

NEWSLETTER

NOVEMBER 2025



SUNSHINE COAST
**LOCAL MEDICAL
ASSOCIATION**
SCLMA.COM.AU

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President's Message

Dr Jon Harper

One of the objectives of the Sunshine Coast Local Medical Association is the promotion of medical education in the local community. Through revenue from our membership and advertisers, we are able to offer bursaries to students at the University of the Sunshine Coast (UniSC). Last month I was invited to attend the UniSC Celebration of Philanthropy.

It was great to hear how our own local university is growing in student numbers and range of subjects. I also spoke with students who had received bursaries from a range of different organisations - private, not-for-profit, and governmental. It was heartening to hear how local private businesses have engaged in philanthropy, deciding to give the human capital of the next generation their full attention.

And speaking of attention...many of us would have noticed that, in recent months, adult ADHD has become a common topic in social and medical media. For doctors and patients there is often confusion around diagnosis and frustration from the high demand for psychiatric care. I highly recommend reading the recent MJA article by Bradlow et al (published online on 20th October 2025) for an excellent appraisal of the current issues with diagnosing ADHD and the lack of equitable access to care.

For a diagnosis of ADHD there must be impairment. And this is tricky in adults. In part because there may be complex compensatory strategies, and partly because impairment can be subjective. I recently listened to an interview with a very successful American author and speaker.

They had completed high school, a law degree, founded a successful company, written several books, were in a 30-year marriage and had raised three children. And yet they had recently been diagnosed with adult ADHD and started treatment!

I think we would all like to have a longer concentration span. I was recently watching a period drama set in the mid nineteenth century and noticed how simply they spent their evenings at home. I found it so peaceful watching their activities. Each had a singular focus - writing, embroidery, cleaning, drawing - with no distracting noises or notifications. Well, apart from that urgent telegram with news from London.

Our November meeting includes the Annual General Meeting, with nominations and voting-in of the management committee for next year.

There are no SCLMA newsletters or meetings in December and January, so I would like to wish you all a (very early) merry Christmas! I hope you get some time off to spend with friends and family and recharge the batteries for 2026.

Dr Jon Harper - President
9 November 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.

- **Melanie Qin**
- **Joseph Manahan**
- **Benjamin Doyle**
- **Philip Cumpston**
- **Peter Beeston**
- **Lisa Ups**
- **Phoebe Tronc**
- **Pankaj Jha**
- **Warwick Rivlin**

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.



Patients Suffering Chronic Knee Pain?

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

- ⦿ Chronic knee pain
- ⦿ 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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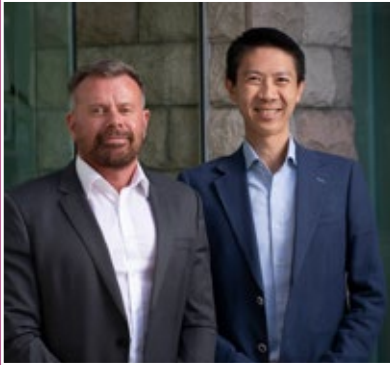
FOREST GLEN

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Forest Glen Q 4556

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

The start of November marked the federal government's changes to bulk billing. AMA Queensland has long advocated for an increase to the Medicare rebate instead to ensure a better deal for all patients when it comes to seeing a GP.

We know many general practices will not be able to sign up to the government's incentive program, because doing so will mean an effective cut in income. GP clinics, like everyone else, are dealing with rising wages, consumables, insurances and other business costs.

The issue of safety on personal mobility devices such as e-bikes and e-scooters has also exploded, workforce and planned surgery waiting lists continue to be hot button issues, while we welcomed a new Chief Health Officer and enjoyed a fantastic Women in Medicine Brisbane breakfast.

Bulk Billing

The federal government is spending \$8 billion on its bulk billing reforms, with Health Minister Mark Butler trumpeting the claim that patients won't need their credit card, just their Medicare card, to see a doctor.

AMA Queensland has passionately advocated against this approach since it was first announced before this year's election. Now November has arrived, and the bulk billing changes are here.

But only around one-fifth of the practices the government wants to sign up for the incentive program have actually done so.

We know this is because hundreds of practices have done the sums and realised they cannot be financially viable if they do so.

We need the scheme to reward primary care that takes time and is not compromised by a financial incentive.

Ultimately, sacrificing time to investigate ongoing or developing medical issues to boost throughput risks patients' health.

That \$8 billion would be better spent increasing baseline Medicare rebates, so that all patients would benefit from reduced primary care costs, and GPs could stay open, viable and able to treat patients with proper attention.

All in all, this is a missed opportunity for real reform.

New Chief Health Officer

The start of October saw the appointment of Dr Marianne Gale to the role of Chief Health Officer, commencing in December. Dr Gale began her career at Townsville Hospital, and we welcome her back to Queensland to put her stamp on public health here.

