

NEWSLETTER

OCTOBER 2025



SUNSHINE COAST
**LOCAL MEDICAL
ASSOCIATION**

SCLMA.COM.AU

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ISSUE HIGHLIGHTS

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President's Message

Dr Jon Harper

I recently renewed my registration with the medical board through AHPRA's new portal. One of the many questions I had to answer was a tick-box confirmation that I had behaved, and would continue to behave, according to the standards set out in the 'Good Medical Practice' code of conduct. I remember, when I first applied for Queensland medical board registration 25 years ago, attending a very brief interview in Brisbane. Much of today's code of conduct can be pretty much summarised by what my gruff interviewer instructed me 25 years ago, "Remember, don't have sex with your patients!"

Another important part of the code of conduct is about managing conflicts of interest. Doctors are held to a very high moral standard when it comes to giving our opinion. And rightly so. Whether it's patients, courts of law, or policymakers, people need to be able to trust doctors. Clinicians are familiar with the process of declaring financial conflicts of interest, particularly medical researchers and educators. But doctors are also required to be aware of any personal conflicts of interest which calls for some deeper self-reflection. This is particularly important when doctors are uncertain of, or unaware of, knowledge in a particular area. We may have an intuition or 'rule of thumb' but need to recognise that this has to defer to scientific evidence. Many other professions have similar codes of conduct that set high standards to maintain public trust. Believe it or not, politicians have codes of conduct.

Gympie Regional Council's recent decision to stop fluoridating their water supply makes for an interesting case study. Putting fluoride in water is a public health activity, like not letting

children buy cigarettes and alcohol. Australia has widespread fluoridation beginning in the 1950s and covering 90% of the population, although that percentage is significantly less outside metropolitan areas, particularly in Queensland.

Over the years there has been robust dialogue in the scientific literature about its benefits and safety with the current evidence indicating that it is a safe and cost-effective way to reduce dental cavities.

When journalists questioned Gympie councillors about their decision, their conflicts of interest were transparent. (Although they themselves may not have considered their decision-making as conflicted.) Firstly, they reasonably believed that fluoridation, being a public health activity, should be paid for by the state government. This political and financial conflict of interest, however, facilitated a second conflict in the council's decision - conscious or unconscious suppression of known scientific evidence supporting water fluoridation. ABC News quoted one of the councillors stating that, "The science isn't settled!" One would hope that the councillors had at least skim-read the 2017 NHMRC Public Statement on water fluoridation.

The solution is clear to every doctor and dentist, and most parents - state mandated water fluoridation. For further case studies on conflicts of interest in health policy, see US Federal Government 2016 to 2020, 2024 and 2025.

Reference - <https://www.nhmrc.gov.au/about-us/publications/2017-public-statement-water-fluoridation-and-human-health>

Dr Jon Harper - President
5 October 2025

Welcome to our new members!

One of the greatest strengths of the Sunshine Coast Local Medical Association (SCLMA) is the diversity, talent and collegiality of its members. With each new member who joins, our network grows stronger – creating more opportunities to learn from one another, support each other, and collectively advance health care in our region.

In this issue, we are pleased to welcome the following new members below, to the SCLMA. We look forward to seeing you at upcoming meetings, events and social gatherings, and to the contributions you'll bring to our professional community.

- **Mariska Stuurstraat**
- **Natalie Shaddock**

Membership in the SCLMA offers a range of benefits, including:

- Regular educational meetings with high-quality clinical updates and guest speakers
- Members only access to podcasts of monthly meeting presentations
- Gala dinner and/or other events
- Opportunities for collegial networking and collaboration across specialties
- Advocacy on local medical issues and representation of members' interests
- Access to our newsletter and communication channels for keeping up-to-date with medical news and events
- A strong professional and social support network within the Sunshine Coast medical community

If you know of colleagues who are new to the area, recently commenced practice, or who might benefit from joining, please encourage them to connect with us. The more voices and perspectives we bring together, the more vibrant and effective our Association becomes.

We warmly welcome our new members and look forward to building an even stronger medical community together.



Dr Mariska Stuurstraal

Rehabilitation Physician
(BMedSci (Hon 1), MD, FAFRM)

Dr Mariska Stuurstraal is a Rehabilitation Medicine Physician working on the Sunshine Coast. She is passionate and patient-centred, working with her clients to help improve function, achieve meaningful goals and enhance quality of life.

Dr Stuurstraal completed her Doctor of Medicine at the University of New South Wales before moving to the Sunshine Coast to work as a junior doctor. During her specialist training in Rehabilitation Medicine, she has worked at various private and tertiary public healthcare facilities in South-East Queensland, including Eden Private Hospital, the Sunshine Coast University Hospital, and the brain and spinal cord injury sub-specialty units at the Princess Alexandra Hospital.

As a Rehabilitation Physician, Dr Stuurstraal has contributed to the establishment of the RIISE in-

reach rehabilitation team at SCUH, providing early rehabilitation intervention to acute patients on the wards, including ICU and CCU. Dr Stuurstraal further works at Eden Private Hospital in Cooroy, where she leads an experienced multidisciplinary team in providing complex rehabilitation cares for inpatient and outpatient services. This includes musculoskeletal/orthopaedic, cardiopulmonary, oncology, falls prevention and reconditioning, plus a special interest in neurological conditions, including therapeutic Botulinum toxin injections for spasticity management. She also acts in a supervisory role for RACP AFRM trainees.

Dr Stuurstraal looks forward to being part of the SCLMA and working with other local health professionals to continue to grow healthcare provisions on the Sunshine Coast.

P: 1800 333 674



Dr Natalie Shaddock

Obstetrician, Gynaecologist and Fertility Practitioner
FRANZCOG, AFRACMA, MBBS, BSc(Hons)

Dr Natalie Shaddock, is a Specialist, Obstetrician, Gynaecologist and Fertility Practitioner based on the Sunshine Coast. She is passionate about providing compassionate, evidence-based care for women through every stage of life — from adolescence to menopause — with a particular interest in complex gynaecology, minimally invasive (laparoscopic) surgery and fertility management.

A Sunshine Coast local, she began her medical journey at the University of Queensland and has trained across major tertiary and regional

hospitals, including the Mater Mothers' Gold Coast, Toowoomba and Nambour Hospitals. Natalie recently founded Athena O&G, a new private multi-disciplinary practice in Buderim dedicated to empowering women through personalised care and clinical excellence. She works closely with local GPs and specialists to ensure seamless, holistic care for all patients. You may know Natalie from the SCUH public and is now offering private care to the Sunshine Coast.



