year of medical school.

In 2018, we will be hosting final-year medical students from The University of Notre Dame. They will each spend a month at The Elms for their general practice learning experience. The students will have time sitting in with our doctors, nurses and allied health providers. We appreciate the generosity of our patients for giving visiting students the opportunity to learn in a real-life medical environment.

Codeine no longer ‘over the counter’

Since the start of February, codeine-containing medications were up-scheduled to prescription only. This decision was made by the Australian Therapeutic Goods Administration (TGA) based on research indicating a high incidence of excessive and unregulated self-medication with the opioid. Making codeine-based products (like Panadeine and Nurofen Plus) prescription-only builds an extra level of safety because administration can be monitored and supervised. The use of codeine for persistent pain is not ideal due to the short duration of action, its addiction potential and the tendency for codeine to lose effectiveness over time. Interestingly, about 10% of the population lacks the ability to convert codeine to morphine, the active form that actually provides pain relief. Patients who have been relying on self-medication with codeine should speak with their doctor to discuss alternative means of pain management.

Clinic ‘app’ delayed

Due to factors beyond our control, the availability of The Elms mobile application for Apple and Android has been delayed. We had anticipated that our ‘app’ would be ready for patients to download earlier, but it seems that the IT gremlins have been getting in the way. Until these issues have been ironed out, patients can still book appointments via the clinic website, www.theelms.com.au, or through our Facebook page. Whilst visiting our Facebook page, consider liking and following us so that you can receive up to the minute notifications and news. Of course, appointments can still be made by calling our staff or by presenting at reception.

Extended hours for pathology collection on Saturday

Australian Clinical Labs has extended its opening hours on Saturday to 12.30pm to match our clinic hours. The hours for weekday collection of pathology remains unchanged. Please note that the pathology collector starts at 8.30am and patients are seen according to a numbered queuing system. Early mornings are typically busy as some tests require overnight fasting, usually resulting in a lot of hungry patients presenting at the same time! To reduce waiting times, patients who have non-fasting tests may consider coming to see the pathology collector after the morning ‘rush hour’ period.

Chronic disease management

To encourage patients with chronic and complex medical conditions to improve their health, Medicare offers rebates for GP management plans (GPMP), which provides a formalised process to coordinate the care between doctors, nurses, allied health providers and specialist services. Visits for GPMPs are bulk-billed. The medical condition must be ongoing for at least six months and affect multiple body systems. The management plan is usually reviewed on a six-monthly basis, and may unlock rebates for up to five visits a year for allied health care (this is called a Team Care Arrangement) for eligible patients. Medicare criteria apply so speak with your doctor or nurse to discuss whether you qualify.

Cardiovascular risk calculation

Given that heart disease and stroke are the biggest causes of death on our society, it is important to estimate the risk and to identify factors that contribute to the danger. Some things can’t be changed (like sex, age or family history) but others can be, such as high blood pressure, smoking, lack of exercise and high cholesterol. By measuring these parameters, your doctor can use various formulae to work out your risk of having a heart attack or stroke. Additionally, the formulae can also show you how your risk can be reduced by modifying the various risk factors.

Motion-sickness whilst cruising

Motion- or sea-sickness is a common side effect of ocean cruising, especially if conditions are rough, resulting in nausea and vomiting. Most people will adapt to the motion within a few days but unfortunately if this does not occur, it could mean a visit to the ship’s doctor. To reduce the nausea of motion-sickness, travellers can try various over the counter products such as Kwells or by taking ginger. However, more effective medications for nausea can be prescribed by your doctor. These include medications that can be absorbed through the lining of the mouth, meaning they work even without the need to swallow. Symptoms can also be helped by avoiding alcohol, staying away from the bow and stern of the ship, and maintaining eye contact with the horizon. If you are planning on taking a cruise, consider speaking with your doctor about preventing and treating motion-sickness.

“We are proud to be an Accredited General Practice”