The appointment provides certainty and direction at a time when misinformation and disinformation about public health is on the rise. We have just come through our worst flu season since before the COVID-19 pandemic, and we look forward to supporting Dr Gale to provide strong leadership and effective public health messaging.

Personal Mobility Devices (e-bikes, e-scooters)

The tragic death of two boys – aged just 8 and 15 – in separate e-bike accidents in late October sparked calls for the Queensland government to immediately ban electric personal mobility devices for under 16s. Our key recommendation to this year's parliamentary inquiry into e-PMDs was to do just that. Simply put, children and younger teens do not have the experience or awareness to be safe on these devices.

Premier David Crisafulli says he won't act until the inquiry's report is handed down in March, but that "change is coming". We know our emergency doctors and surgeons are horrified by some of the injuries they see from accidents involving e-scooters and e-bikes, particularly in children.

We believe the government could step up right now with increased enforcement of existing regulations and an education campaign about safety. With Christmas around the corner, we have been active across the media calling for parents to do their research on the speed and power of e-PMDs, and to hold off purchasing them if they are concerned.



WORKFORCE

As Queensland Health continues to work on its needs-based medical workforce plan, due early next year, the issue of clinician shortages continues to be the key underlying factor in many media stories.

Planned surgery waiting lists were again in the spotlight in October, with an increase in the number of patients waiting longer than recommended for their procedures.

We know our own Workforce Action Plan tackles the main challenges of recruiting and retaining doctors and getting them to where they're needed most across Queensland. We continue to advocate to the government to use those strategies in their own response.



Prescriber Bag

AMA Queensland has been advocating for an improved PBS-funded Prescriber Bag for more than 12 months.

Commonly known as the 'Doctor's Bag', the Prescriber Bag contains medicines that improve access to healthcare for countless Australians, particularly in regional, rural and remote areas without easy access to pharmacies.

We recently welcomed the Pharmaceutical Benefits Advisory Committee recommendation for the inclusion of the antibiotic ceftriaxone, used to treat suspected sepsis.

We're also pleased PBAC plans to review the PBS-funded Prescriber Bag – but we'd like to see a focus change to reduce hospital visits.



Free cancer accommodation for young people

The Patient Travel Subsidy Scheme (PTSS) has been in the news again recently, with Health Minister Tim Nicholls pledging a review of the program.

Doctors know the subsidy has not kept pace with the rising cost of travel and accommodation. We have also advocated for reducing the red tape GPs have to battle through to get the subsidy for their patients.

In the meantime, we profiled a fantastic initiative of the Sony Foundation, which has extended eligibility for its 'You Can Stay' accommodation service for 15- to 29-year-olds, ensuring more rural young people have the support they need during cancer treatment in metropolitan areas.



AMA Queensland Foundation Christmas Appeal

Each year the AMA Queensland Foundation chooses a worthy cause to be the focus of its Christmas fundraising campaign. This year, we hope to bring light to the darker aspects of the holiday season by supporting mental health programs and suicide prevention.

The goal is \$50,000 which will be used to support services that otherwise might not exist. We encourage doctors and our allies to give generously, knowing for someone it may help make a brighter Christmas.

Women in Medicine Brisbane Breakfast

A splash of red and pink greeted 250 guests at our annual Women in Medicine Brisbane breakfast on Thursday 30 October at Victoria Park Golf Club. The theme was 'Accelerate Action for Gender

Equality'; and AMA Queensland Vice-President Dr Emilia Dauway was the keynote speaker. She highlighted some of the trailblazing women of medicine and science whose shared qualities of tenacity, bravery and self-worth drove real change, and discussed moments in her own career where she and other women doctors lifted each other up. We then enjoyed a sparkling panel session moderated by QUT Dean of Medicine and Head of School of Clinical Medicine, Professor Jen Williams, and featuring AMA Queensland Immediate Past President Dr Maria Boulton, Associate Professor Jane Smith and Dr Elizabeth Rushbrook.

Feedback was incredible, and you can see wonderful photos from the event in our [gallery](#).



GP Liaison

Your hospital connection, together we can deliver better healthcare.

Dr Edwin Krays and Dr Michelle Johnston



What's changed in GP Smart Referrals?

Sunshine Coast Health has added front-facing mental health services to GP Smart Referrals (GPSR). It is now possible to refer to mental health via GPSR. Information about the services is detailed in below table and is also displayed in GPSR after selecting one of the mental health services.

We've also updated our Orthopaedics General service to allow for spinal referrals to be accepted.