27th ANNUAL GENERAL MEETING

27 November 2025

Agenda:

1. Chairman's opening remarks
2. Apologies
3. Minutes of previous Annual General Meeting, 28 November 2024
4. Business arising from previous minutes
5. The presentation of the statement of income and expenditure, assets and liabilities and mortgages, charges and securities affecting the property of the SCLMA for the last financial year
6. The presentation of the Auditor's report on the financial affairs of the LMA for the last financial year
7. The appointment of an Auditor/Accountant
8. The election of members of the Executive Management Committee
9. Incoming President's Address
10. General Business

Close

Dr John Evans
Honorary Secretary



Nomination form for the SCLMA Management Committee

Nominations are to be proposed by a financial member of the Association, seconded by one other financial member of the Association, and accepted by the nominee.

Position.....

Nominee (print).....

Proposer (print).....

Secunder (print).....

I..... agree to this nomination
(print name)

.....
(signature)

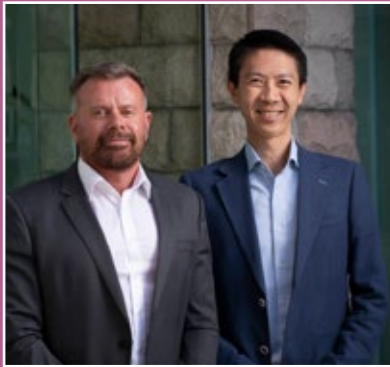
.....
(date)

RSVP: Friday, 21 November 2025
Scan and email to: admin@sclma.com.au



Supporting Queensland doctors,
creating better health.

Queensland Update



**Dr Brett Dale, AMA CEO and
President Dr Nick Yim**

This report comes hot on the heels of our incredible annual AMA Queensland Conference, this year in Vancouver, Canada.

Around 60 members joined us for a week of seminars, sight-seeing and industry insights. A highlight was a real time demonstration of photobiomodulation (red light therapy), which can influence brain function and improve performance. Kudos to our events team and support staff who made the conference happen and stay tuned for a full event wrap up once we have properly unpacked. Pill-testing was back in the news in September after the Queensland Government moved to ban it, while we had reason to celebrate with official acknowledgement of rural generalism as a speciality within general practice. We have also been in the media talking about paracetamol and pregnancy misinformation, fluoride, eScooters and our Workforce Action Plan.

Once again, thanks to all members who have updated their log-in details as part of our website and database upgrade.

If you're having trouble making the switch, there is a wealth of information online, and our team is ready to assist if needed. You can find more information [here](#).

ADVOCACY EFFORTS

Pill-testing

We had one of our busiest weeks of media inquiries all year when the state government made a late night move to ban pill-testing on the last sitting day in September. We were deeply disappointed by this turn of events.

Drug checking is an effective measure that gives individuals a chance to confirm what their pills really contain and allows the public to be notified of dangerous substances such as nitazenes circulating in the community.

Most importantly, it gives people the chance to talk to a health professional about their drug use and to be offered education and support in a non-judgemental space.

In moving the amendments, Health Minister Tim Nicholls tabled an independent University of Queensland evaluation of pill-testing services from their 2024 launch until they were shut down in April this year.

The final report confirmed that drug checking saves lives, especially among young people, and should be expanded, not banned. It showed Queensland's pill testing sites provided an invaluable early warning system for the whole community, with 43% of the 1530 samples tested containing unexpected substances.

We will continue to back the science and advocate for pill-testing as a life-saving public health measure.

AMA QUEENSLAND

Want a discount on your membership rate for 1 year?
Refer a member today.

- Refer 1 member 25% discount*
- Refer 2 members 50% discount*
- Refer 3 members 75% discount*
- Refer 4 members 1 year complimentary*

[Read more](#)
*T&C apply

Rural Generalism

After many years of campaigning from medical organisations - including AMA Queensland - rural generalist medicine has been formally recognised as a specialised field within general practice.

It acknowledges the high-quality and comprehensive care rural generalists deliver in rural, remote and First Nations communities. Our own Workforce Action Plan calls for a revived focus on generalist, flexible, broad-skilled specialists and highlights the benefits for both the public and the profession, so we're thrilled by this recognition.

Associate Professor Ewen McPhee AM is a veteran rural generalist, having opened his Emerald practice in 1992. He serves on AMA Queensland's Committee of General Practice, and you can read his thoughts on why this is such a milestone moment [here](#).



Paracetamol and pregnancy misinformation

US President Donald Trump unleashed a flurry of concern when he declared pregnant women should not take paracetamol (referred to as acetaminophen or by the brand name Tylenol in America), suggesting a link to the development of autism. The claim has been met with near-universal rejection from medical bodies, which describe paracetamol as still the safest painkiller to take during pregnancy.

Of course, we encourage expectant mothers with concerns to talk to their GP or obstetrician about what pain relief options are best for them. Autism diagnosis

rates have increased in recent decades due to the diagnostic criteria being expanded, and information about the autism spectrum being more widespread.

Uninformed public discourse like this also risks stigmatising neurodiverse people and exacerbating the challenges they already face. Misinformation about appropriate use of medicines joins misinformation about vaccination as a significant threat to public health, and one that we will continue to correct through thoughtful, sensitive and evidence-based advocacy.

Fluoride

Speaking of public health, we're seeing a concerning trend of regional Queensland councils turning against water fluoridation. The latest is Gympie Council, which voted last month to rid its municipal water supply of fluoride in a 5-3 decision.

AMA Queensland had written to Gympie Council a year ago urging them to look at the long-established evidence showing low levels of fluoride in the water reduce dental decay, particularly for children, and not make this reckless decision. We have also partnered with the Australian Dental Association Queensland

to jointly campaign to retain or reinstate fluoridation throughout Queensland. It is shocking that councils have allowed misinformation spread online to influence policy that will affect their residents for years to come rather than acting responsibly to protect their communities, especially children and the most vulnerable. Water fluoridation is regularly cited as one of the top public health measures of the 20th century.

It is distressing to think that the 21st century will see more children suffer poor oral health outcomes.

Resident Hospital Health Check

How many donuts does it take to complete a Resident Hospital Health Check?

According to our dedicated AMA Queensland and ASMOFQ team members – 1523!

That's how many of the delicious treats they handed out during visits to 21 of our public hospitals, encouraging junior doctors to fill in this important annual survey into their working life and conditions. The responses are currently being analysed and we look forward to sharing the results with our members and HHSs across the state.

