

The Elms Family Medical Centre

Quarterly Newsletter

Keeping you in touch with developments at our Medical Centre

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Summer 2021/2022

The Elms recently celebrated Dr Amit Kumar and Dr Ummu Rauf joining as co-owners of the clinic with Dr Rob Hosking and Dr Woody Wu. Buying in to a practice is a very fulfilling personal achievement and an important step demonstrating long term commitment. To welcome Amit and Ummu into the ownership group, a luncheon was hosted for staff at the clinic for the announcement. We thank Vicki Hosking and Lynn Kelsall, a friend of the clinic, for catering with an amazing range of finger food and cakes. The Elms is proud to have a history of very stable doctor ownership, the last change occurring in 2009 with the retirement of Dr Sue Wright. We wish Amit and Ummu many years of successful practice ownership.

Doctor news

With Dr Amit Kumar and Dr Ummu Rauf buying in as co-owners, The Elms is in a much stronger position with respect to doctor numbers. Our four co-owner GPs will be supported by ongoing GP associates, Dr Anmar Naoum and Dr Ayesha Munir, plus we will continue to mentor GP registrars as they complete their post-graduate vocational rotations. Local demand for medical services is still growing and we hope to further expand our capacity to serve our community into the future.

Double vaccination and waiting outside

It is very encouraging that the uptake of the Covid-19 vaccination has reached the milestone of over 90% double vaccinated for the eligible population in Victoria. Being double vaccinated is proven to reduce the chances of serious disease and death from Covid-19, as well as significantly reducing transmission and contracting the infection. We have opened our waiting room to patients who are double vaccinated and don't have respiratory symptoms (up to the maximum allowable density limits) if they choose to wait inside. Patients who are not double vaccinated will be asked to wait outside or in their vehicles until called for at their appointment time. The requirement to wear appropriate face masks within the clinic remains. This arrangement is for the safety of all patients as well as staff, and is reviewed regularly.

Covid vaccination certificates

We are increasingly expected to demonstrate our Covid vaccination status when entering certain venues or to book entertainment events. Most people with a 'smart' phone can do this by using the Express Plus Medicare phone application or the Service Victoria phone application. However, alternative ways to show vaccination status include printing a paper copy of the immunisation record from Medicare Online via MyGov, or through the My Health Record. Your doctor may also be able to help by printing a paper copy of your immunisation record if access to your My Health Record is granted.

Covid booster vaccinations

Now that most eligible Victorians have been double vaccinated, the next step is the booster injection. This third Covid injection is given from 6 months after the second injection to further enhance protection. For people who are immune suppressed, the third injection is recommended between 2 to 6 months after the second shot. Your doctor can advise whether this applies to you.

Rapid antigen testing for Covid

The Elms will be trialling the use of rapid antigen testing for some situations. The rapid antigen test (RAT) takes about 15 minutes and involves taking a saliva sample on a single use mouth swab which is then applied to the test cartridge. The test will be conducted outside the clinic by our nurse. Initially, the RAT will be offered to patients who have ongoing respiratory symptoms and have had a negative Covid polymerase chain reaction (PCR) swab within the last 72 hours. If the RAT is negative, then the patient is able to be seen within the clinic like normal. Patients with respiratory symptoms beyond 72 hours of a negative Covid PCR swab may be directed to attend a dedicated respiratory clinic with isolation facilities, at the discretion of the doctor. An initial telehealth consultation will be conducted to assess the suitability for the RAT. The RAT costs the patient \$15 and is not covered by Medicare (we cannot accept a patient-performed home RAT result). We will have to privately bill patients having the RAT even if they are normally Bulk-billed due to Medicare rules.

Telehealth options

The use of telephone and video consultations has become more popular, and at times vital, for patients during the pandemic. It allows access to medical care with the benefit of saving travel and time, avoiding leaving the house unnecessarily, and even letting doctors who are furloughed to continue consulting with their patients. Telehealth is now strongly entrenched in the regular provision of health care with many hospitals and other specialists also using the platform when face to face visits can be effectively substituted. Patients may specifically request a telehealth consultation at the time of booking an appointment although Medicare does have certain limitations on its use. Our reception staff will be able to advise whether you are eligible for a Medicare-rebated telehealth consultation.

Protection against shingles

The Australian Government's shingles immunisation program has been extended until the end of October 2023. All patients aged 70-79 years of age who are not immune suppressed or had shingles in the previous 12 months can have the Zostavax injection for free. Shingles is the re-activation of the chicken pox virus and can cause severe nerve pain in the affected area, as well as a typical blistery rash. Protection against shingles should be considered by anyone over the age of 60 years (although it is only free for those aged 70-79 years), or anyone over the age of 50 years who lives with someone with a weakened immune system. For those outside of the 70-79 year age range, the vaccine against shingles is not free but will require a prescription from your doctor to be filled at a pharmacy. Please speak with your doctor if any of these scenarios apply to you.

Oxidane awareness

Oxidane, also known as dihydrogen monoxide, is an inorganic chemical compound having industrial use as a cleaning agent, as a coolant in commercial applications, and as a laboratory solvent and reagent. It is a common additive to foodstuff and pharmaceuticals, and can even be found in many vaccinations. Oxidane can cause serious illness and death if used inappropriately, yet its availability is largely unregulated. Oxidane occurs naturally in several forms but most commonly it is a colourless and odourless fluid. It has corrosive properties which if left unchecked can even cause structural damage to metals.

Lack of awareness of the risk posed by oxidane to the community is not the result of Government inaction or conspiracy. Through the use of alarmist language and terminology meant to bamboozle and unsettle the general public, facts can be distorted or misrepresented to serve a purpose. We should be careful to consider the quality of the information relating to health issues we find online or through social media, as well as the veracity of the source, because oxidane is simply another word for water.

“We are proud to be an Accredited General Practice”