FACILITY	SERVICE NAME (SPECIALTY)	SERVICE DESCRIPTION
Maroochydore Adult Community MHS (Dalton Drive)	Child and Youth Mental Health Service	Children/adolescents <18 yrs with severe/complex emotional or behavioural disorders, or significant risk (e.g. depression, anxiety, suicidal/self-harm). If urgent or unsure, phone CYMHS (Business Hours: 5202 9500). After Hours: Acute Care Team 1300 642 255 (24/7 Tele-Triage).
	Adult and Acute Mental Health	Service is for adults with severe & complex mental illness. If urgent or crisis, refer to ACT via 1300 642 255 (24/7 Tele-Triage). No public service for adult ADHD.
	Alcohol and Other Drugs	Service is for people experiencing problematic alcohol and/or drug use, including those with co-occurring mental health concerns. If urgent (withdrawal risk, overdose, or crisis), refer via 1300 642 255 (24/7 Tele-Triage). Routine referrals via GP, self, or community providers. Patient suitability assessed individually.
	Older Persons Mental Health Service	Adults >65 years (or >55 years if Aboriginal and Torres Strait Islander) with a first presentation of mental illness or cognitive decline. If urgent or unsure contact the Acute Care Team on 1300 64 22 55 (24/7 Tele-Triage).



FACILITY	SERVICE NAME (SPECIALTY)	SERVICE DESCRIPTION
Maroochydore Adult Community MHS (Dalton Drive) (Cont)	Eating Disorder Clinic /Service	Service is for children, adolescents, and adults with moderate to severe eating disorders or at significant medical/psychiatric risk. GP referral required. If urgent or unsure, contact 1300 642 255 (24/7 Tele-Triage) or present to Emergency Department.
	Perinatal Mental Health Service	The service is for parents experiencing moderate to severe mental illness or at significant risk during the perinatal period, from conception to 12 months post-partum. GP, maternity, or health professional referral accepted. If urgent or crisis, contact 1300 642 255 (24/7 Tele-Triage) or present to Emergency Department.
Nambour Adult Community MHS (Centenary Square)	Cultural Health Service	Provides culturally safe, recovery-focused support for Aboriginal and Torres Strait Islander peoples experiencing mental health challenges. Referrals via Mental Health teams or community services in collaboration with Aboriginal and Torres Strait Islander Health staff. Not a crisis service — urgent concerns should be directed to 1300 642 255 (24/7 Tele-Triage) or Emergency Department.
	Homeless Health Outreach Team	Specialist outreach service for people experiencing homelessness with severe and persistent mental illness. Provides engagement, assessment, and ongoing support in collaboration with housing and community services. Referrals via Adult Mental Health teams or partner agencies. Not a crisis service — urgent concerns should be directed to 1300 642 255 (24/7 Tele-Triage).

Australian bat lyssavirus or rabies potential exposure? Contact Public Health

There are 12 species of lyssavirus, which includes the classical rabies virus and Australian bat lyssavirus (ABLV). In case of exposure, take a history and contact the Sunshine Coast Public Health Unit while the patient is with you via 1300-017-190 (required information and contact details are available on HealthPathways), to discuss post-exposure prophylaxis including Human Rabies Immunoglobulin as required.

For more information visit sunshinecoast.communityhealthpathways.org

GP Liaison



'Request for Advice' eConsult service is improving local connections

GPs can get local advice from public 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):

1. Cardiology General
2. Dermatology
3. General Medicine
4. General Surgery
5. Geriatrics
6. Haematology
7. Hepatology
8. Immunology General
9. Infectious Diseases
10. Neurology
11. Obstetric Medicine
12. Paediatric Medicine
13. Persistent Pain Management
14. Rehabilitation Medicine
15. Respiratory General
16. Rheumatology
17. Urology
18. Wound Management

Request for Advice can be accessed via the GP Smart Referrals icon/button in 'Best Practice' or 'Medical Director'. Please note the 5MB attachment limit has been removed and replaced with a 15MB limit per attachment and a 25MB limit per referral.

Request for Advice (eConsult)



Referral Centre GP Hotline

The Referral Centre GP Hotline is for GPs and Practice Managers to follow up the status of Referrals sent: Ph: 1300 358 225.

Please note that the status of a referrals submitted via GP Smart Referrals (GPSR) can also be viewed at any time by GPs or authorised practice staff in the GPSR dashboard in Best Practice or Medical Director (select 'practice view' to see the status of referrals of all doctors in the practice).