NEWS

eScooter Inquiry

We were pleased to have the opportunity to appear before the parliamentary inquiry into e-mobility devices to voice our concerns about the risks posed by their use. Surgeons, paediatricians and emergency physicians across Queensland are increasingly alarmed by a growing number of people presenting to emergency departments with serious injuries linked to e-scooters and e-bikes.

We called for the minimum riding age to be increased to 16, better enforcement of speed limits, the requirement for certified helmets and safety equipment, and investment in separated traffic-active travel infrastructure to protect pedestrians and riders alike.

The Role of the Doctor

As we continue to promote our Workforce Action Plan, we've been ruminating on one of its six planks: The Role of the Doctor. With generational and demographic change – not to mention growing demand and funding pressures – we must take up the challenge of changing that role ourselves, before other forces do it for us.

You can read our opinion piece on the topic [here](#).

EVENTS

Cairns Member Networking Event

We spent a busy couple of days in beautiful Cairns, visiting junior doctors at the city's hospital, checking in with local private practices, joining a water fluoridation think tank and of course listening to local members at our networking event.

Despite funding pressures and workforce challenges, the passion, commitment and dedication of our Far North Queensland doctors was plain to see.





Supporting Queensland doctors,
creating better health.

Upcoming Events

Our Women in Medicine Brisbane breakfast is coming up on 30 October at Victoria Park. Our theme this year is #AccelerateAction for gender equality, and we'll be celebrating women supporting fellow women and our allies as we work together to make that a reality. Keynote speaker AMA Queensland Vice President Dr Emilia Dauway will host a panel discussion with a range of inspiring doctors.



Our final Private Practice Refreshed seminar will take place on the Gold Coast on 5 December. It's a perfect chance to learn from experts about key issues facing your business, how to grow sustainably and ensure you have the right legal, insurance and data measures in place. It also kicks off with a MasterChef team building session. It will be followed by our last Member Networking Event, so if you're on the Gold Coast make sure to join us at the QT Hotel.



GP Liaison

Your hospital connection, together we can deliver better healthcare.

Dr Edwin Krays and Dr Michelle Johnston



Introducing Sunshine Coast Health

You may start to notice a change in the way we describe ourselves in communications. While our official name remains Sunshine Coast Hospital and Health Service, feedback from patients and the community has shown that Sunshine Coast Health is clearer, easier to understand, and more aligned with the way people think about our services.

Using Sunshine Coast Health also brings us into line with how other health services across Queensland present themselves, helping create consistency for patients, families, and partners. Nothing about the care we provide or the services you access is changing, but you may see the new name used in our newsletters, forms, and other materials over the coming months. Thank you for your ongoing support as we continue to strengthen our connection with the community we serve.

'Request for Advice' eConsult service is improving local connections

GPs can access local advice from specialist colleagues in the Sunshine Coast via GP Smart Referrals 'Request for Advice.'

The list of Sunshine Coast Health specialties offering this 5-business-day turnaround service to GPs is steadily growing, and now includes the following specialties (more to come online soon):

- Cardiology
- Dermatology
- General Medicine
- General Surgery
- Geriatrics
- Haematology

- Hepatology
- Immunology
- Neurology
- Urology
- Paediatrics
- Persistent pain
- Rheumatology
- Rehabilitation Medicine
- Wound management
- Respiratory Medicine

Access this eConsult service via the GP Smart Referrals icon/button in 'Best Practice' or 'Medical Director.' Please note the 5MB attachment limit in GP Smart Referrals has been removed.

Request for Advice (eConsult)



Are you interested in a GP with Special Interest (GPSI) position?

Part-time Opportunities for GPs are now available. These GPSI Senior Medical Officer (SMO) positions offer GPs a great opportunity to gain experience working in a specialty of your interest, with a commitment of on average only 4-8 hours per week. GPSI positions enable GPs to gain knowledge and skills - while working under a consultant's supervision on a part-time basis and with limited time away from your GP practice.

Minimum requirements:

- Vocational registration (e.g. FRACGP, FACRRM)
- Currently working in general practice in the SCHHS region

Preferred but not essential (and depending on the specialty):

- 5+ years GP experience (there is flexibility in some positions)
- While not essential - extra qualifications or experience in the relevant specialty is helpful.

Current positions available:

- Antenatal - managing self-referrals (for vulnerable women)

- Gynaecology - IUD clinic
- Mental Health - Alcohol and Other Drugs (AODs)
- Geri-Oncology
- Geriatrics (Residential Aged Care Facilities)
- Palliative Care - Gympie
- Palliative Care - Caloundra
- Medical Oncology
- Cardiology

To express interest in these positions or to seek more information, please email the GPSI team: SCHHS-GPSI@health.qld.gov.au

Contact details for GPLU

General Practice Liaison Unit

Ph: 07 5202 3822

Fax 07 5202 1044

Sunshine Coast University Hospital
6 Doherty Street, Birtinya 4560

schhs-gplo@health.qld.gov.au

General enquiries, feedback & suggestions, complaints, referrals, clinical handover & communication, problem-solving, GPSI program etc

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Dr George Bogiatzis

Obstetrics and Gynaecology

E: admin@drgeorge.com.au

P: 07 5444 6400

Ten minutes with Dr George Bogiatzis

Editor: George I hear you have some news?

George: After 25 years of delivering babies and caring for families on the Sunshine Coast, I've decided to shift focus from obstetrics to concentrate more on gynaecology and fertility care. I'm not retiring yet, just embracing a change.

Editor: So you're not retiring?

George: No far from it. This change will give me more time to focus on gynaecology and fertility, which means shorter waiting times and easier access for my patients.

Editor: What drew you to Obstetrics and Gynaecology in the first place?

George: Obstetrics appealed to me because it's a positive field focused on new life. Being the youngest of five (4 older sisters) helped me relate to women and listen to patients. Gynaecology and Fertility allow me to care for women at every stage, and there is clearly a trend toward more women and couples seeking fertility support.

Editor: Do you remember your first delivery and how did it make you feel?

George: Absolutely I do, I was a medical student back in 1989 at the old Royal Women's Hospital in Brisbane. It felt like an incredible privilege to witness and participate in the wonder of childbirth. No one forgets that feeling.

Editor: So why the change in your practice?

George: I feel as though I am at an age where slowing the pace down a little will enable me to work for as long as I choose. After 25 years, the

timing seems right to make this change, and I want to keep working in a way that's sustainable and fulfilling for the long term.

Editor: Do you have a favourite memory or story from your years of practice that still makes you smile?

George: There are so many it's hard to choose. There was one day I was trying to leave work early to play a regular game of social touch football. As I was leaving the hospital a car pulled up outside with a woman about to give birth no time to get inside the hospital so I wound the car seat back and she birthed in the car in the driveway of the hospital and I got to touch football on time!

Editor: What's one lesson your patients have taught you over the years?

George: One of the biggest lessons patients have taught me is the power of determination and resilience. People know their bodies well, and their instincts often match what we as medical professionals observe.

Editor: How long have you been practising on the Sunshine Coast, and what brought you here originally?

George: I've lived on the Sunshine Coast since 2001, but I first trained here in 1997-98 at Nambour General Hospital. It's a beautiful, clean place to live and work, and I appreciate the lifestyle it offers. The close-knit community here is a significant advantage, with easy access to Brisbane's subspecialties when needed.



Editor: If you weren't a Doctor what do you think you'd be doing on the Coast?

George: If I weren't a doctor, I'd probably be running a delicatessen with a friend, selling all the foods we love to eat.

Editor: What advice would you give to younger doctors starting out in obstetrics and gynaecology?

George: I'd definitely recommend experiencing work/life in a different society, whether overseas or in a rural community. It's an enriching experience that broadens perspectives on medicine.

Editor: How do you see the future of women's health care evolving in the next 10 years?

George: In the next 10 years, advances in genetic technology will continue to shape the future of IVF and prenatal screening, bringing exciting developments to the field of obstetrics and gynaecology.

Editor: If you had a free weekend with no calls, what would you be doing?

George: A perfect free weekend for me would include a morning walk, some golf or cricket, followed by cooking and maybe a movie.

Editor: What's your go to in the kitchen?

George: With my Greek heritage it would have to be a slow cooked lamb shoulder over a charcoal grill.

Editor: Finally, what's something most people don't know about you?

George: Though I was born and raised in North Queensland, my Greek heritage is a significant part of who I am, with my family hailing from the small island of Kastellorizo.





Patients Suffering Chronic Knee Pain?

Genicular Nerve Radiofrequency Ablation may be suitable in the treatment of a variety of conditions, including:

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- ⦿ Osteoarthritis (OA)
- ⦿ Degenerative Joint Disease
- ⦿ Patients unfit for knee replacement
- ⦿ Patients trying to avoid knee replacement
- ⦿ Post surgical knee pain

RFA is a minimally invasive procedure in which radiofrequency currents are applied near the nerve to interrupt the pain signal to the brain. This is a simple 30 minute procedure performed in our clinic.

Prior to a genicular nerve RFA, a diagnostic procedure, called a genicular nerve block, is performed using local anaesthetic to determine if the ablation would be effective. This test is Bulk Billed under Medicare.

We accept referrals from both GP's and Specialists for this procedure.



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e reception@theradiologyclinic.com.au

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Forest Glen Q 4556

t 07 5228 0000

e reception@theradiologyclinic.com.au

theradiologyclinic

Turning the Tide

Early Detection and Intervention in Cognitive Decline and Dementia



CLINICAL SOCIETIES

Dementia is now the leading cause of death in Australia¹.

Without change, the number of people living with dementia will more than double by 2058 creating one of the most pressing public health challenges facing our communities.

New treatments and diagnostic tools mean early detection and intervention could change the trajectory of dementia care forever.



LEARNING AREAS

Join more than 2,400 healthcare professionals across the Country to Coast QLD region to:

- ✓ Explore current tools for screening and early diagnosis of mild cognitive impairment (MCI) and dementia.
- ✓ Explore innovations in early intervention and post-diagnostic dementia care.
- ✓ Learn about new pharmacological interventions.
- ✓ Discover how technology and social prescribing are transforming dementia care.
- ✓ Promote culturally responsive and inclusive practices for priority populations.

¹ Dementia in Australia, Deaths due to dementia in 2023- Australian Institute of Health and Welfare. (National Mortality Database, 2025).



EVENING EVENT LOCATIONS & DATES

Evening events from 5:30-8:30pm.
Dinner and refreshments provided.

Be part of the growing network of more than 2,400 healthcare professionals across the Sunshine Coast, Wide Bay and Central Queensland who are networking and learning together.

Noosa: 21 October – Noosa Springs Golf and Spa Resort

Nambour: 22 October – Nambour RSL

Caloundra: 23 October – Caloundra RSL

Bundaberg: 28 October – Brothers Sports Club

Mundubbera (broadcast from Bundaberg):
28 October – Mundubbera Bowls Club

Hervey Bay: 29 October – Hervey Bay Boat Club

Gympie: 30 October - Gunabul Homestead

Emerald: 4 November – Emerald Western Gateway Motel

Rockhampton: 5 November – Empire Apartment Hotel

Biloela (broadcast from Gladstone):
6 November – Hotel Settlers

Gladstone: 6 November – Gladstone Event Centre

EARN CPD POINTS

Clinical Societies events are RACGP & ACRRM accredited for CPD Points.





Shane Mitchell
General Manager
E: shane.mitchell@uhealth.com.au
P: 07 5430 3260

Monthly update

Dear members,

Thank you to all who attended our recent *'We've Got You Covered'* full-day GP Education event. It was fantastic to see many of you there, and I hope you found the opportunity to connect with our diverse team of specialists both valuable and insightful.

Introducing new surgical guidance technology at Buderim



With Breast Cancer Awareness Month top of mind, I'm pleased to share an exciting advancement at Buderim Private Hospital with the introduction of new surgical guidance technology aimed at improving outcomes and experience for our breast cancer patients.

The innovative localisation technology offers a range of benefits not only for patients but also for our breast surgeons, who we've been grateful to collaborate with to make this technology available at Buderim. I'd especially like to thank Dr Roderick McMurray who has worked closely with us throughout the process.

For many patients, breast cancers are only detectable on imaging and can't be palpated. Traditionally, these lesions have been marked prior to surgery using hookwires - a technique that can be uncomfortable and prone to movement,

making precise targeting more challenging for surgeons. Instead, wire free options which use a 'seed' or 'reflector' are now becoming the standard of care. The tiny 'seed' marker can be placed into the tumour well ahead of surgery, eliminating the risk of movement and allowing surgeons to locate and target the lesion with greater certainty in theatre.

Backed by over a decade of evidence, the technology is all about precision and patient comfort, and we're proud to be able to make this an option for our patients and their surgeons. All of our breast and endocrine surgeons are now able to offer this technology to patients.