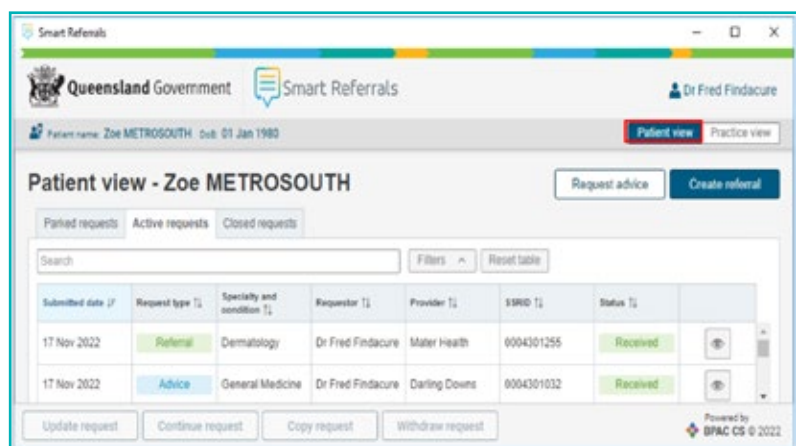


Image above: the GP Smart Referrals dashboard in Best Practice or Medical Director also provides information about the status of a referral ('Received', 'Accepted', 'Declined' etc). Select 'practice view' in the right top corner to review the status of referrals of all doctors in the practice.



HIV in Queensland

In 2024, Queensland recorded 156 new HIV diagnoses, corresponding to a notification rate of 2.9 cases per 100,000 population. This represents a 21% increase compared to the previous five-year average, although the rate remains lower than the pre COVID-19 level observed in 2019.

At the population level, there were estimated 6,240 people living with HIV in Queensland in 2024, 94% (5,847) of whom had received a diagnosis. Of those diagnosed, 96% (5,628) were on treatment. Of those on treatment, 96% (5,392) achieved a suppressed viral load.

Key findings:

- Demographics: 87% of new diagnoses were among males; 85% were aged 20–49 years. First Nations people accounted for 5% of cases, consistent with previous years.
- Geographic distribution: The highest number of cases were reported in Metro North (29%), Metro South (27%), and Gold Coast (13%) Hospital and Health Service (HHS) areas.
- Risk exposure: Male-to-male sex remained the predominant transmission route (63%); heterosexual transmission increased to 35% (up from 15% in 2019).
- Late diagnosis: 35% of new cases were classified as late or advanced diagnoses (CD4+ count).

The increase in new diagnoses, particularly among heterosexual populations and overseasborn individuals, highlights the need for:

- Targeted and culturally tailored strategies to enhance equitable access to PrEP.
- Continued promotion of early testing to reduce late diagnoses.
- Sustained treatment coverage and viral suppression to minimise onward transmissions.

For more information click [here](#)

Antenatal Shared Care GP Education last month

GPs from across the Sunshine Coast attended the recent Antenatal Shared Care GP Education morning at Sunshine Coast Health Institute Auditorium (SCHI) in Birtinya.

Topics included: Genetic carrier screening/ preconception counselling, Endometriosis in Pregnancy, Medications in pregnancy (including GLP-1s, antidepressants), Iron Deficiency and anaemia in pregnancy, Perinatal Infections, Asthma in Pregnancy, Indications for Aspirin in Pregnancy, Common Problems in Pregnancy.



Image above: Presenters Antenatal Shared care education: Dr Michelle Johnston – GP Liaison Officer, Dr Claire Fotheringham – Staff Specialist O&G, Dr Clare Morgan – Staff Specialist O&G, Dr Xin Yu Adeline Foo – Staff Specialist O&G, Dr Rebecca Conroy – GPSI O&G



Syphilis notifications increase

In 2024, infectious syphilis notifications in Queensland increased by 30% when compared with the previous five-year average. Increases in notifications among women of reproductive age (15–44 years) and syphilis in pregnancy were observed in the same period.

- Approximately 50% of people with infectious syphilis will be asymptomatic
- Include syphilis testing as part of standard asymptomatic STI check-up
- Consider testing to exclude secondary syphilis in the presence of rashes on the trunk, palms and soles.
- Specimens: blood for serology (syphilis antibody) and PCR swab of ulcer(s) for NAAT or PCR
- Test ALL pregnant patients three times during pregnancy ([Queensland Syphilis and Pregnancy Guideline](#)):
 - Before 10 weeks
 - 26-28 weeks gestation
 - 36 weeks gestation.

Management of syphilis

- Refer to Australian STI Management Guidelines for use in Primary Care
- The correct first line treatment of infectious syphilis is Benzathine benzylpenicillin (trade name Bicillin L-A).
- Advise no sexual contact for 7 days after treatment is commenced, or until the course is completed and symptoms resolved, whichever is later.
- Clinicians performing syphilis testing are responsible for discussing partner notification, contact tracing and re-infection risk when providing results.
- Review Australasian Contact Tracing Guideline Steps in Contact Tracing