2025 Quick Reference Guide

Finally, we hope you will have now received copies of our 2025 Quick Reference Guide which was posted to your practices in recent weeks. If you have not received copies or would like to order more, please contact our Business Development Manager, Pam Fotheringham, via email to: pamela.fotheringham@uhealth.com.au

A digital version of the Guide is also readily available to download from our website. Thank you for your continued support of Buderim Private Hospital.

Kind regards, Shane



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Does leg artery disease cause you pain when walking?

If you are over 18 years of age and have been diagnosed with Peripheral Artery Disease (PAD) you may be eligible to take part in one of our research trials.

Participants wanted

The VasoActive Research team at UniSC is currently recruiting people with Peripheral Artery Disease to participate in research trials. We have a number of current studies that are testing new rehabilitation, telehealth, and medical interventions.

What is involved?

Interventions and treatments include:

- ✓ Supervised exercise programs
- ✓ Telehealth programs
- ✓ Medical interventions

Research studies typically involve assessments including:

- ✓ Walking tests
- ✓ Vascular function tests
- ✓ Health questionnaires

Participants will receive support to cover the costs of transport and parking for study visits.

More information

To learn more or to find out whether you are eligible, please call or email a member of the VasoActive Research team:

Email: vasoactive@usc.edu.au

Tel: +617 5456 5364

Scan the QR code to register your interest



All research trials conducted by the VasoActive Research team have full ethical approval.

Spotlight on Generalism

Griffith MD Program and the Future of Primary Care

The Griffith University Doctor of Medicine Program places a strong emphasis on generalism, primary care, public health, and First Peoples health—core pillars of a healthcare system that serves all Australians.

A standout example of this commitment is the General Practice Longitudinal Program (GPLP), a cornerstone of GP training at Griffith University's Sunshine Coast and Gold Coast campuses. In 2025, an impressive 84 Griffith MD graduates joined the Royal Australian College of General Practitioners (RACGP) training program, marking a significant contribution to the future of general practice.

The GPLP was also commended by the Australian Medical Council during the successful 2025 re-accreditation of the Griffith Medical Program, recognising its innovative approach to embedding general practice into medical education.

At a recent Sunshine Coast Local Medical Association (SCLMA) meeting, Dr Bryan Palmer had the pleasure of reconnecting with three members of the Sunshine Coast 2022 MD cohort: Dr's Lisa Ups, Liz English, and Katherine Ups. All three were part of the first cohort to undertake the Griffith MD Program on the Sunshine Coast and are now undertaking GP training at practices across the region, exemplifying the program's success in cultivating local talent.

By showcasing primary care early in the MD curriculum and placing students in local practices with outstanding GP supervisors, Griffith is helping shape a generation of doctors who are not only skilled but deeply connected to their communities. These experiences foster a strong likelihood that graduates will return to serve as local GPs—strengthening the backbone of Australia's healthcare system.





Cancer Care Noosa



Low Dose Radiation Therapy (LDRT) for
Osteoarthritis and other Benign Conditions:

Expanding Horizons Beyond Cancer Care

Radiation therapy is traditionally linked to the treatment of cancer, but at low doses it also has powerful anti-inflammatory and anti-proliferative effects. Decades of international pain data support its safe and effective use in treating select benign conditions, offering patients pain relief, increased mobility and improved quality of life.



"LDRT offers patients with limited options, an effective, non-invasive alternative. The durability of pain relief, in some cases extending across 1-2 years, is particularly encouraging." Dr Debra Furniss.

Benign condition

Musculoskeletal disorders
(e.g. osteoarthritis, plantar fasciitis)

Outcomes using LDRT

Sustained pain relief and improved mobility

Efficacy and Safety

International studies show LDRT can provide significant, lasting relief—in some musculoskeletal conditions—by improving function and reducing pain. Response rates of 64–79% have been reported in patients with osteoarthritis. Treatments are well tolerated with very low risk of side effects, given the small total dose of radiation (3–6 Gy compared to 45–60 Gy or higher which is often used in cancer treatments).

Treatment Overview

LDRT is delivered in a few, short outpatient sessions over several weeks. Each treatment takes about 10–15 minutes. The total dose is carefully tailored to maximise therapeutic benefit while minimising risks. The anti-inflammatory effects of LDRT help in reducing pain, improving mobility and promoting healing.

LDRT offers several advantages for patients:

- **Non-invasive and drug-free:** No additional treatment medications are required
- **Durable response:** Pain relief can extend from 12–24 months or longer
- **Evidence-based:** Over 60 years of published data support its role in benign disease
- **Accessible:** Eligible treatments attract a Medicare rebate, improving affordability for patients

When to refer a patient for consideration of LDRT?:

- **Conservative treatments fail:** Patients have not responded to conventional therapies including medications, physical therapy, lifestyle modifications or injections

- **Patient is not suitable for surgery:** Patients may not be a good surgical candidate or need a solution prior to surgery
- **Ongoing pain and functional impairment:** Patients experience persistent pain and functional impairment that affects their quality of life, despite trying conventional management strategies

LDRT offers a safe, effective and affordable treatment option for osteoarthritis and plantar fasciitis. Radiation therapy can also be used in the management of other benign conditions such as Dupuytren's Disease and Ledderhose Disease, and it can be used for Keloids to reduce the risk of recurrence following surgical resection of the scar.

Doctors can refer patients who have not found relief through other treatments and are seeking non-invasive alternatives for their benign conditions. For consideration of radiation therapy, please refer your patients to Dr Debra Furniss at Cancer Care Noosa via Medical Objects or the centre details below.

Cancer Care Noosa

36-40 Hofmann Drive, Noosaville QLD 4566

07 5293 7200

admin@cancercarenoosa.com.au

cancercarenoosa.com.au



Cancer Care Noosa now open!

Cancer Care Noosa is the region's only comprehensive oncology centre and offers access to affordable cancer care services without a waitlist. Our multidisciplinary team of local oncology specialists offer personalised healthcare utilising advanced treatments and technologies, to ensure the best possible outcomes for patients.

We provide:

- Radiation oncology
- Medical oncology
- Oncology pharmacy
- Clinical trials and research
- Pathology
- Local specialists you know and trust
- Lymphoedema nurse practitioner clinic
- Specialist consulting
- Easy access and 150 car parks
- Affordable cancer care
- Coming later this year: Noosa Breast Clinic and comprehensive medical imaging services



Dr Debra Furniss

Radiation Oncologist & Medical Director

Clinical interests in breast, GI, bone, brain, spine, lung and skin cancers, haematological malignancies, palliative radiotherapy and treatment for benign conditions.