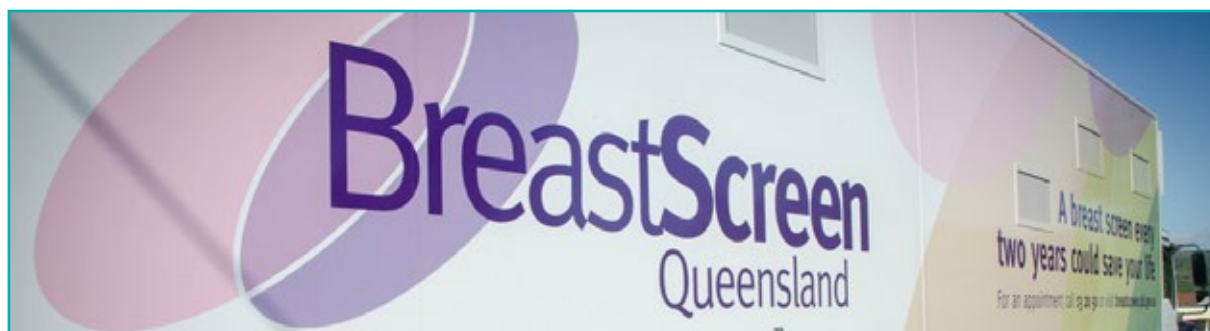
Queensland Syphilis Surveillance Service (QSSS)

Contact QSSS for past serology, treatment histories and advice on management and referral. For more information click [here](#).

BreastScreen Maroochydore relocated

BreastScreen Maroochydore Service has relocated to 100 Sixth Avenue Maroochydore. The Service is open Monday to Friday and some Saturdays, with early and late appointments available each week.

BreastScreen Queensland offers a free breast screening and follow up assessment service to asymptomatic women aged 40 and over. Breast screening is most effective for women aged 50 to 74. Appointments can be made by calling 13 20 50 or visiting the BreastScreen website.





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

Monthly update

Dear members,

It's been a pleasure to receive lots of positive feedback after our recent We've Got You Covered education conference, with many sharing the event was high-quality, informative, relevant, and valuable. Thank you once again to all those who attended - it was great to see you there! As we quickly approach the festive season, activity isn't slowing down at Buderim Private Hospital. Here are some of the latest updates from across the hospital:

Welcome Dr Navi Bali – Orthopaedic surgeon

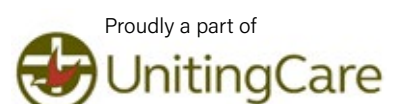
Please join us in welcoming [Dr Navi Bali](#) to Buderim Private Hospital (pictured right at We've Got You Covered). Dr Bali is an experienced orthopaedic surgeon with special interests in robotic minimally invasive hip replacement, robotic total and partial knee replacement, 3D modelled ankle replacement and sports injuries. Navi and his family have now settled on the Sunshine Coast, and he looks forward to building relationships with colleagues and patients alike. Visit [Dr Bali's profile](#) for more information.



Dr George Bogiatzis to focus on gynaecology and fertility from 2026

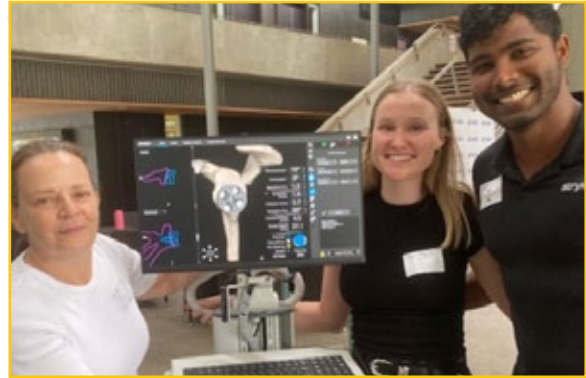
After nearly 25 years of caring for women through pregnancy and childbirth and nearly 9,000 births, [Dr George Bogiatzis](#) has made the decision to focus exclusively on gynaecology and fertility from January 2026. This focused approach will allow him to offer shorter wait times whilst maintaining the highest level of care.

If you have any questions about what this change means for patients, please contact 07 5444 6400.



Transcranial Magnetic Stimulation: A new treatment option for resistant depression

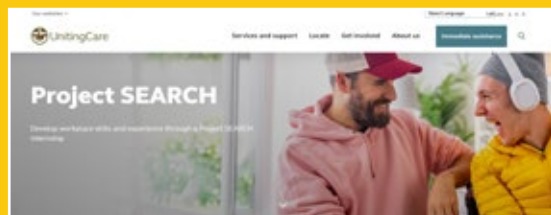
Our [Cooinda Mental Health Service](#) has recently commenced offering Transcranial Magnetic Stimulation, a new non-invasive treatment option for resistant depression. The treatment uses magnetic fields to stimulate nerve cells in the brain. For more information, please contact our team at Cooinda on 1300 780 413.



Welcoming new interns now!

Congratulations to our first cohort of Project SEARCH interns who graduated from the program recently, all with employment secured! Project SEARCH is an immersive work-based internship program that allows young people to expand their experience while increasing their confidence in a supportive environment – and it's something we're incredibly proud to offer for our community.

Please visit the [Project SEARCH](#) website for more information about the program or share this great opportunity with someone who may be interested.



Injured shoulder and knee clinic every Tuesday

Make the right call...on a Monday for a guaranteed review on Tuesday with an experienced professional

Dr Bernard Tamba-Lebbie

Orthopaedic Surgeon

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FAX: 07 5315 5495

Email: sunshinecoastshoulders@gmail.com



Sunshine Coast
ORTHOPAEDIC CARE



Amanda Gilmour
Acc. Spec. (Pers. Inj.)
Qld, Special Counsel

Involved in a car or motorbike accident? What's next?

When your patient is involved in a car or motorbike accident, it can be quite overwhelming and unnerving. Here are some useful insights and practical steps for your patients and their initial care providers:

Injuries and treatment

If a patient experiences any injuries, pain or symptoms following an accident, they should seek medical treatment as soon as reasonably practical. It is important to ensure that any injuries and symptoms are properly documented, and any treatment is undertaken in a timely manner.

Rehabilitation

Promptly referring patients to allied health services such as physiotherapy or psychology can enable them to focus on their recovery. Patients have the right to choose their own suitably qualified rehabilitation providers so if your patient or you are experiencing any difficulties with a CTP insurer regarding the choice or selection of a provider, it is important to be aware that the insurer's role is to facilitate the rehabilitation process, not to influence or dictate the process.

The Motor Accident Insurance Commission has published Rehabilitation Standards for CTP insurers which set out the insurer's obligations in this space.

Treatment Notes

As a medical practitioner assisting an injured person, it is imperative that the clinician's notes are a true and accurate record of the consultation and that all injuries and symptoms the patient is reporting are recorded in the patient notes. This seems obvious but it's particularly important when dealing with insurers.

The patient's medical records form an important part of the evidence in these cases and they can be critical in ensuring all injuries are linked

to an accident, that the patient receives the rehabilitation they require and that they are fully compensated for their injuries.

Lodging a claim

It is important to know that there are strict time limits in Queensland for a person to make a compensation claim for injuries sustained in an accident. If those time limits are missed, a person may lose their rights to pursue a claim.

If a patient is injured in a car accident due to the fault of someone else, they may be entitled to lodge a compensation claim which would enable them to recover:

- reimbursement of any reasonable medical and treatment expenses which have been incurred;
- rehabilitation funded by the CTP insurer;
- compensation for pain and suffering;
- loss of wages since the accident and in the future if the injuries have an impact on their capacity to work;
- care and assistance; and
- future medical and rehabilitation expenses.

Importantly, if there's a need for rehabilitation, lodging a claim early can ensure there is funding available so patients can access treatment without financial distress. If you see a patient who has been involved in a car accident and needs rehabilitation, they will need to lodge their CTP claim with a specific CTP Medical Certificate and any referrals for treatment so that the insurer can provide the funding.

Legal advice from a personal injuries lawyer should be obtained to understand their rights and ensure any entitlements are pursued and protected. For more complex claims, a QLS Accredited Specialist has a high level of knowledge and expertise in their area of law. Most law firms offer initial free, no-obligation advice.



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.



Dr. Debra Furniss
Radiation Oncologist & Medical Director

Consults at: Noosa, Gympie, Caboolture
Clinical interests in breast, GI, bone, brain, spine, lung and skin cancers, haematological malignancies, palliative radiotherapy and treatment for benign conditions



Dr Michelle Morris
Medical Oncologist

Consults at: Noosa, Gympie, Birtinya
Experienced in managing a wide range of solid tumour malignancies with clinical interests in breast cancer, melanoma, genealogical and urological malignancies



Dr Harry Gasper
Medical Oncologist

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



Mr James Chapman
Nurse Practitioner/Lymphoedema

Consults at: Noosa
Accredited and experienced in the assessment of lymphoedema and lipoedema and offers affordable and patient centric treatment options

Cancer Care Noosa provides:

- 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



Cancer Care Noosa
36-40 Hofmann Drive
Noosaville QLD 4566



07 5293 7200



admin@cancercarenoosa.com.au



National Lung Cancer Screening Program

Lung cancer is Australia's leading cause of cancer death, taking over 8,500 lives per year with most cases diagnosed too late for curative treatment.

The National Lung Cancer Screening Program (NLCSP) is a major public health advancement, focusing on **early detection of lung cancer using low-dose CT scans**, with the goal of reducing mortality and supporting high-risk populations.

GPs are central to the success of this program.

Screening Eligibility

To qualify, patients must:

- ✓ Be aged between **50 and 70 years**
- ✓ **Be asymptomatic** with no sign of lung cancer
- ✓ Have a history of tobacco cigarette smoking of at least **30 pack-years**
- ✓ Be a current smoker, or have quit smoking within the last 10 years.