Dr Harry Gasper

Medical Oncologist

Experienced in treating a broad range of malignancies with an interest in GI, lung, skin, prostate and brain cancer.



Dr Michelle Morris

Medical Oncologist

Experienced in managing a wide range of solid tumour malignancies with clinical interests in breast cancer, melanoma, genealogical and urological malignancies.



Mr James Chapman

Nurse Practitioner/Lymphoedema

Accredited and experienced in the assessment of lymphoedema and lipoedema and offers affordable and patient centric treatment options.

A better way, a brighter outcome

Special disability trusts

This article provides a basic overview of Special Disability Trusts (SDTs). Please note that it is important to seek specific advice and ensure all the requirements are satisfied prior to establishing an SDT.

An SDT may be set up either by will or during the lifetime of the settlor (the person who creates the trust). The term "Special" refers to the social security and tax treatment of the trust and not the disability of a person.

It is important that, before establishing an SDT, verification is sought from Services Australia or the Department of Veterans' Affairs to ensure that the person for whom the trust is being established meets the definition of 'severe disability' under section 1209M of the Social Security Act 1991 (Cth) (the Act). Where the person with disability does not meet the definition of 'severe disability', an SDT cannot be established.

Under the Act, an SDT is defined by reference to section 1209L of the Act, which sets out the requirements, such as primary beneficiary, trust purpose, trust deed, independent trustee, trust property, expenditure, compliance with investment restrictions, annual financial reporting and audit requirements. Similarly, the Veterans' Entitlements Act 1986 (Cth) defines an SDT by reference to section 52ZZZW with comparable requirements. The Duties Act 2001 (Qld) adopts the Commonwealth definition of SDT in section 1209L and section 52ZZZW.

Concessions for special disability trusts

Income Test

Income from the assets of an SDT will not be counted for the application of the income test to the primary beneficiary of the SDT. The use of money from the trust to pay for care, accommodation, maintenance of trust assets and discretionary spending for the primary beneficiary will not be counted as that person's income for income support purposes. (In regard to taxation, the trustee is assessed and pays tax at the primary beneficiary's marginal rate of tax on any

unexpended income, rather than the top marginal rate of tax).

Assets Test

The assets held within a complying SDT are not counted as assets of the primary beneficiary for the purposes of the social security assets test (\$500,000 indexed 1 July each year). As at 1 July 2025, the current indexed asset value limit is \$832,750. In addition, if the primary beneficiary's main residence is owned by the SDT, the value of the home is also disregarded from the asset value limit.

Who can contribute to an SDT?

Anyone can give to an SDT. However, the principal beneficiary and their partner can only do so if the gift is funded by assets of the principal beneficiary received under a will or a superannuation death benefit received by the principal beneficiary. Any gift made by an immediate family member or any other person to an SDT must be unconditional and made without expectation of receiving any payment or benefit in return.

Gifting concessions

The gifting concession applies to gifts up to \$500,000 (non-indexed) combined and is available for eligible family members of the principal beneficiary. Immediate family members are defined in section 23(1) Dictionary of the Act.

The gifting concession is only available to an immediate family member who:

- Receives a social security pension and has reached pension age or
- Receives a service pension and has reached age pension age or
- Receives a veterans' income support supplement and has reached the qualifying age for the payment

Office of State Revenue Queensland – Transfer Duty Exemptions

Section 126A of the Duties Act 2001 (Qld) provides exemptions for SDTs. Transfer duty is not imposed on a dutiable transaction that is:

- The transfer or agreement for the transfer of an eligible home to the trustee of an SDT or
- The creation of an SDT holding dutiable property, to the extent the dutiable property is an eligible home or;
- A trust acquisition is an SDT to the extent the trust interest acquired relates to an eligible home

Eligible home, in relation to an SDT, means residential land that is being, or will be, used as the principal place of residence by the beneficiary of the trust.

If you require accounting, wealth and advisory assistance, please contact our experienced accountants and advisors at Poole Group on 07 5437 9900 or poole@poolegroup.com.au



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Martin Cahill

Physiotherapist & Physiotherapy Clinical Lead,
Team Rehab Solutions

From acute care to community

My Journey in Physiotherapy

Looking back on my 20 years in physiotherapy, most of my experience has been in acute care and musculoskeletal practice. I've worked in hospital settings, supporting recovery after injury and surgery, and in private practice, helping clients return to the activities they love. These roles gave me a solid clinical foundation, but I was curious about what happens beyond hospital doors and clinic walls.

Joining Team Rehab Solutions (TRS) was a turning point. After years in fast-paced acute care and MSK environments, I wanted to bring that expertise into people's homes and communities, supporting them in their daily lives. Community-based work is deeply rewarding. Clients often face complex needs that don't fit neatly into one category, and every interaction is an opportunity to make a meaningful difference.

At TRS, I help people manage pain, regain mobility, and build function in ways that enhance independence and quality of life. From severe cardiorespiratory issues to complex age-related conditions and progressive neurological diseases, our team meets clients where they are, delivering personalised care tailored to real-life challenges.

Physiotherapy has taken me from hospital wards to living rooms, and I wouldn't change it. Being part of TRS means working alongside passionate clinicians who share a commitment to delivering the very best care, right where it's needed most. There's nothing more fulfilling than seeing someone regain confidence and independence in their own home. It's a reminder of why community physiotherapy matters.

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We proudly serve the Sunshine Coast in regions such as Noosa, Buderim, Maroochydore, Caloundra, Palmwoods, and Beerwah.

Team Rehab Solutions proudly supports Home Care Providers (HCP), My Aged Care and the NDIS.

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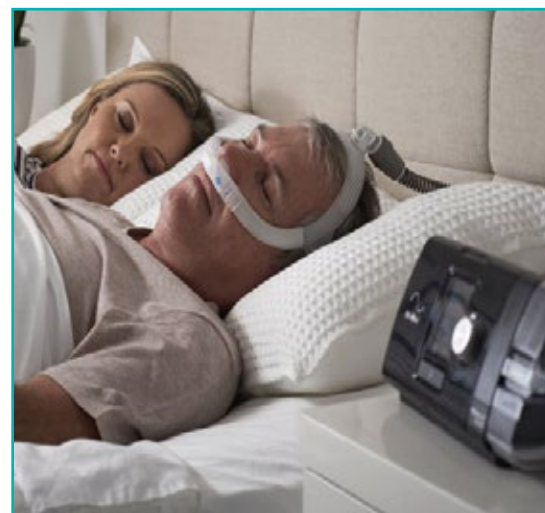
mySleep® opened their first Sunshine Coast clinic last year in Warana. For more than two decades, mySleep® has supported thousands of patients in the diagnosis and treatment of Sleep Apnea. As one of Australia's longest established providers of home-based sleep testing and CPAP therapy, we are proud to partner with healthcare professionals to deliver effective, patient-centred care.