Screening Pathway

- **Referral** GP refers patient for initial Low Dose Chest CT (LDCT). One MBS item covers initial and 2-yearly scans; another covers interim LDCTs if follow-up is needed.
- **Imaging** Patients book a low-dose CT chest scan via the Sunshine Coast Radiology website. Their scan will be bulk-billed.
- **Results** We will provide GPs with a structured radiologist report (Standardised Volumetric Doubling Time (VDT) monitoring is used). Initial scan will be reported using PANCAN and subsequent scans using the recommended Nodule Management Protocol.
- **Follow up** The National Cancer Screening Register will not hold scan images, but will provide patients with reminders. Consistent use of the same radiology provider is good practice to ensure accurate and comparable data over time.

Excellence in Diagnostics

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Collaborative Expertise

Sunshine Coast Radiology is **partnering with Chest Scan** to support the program and provide **fast and easy access** to low dose CT scans for eligible patients, **at no cost**.

Chest Scan combines all of Integral Diagnostics' (IDX) **expert radiologists, resources, and technology**.

This collaboration enhances **accuracy, efficiency, and patient care**, ensuring **timely and reliable results**.

Our Difference

Sunshine Coast Radiology are at the **forefront of nodule identification** utilising AI for **specialised reporting**.

We are also able to offer **PET-CT for patients diagnosed with malignant nodules**.

All patient images are kept on a central database, easily accessible for **comparative analysis** by our **oncologic sub-specialised radiologists**.



SUNSHINE COAST
RADIOLOGY



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.

Delivering outreach primary care in non-traditional medical spaces: The VacSeen Project

Elliot Hunt MD4 and Gianni Bergamin MD2

The Sunshine Coast division of The VacSeen Project is a locally led initiative providing accessible, non-judgemental, healthcare free-of-charge to people experiencing homelessness and disadvantage within our community.

Over two fortnightly clinics (Wednesday evening at St. Peter's Church and Thursday evening at Maroochydore Neighbourhood Centre), nearly 100 patients have been seen to date in 2025, reflecting the ongoing need for equitable, low-barrier healthcare in the region.

The service provides essential primary care including wound management, medication refills, treatment of minor infections, chronic disease reviews, musculoskeletal and gastrointestinal presentations, and general health counselling.

The clinics are run by our amazing volunteer GP Dr Rob Ingham and ED Advanced Trainee Dr Brooke Pollock, who oversee a team of passionate, volunteer, senior medical students. They are hosted in partnership with community organisations providing meals, laundry, and other services.

Initially conceived in 2021 as a medical student-driven effort to deliver influenza vaccinations to vulnerable groups not subsidised by the National Immunisation Program, The VacSeen Project has evolved into a broader outreach service, hosting primary and preventative care clinics in non-traditional medical settings in Brisbane, Toowoomba, Gold Coast, Bundaberg, Cairns, and Townsville, as well as the Sunshine Coast.

Clinicians interested in contributing their time or expertise are invited to contact the team at sunnycoastoperations@vacseen.org.au



A new treatment for Osteoarthritis

- ✗ No surgery
- ✗ No hospital stays
- ✓ Just 6 sessions¹ over 2 weeks
- ✓ 80-90%² of the cost is covered by Medicare



Did you know that Low Dose Radiation Therapy is an option for the management of osteoarthritis?

To discuss patient suitability, referral pathways, or to learn more about current clinical practice and outcomes, contact:

Noosa: (07) 5377 2200 | Buderim: (07) 5374 8100

Disclaimers: 1. Evidence suggests that some patients may need a second or third course
2. Depending on the individual's position within Medicare Safety Nets for Medicare eligible patients

Could Low Dose Radiation Therapy (LDRT) help your osteoarthritis patients?

As GPs, you often see patients living with chronic osteoarthritis pain who are no longer experiencing pain relief from conservative therapy, but for whom surgery is not yet indicated.¹ Low-dose radiotherapy (LDRT) has emerged as a non-invasive alternative for pain relief and functional improvement, particularly in patients unresponsive to conservative measures.¹

LDRT uses carefully controlled, low doses of radiation to help reduce inflammation in affected joints. It has been used in Europe for decades and is now emerging as a treatment option in Australia for selected patients with osteoarthritis.¹

What can your patients expect?

- Symptom relief: Some patients may experience a reduction in pain and improved mobility following treatment.²⁻⁴
- Minimal acute side-effects: LDRT has been shown to have very minimal acute side effects¹⁻⁴

Patient suitability

- Age ≥50 years
- Confirmed diagnosis of osteoarthritis (Kellgren-Laurence (KL) scores 1-3)
- Upper and Lower limbs (no axial spine)
- Failure of conservative therapy >3/12
- Contraindications; pregnancy, rheumatoid arthritis, active connective tissue disease

Treatment

A treatment course is typically six sessions over two weeks. Depending on outcomes, patients may require a second or third course of treatment.