At mySleep®, we offer bulk billed home-based sleep studies, ensuring patients have access to diagnosis with no out-of-pocket expense. For those requiring treatment, our clinics provide a comprehensive range of CPAP machines and masks available for both hire and purchase. We also offer alternative therapies for Sleep Apnea and Snoring, giving patients and their doctors options that are tailored to their needs. The mySleep® difference lies in our personalised approach. Our appointment-based clinics allow patients the time and attention they deserve, while our private consultation rooms provide a comfortable and discreet setting for treatment discussions. Every consultation is delivered by qualified Sleep Health Experts, ensuring that patients receive professional, evidence-based care. We also provide structured treatment trials with regular follow-up appointments and data downloads, supporting patients through the crucial early stages of therapy.

Our commitment does not end once treatment begins. Patients benefit from ongoing support, including free after-sales care on all CPAP machines for the length of their warranty. We also provide complimentary data downloads and interpretation to optimise therapy outcomes, alongside access to discounted member pricing and exclusive offers. To make treatment even more accessible, we operate an online store with free delivery on orders over \$100, and we stock a full range of CPAP spare parts, accessories, and servicing options to ensure equipment remains in peak condition.

At mySleep®, our goal is simple: to improve patient outcomes through accessible diagnostics, proven therapies, and continuous support. By referring your patients to mySleep®, you can be assured they will receive expert guidance, individualised care, and long-term support to help them achieve better sleep health.

To discuss referrals or request referral packs for your practice, please contact your local mySleep® representative – Judy Carter at judyc@mysleep.com.au or 1300 605 700. Or for further information visit www.mysleep.com.au



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Dr Bradley Wong
Radiation Oncologist

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Dr David Schlect
Radiation Oncologist

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Dr Sophia Ly
Radiation Oncologist

Gastrointestinal (upper and lower), lung, breast and palliative radiation therapy

On the Sunshine Coast, our services offered include:

- Personalised care, treating the individual, not just the condition
- Radiation therapy for most adult cancer types
- Non-invasive treatment for non-melanoma skin cancer
- Rapid access to radiation therapy treatment in palliative setting
- Treatment for specific benign conditions e.g Dupuytren's disease, plantar fasciitis, plantar fibromatosis and keloid scars
- Stereotactic radiation therapy for cranial, lung, spine, prostate, bone, soft tissue, and liver lesions
- Patient transport services Gympie to Noosa route (for eligible patients)
- Access to allied health services on site
- On site breast cancer specialist nurse
- Breast Cancer Wellness and Survivorship Clinic

Treatment centres:

GenesisCare, Buderim
10 King Street

Tel: (07) 5374 8100 | Fax: (07) 5374 8110
ReceptionOncologyBuderim@genesiscare.com

GenesisCare, Noosa
90 Goodchap Street

Tel: (07) 5377 2200 | Fax: (07) 5377 2210
ReceptionOncologyNoosa@genesiscare.com

Outreach consulting clinic:

Gympie fortnightly clinic – 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



Dr. Sarah Murgatroyd

Moreton Bay Orthopaedic Practice



Dr. Sarah Murgatroyd, a fellowship-trained Paediatric Orthopaedic and Upper Limb Surgeon, now offers local services on the Sunshine Coast. Dr. Murgatroyd treats all paediatric musculoskeletal conditions and adult upper limb injuries, including joint replacements.

Why choose Dr. Murgatroyd for your paediatric patients?

- Local service with consulting at Sunshine Coast University Private Hospital, Caboolture Medical Hub, and our Kippa-Ring practice - no more long trips to Brisbane.
- Comprehensive care for children with musculoskeletal conditions, from simple fractures to complex deformities
- Treatment in Upper Limb Adult Orthopaedics and General Trauma for all ages

Please contact Dr Murgatroyd to refer any paediatric or general orthopaedic patients who could benefit from her expertise.



P: 07 3889 5154

admin@mbop.com.au

Suite 11, Peninsula Specialist Centre,
Kippa-Ring QLD 4021



mbop.com.au



Fellow of the Royal Australasian
College of Surgeons

Introducing: SCLMA Research Corner

At the Sunshine Coast Local Medical Association, we know that research is at the heart of improving patient care, shaping policy, and driving innovation in medicine. Many of our members – and their institutions – are actively engaged in exciting research projects, and we'd love to shine a light on that work.

Starting this month, we are launching the SCLMA Research Corner – a regular feature in the newsletter where we highlight what our colleagues are currently researching. The aim isn't to publish completed studies, but rather to showcase what's happening right now: new projects underway, trials recruiting participants, or even ideas that are just getting off the ground.

This is a great way for members to:

- Share what their teams are working on
- Find potential collaborators
- Reach out to colleagues for patient recruitment
- Raise awareness of local research happening here on the Sunshine Coast

If you, your practice, or your institution are involved in research – big or small – we'd love to hear from you. A short summary is all that's needed to get the conversation started. Please get in touch with us to feature your work in the next edition. Together, we can help foster collaboration and make the Sunshine Coast a hub of innovation in medical research.



X

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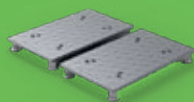
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Sunshine Coast
ORTHOPAEDIC CARE



Sunshine Coast Neurosurgery

Specialist practice of Dr Stephen Byrne

Working on the Sunshine Coast since 2017, Dr Byrne MBChB, MRCSEd, FRACS underwent his neurosurgical training in Melbourne, Adelaide and 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 personalised care using the latest techniques to deliver world-class healthcare. We offer advice on surgical and non-surgical strategies of care.

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.



List of services

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

- Cervical and lumbar degenerative conditions
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- Pituitary tumours
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- Radiofrequency Ablations

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Our Local Doctors

Dr Michael Kreltszheim | Dual-trained Radiologist and Nuclear Medicine Specialist

Special interests: Oncology, Nuclear Medicine & Molecular Imaging, Theranostics.

Roles: Qscan Radiologist and Deputy Director of Nuclear Medicine & member of haematology and lung MDT at Sunshine Coast University Hospital.



Dr John Blazak | Dual-trained Radiologist and Nuclear Medicine Specialist

Special interests: Oncology, Nuclear Medicine & Molecular Imaging, Thoracic, Head & Neck Malignancies.

Roles: Qscan Radiologist and Network Training Director for the Sunshine Coast Radiology training hub



Dr Corey Thompson | Dual-trained Radiologist and Nuclear Medicine Specialist

Special interests: Nuclear Medicine, Oncology & Trauma Imaging, Theranostics.

Roles: Qscan Radiologist and active in malignant haematology and head & neck MDTs.



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- 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
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Dr Natalie Shaddock

FRANZCOG, AFRACMA, MBBS, BSc(Hons)

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F. 07 5406 7031

Clinical queries:

drnatalie@athenaog.com.au

General queries:

admin@athenaog.com.au

Referrals:

referrals@athenaog.com.au

www.athenaog.com.au



ATHENA O&G

OBSTETRICS GYNAECOLOGY FERTILITY

Dr Natalie Shaddock is an experienced obstetrician and gynaecologist with a special interest in fertility and IVF. She is dedicated to supporting women and families across the Sunshine Coast, providing thoughtful, personalised care through every stage of life. Her practice is a place where people feel supported, safe and genuinely cared for.

A Sunshine Coast local, Dr Shaddock began her medical journey in Brisbane, completing her MBBS at the University of Queensland in 2006, where she undertook specialist training in complex gynaecological surgery, including advanced laparoscopic and hysteroscopic procedures.

Dr Shaddock's professional journey started at Nambour Hospital and she returned to the Sunshine Coast in 2020 to provide exceptional care to the local women as a specialist at Sunshine Coast University Hospital.

Dr Shaddock's experience includes tertiary centres like the Gold Coast and Mater Mothers' Hospitals, as well as regional placements in Toowoomba and Nambour where she supported rural health services.

Dr Shaddock is deeply committed to delivering personalised and respectful care, with a clinical focus that spans:

- › Supportive pregnancy and birth care
- › High-risk pregnancies and multiple births
- › Pelvic pain and endometriosis management
- › Adolescent gynaecology
- › Menopause and midlife transitions
- › Cervical screening and dysplasia

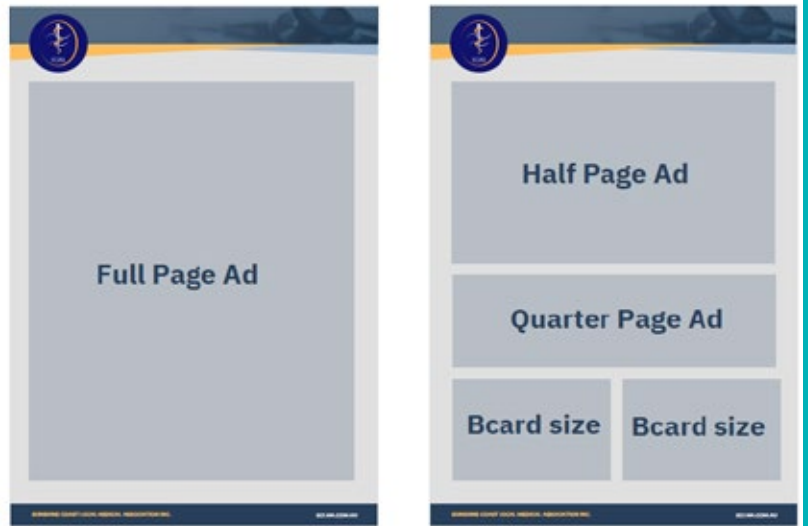
Dr Shaddock believes in empowering her patients through education, informed decision-making, and access to holistic specialist care. Through her practice, Athena O&G, she leads a growing team dedicated to collaborative care - ensuring that women receive the right support at the right time, in a warm and welcoming environment.

If you have any pre- or post-referral queries, Dr Shaddock welcomes your contact using the details listed - she is more than happy to help.



SCLMA Newsletter Advertising Kit 2025

- **Full page ad:** \$500 + GST
210mm x 297mm
- **Half page ad:** \$400 + GST
210mm x 148mm
- **Quarter page ad:** \$200 + GST
30mm x 95mm
- **Business card ad:** \$100 + GST
90mm x 57mm
- **Advertorials:** \$400 + GST



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- - 3 months - 10% discount
- - 6 months - 17% discount
- - 12 months - 30% discount

* Full payment is required prior, to be eligible for offer

CLASSIFIEDS

- All classifieds are subject to the Editor's discretion.
- No charge to current SCLMA members.
- Non-members: \$100.
- Word count no more than 120 words.

- The Sunshine Coast Local Medical Association's Newsletter is a monthly publication.
- All newsletters are uploaded to our website: sclma.com.au and our Facebook page, both attracting strong traffic.
- The newsletter has a printed and electronic distribution to over 1,500 recipients in Sunshine Coast and areas of Qld and NSW, including specialists, GPs, hospital and retired doctors, doctors in training, allied health workers, practice managers, local councillors and politicians.
- The newsletter size varies between 20 and 40 pages. The cut-off date for advertisements and advertorials is the 1st of the month for that month's newsletter. The newsletter is usually distributed on the last week of each month.
- All content has to be approved by the Newsletter Editor.
- Please note that advertising guidelines apply. These are published in each newsletter.
- Contact: Lee-Anne Williams admin@sclma.com.au

DISCLAIMER

- While SCLMA will do all possible to ensure advertising material is reproduced as intended, the responsibility is firmly with the client / advertiser to supply advertising material according to our specifications.

SCLMA 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, e. g. 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.



NEXT SCLMA CLINICAL MEETING FOR 2025

Thursday 30th October 2025

Venue: Maroochydore Surf Club Function Room

Address: 34-36 Alexandra Parade, Maroochydore QLD 4558



November 2025 NEWSLETTER

Content deadline:

Monday 3 November 2025

- Our circulation reaches more than 1,500 recipients!
- We welcome new content - case studies, local news and photos.
- Would you like to comment or suggest articles to be published?
- What would you like to see in the newsletter?
- If you are a new member, please send in a short bio and a photo to introduce yourself.
- Newsletters are posted to our website

Are you a member?

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

Are you listed on the Member Directory on our website?

- Are your details correct?
- Directory form available on the website

sclma.com.au

admin@sclma.com.au



SUNSHINE COAST
**LOCAL MEDICAL
ASSOCIATION**