Osteoarthritis affects around 8.3% of the Australian population⁵ (2022 data)



Dr Bradley Wong
MBBS, FRANZCR
Radiation Oncologist



GenesisCare, Buderim
10 King Street
Buderim QLD 4556
Tel: (07) 5374 8100

GenesisCare, Noosa
Noosa Medical and Professional Centre
90 Goodchap Street, Noosaville, QLD 4566
Tel: (07) 5377 2200

 **GenesisCare**
Experts in cancer care

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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Jamieson Spaulding
Senior Occupational Therapist
Team Rehab Solutions

What Occupational Therapy really means

What does an Occupational Therapist do?

It's a question I hear often. The simple answer is that it's all about helping people do the things that matter most to them, their everyday "occupations." That can mean almost anything, from getting dressed in the morning to returning to gardening after an injury, or finding new ways to stay connected with family and community.

As Occupational Therapists (OTs), we look at the whole person, not just their diagnosis. Our goal is to help people of all ages stay independent, safe, and able to live life on their own terms.

That might involve suggesting home modifications, recommending helpful equipment, or providing therapy to rebuild skills and confidence – the stuff that really matters!

Here on the Sunshine Coast, our OT team at Team Rehab Solutions supports people in their homes and local community spaces, where care makes the biggest difference. We keep our approach local, personal, and centred around each person's goals. Whether it's assisting someone after a hospital stay, helping a young person with sensory needs, or guiding an older adult to remain safely at home, we always focus on meaningful outcomes rather than ticking boxes.

Our team of ten OTs works closely with other allied health professionals to deliver specialist care through the NDIS, Home Care Packages, Department of Veterans' Affairs, and Support at Home programs.

I feel so grateful to do this work, to meet incredible people, hear their stories, and help them live the life they want. That is what Occupational Therapy is all about.




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Team Rehab Solutions provides quality in-home care across Southeast Queensland.

Our In-Home Services

✓ Physiotherapy	✓ Exercise Physiology	✓ Remedial Massage
✓ Podiatry	✓ Speech Pathology	✓ Women's Health
✓ Dietetics	✓ Occupational Therapy	✓ Allied Health Assistants

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.

Enquire Today



CONTACT US



☎ 1300 685 046

✉ northcoast@teamrehabolutions.com.au



Ramsay Health Care on the Sunshine Coast



Strengthening healthcare across the Sunshine Coast

with *Michael Lewczuk, CEO*

We are proud to deliver high-quality, patient-centred care across our Sunshine Coast network. Our hospitals—Sunshine Coast University Private Hospital (SCUPH), Noosa Hospital, Nambour Selangor Private Hospital, and Caloundra Private Day Hospital and Ramsay Clinic Caloundra—are united in providing seamless access to emergency, surgical, medical, mental health, and rehabilitation services. Together, we continue to grow in capability, innovation, and community impact.



What's new for your patients

Clinical Trials at SCUPH

SCUPH is leading clinical research on the Sunshine Coast, with trials underway in oncology and rheumatology. These include early-phase and first-in-human studies, supported by Ramsay's national research network.

GPs seeking more information or wishing to refer patients to clinical trials can contact ClinicalTrials.SCU@ramsayhealth.com.au for current opportunities and eligibility criteria.

Emergency and Specialist Services

- Noosa Hospital: 24/7 Emergency Department
- Mohs Surgery: Now available at Noosa and Nambour Selangor (led by specialist dermatologist Dr Jazlyn Read and team of oculoplastic surgeons, Dr Ebony Smith, Dr Sergio Sara, and Dr Scott Teske)
- Caloundra Private Day Hospital: Expanded ophthalmology and endoscopy services (CTA)

Mental Health Support

Ramsay Clinic Caloundra offers inpatient and day programs for anxiety, depression, addiction, and more.

Referrals:

Phone: 07 5492 0277

Email: Intake.CLP@ramsayhealth.com.au

Medical Objects: 0055810Y

Integrated Cancer Care

Our hospitals provide comprehensive oncology services, supported by advanced technologies and clinical trials. New specialists include Dr Harry Gasper and Dr Manjunath Narayana.

Services snapshot

Hospital	Key Services
Caloundra Private	Ophthalmology, endoscopy, mental health (Ramsay Clinic Caloundra)
Nambour Selangor	Mohs surgery, rehabilitation, nephrology, ophthalmology, oncology, endoscopy
Noosa Hospital	24/7 Emergency, Mohs surgery, orthopaedics, plastic surgery, endoscopy
SCUPH	Clinical trials, oncology, neurosurgery, urology, plastic surgery

GP Liaison contact

For referrals, clinical trial information, or to arrange CPD education sessions:

Meah Whelan, GP Liaison – Caloundra, Nambour, Noosa, SCUPH

Phone: 0427 199 202

Email: whelanm@ramsayhealth.com.au



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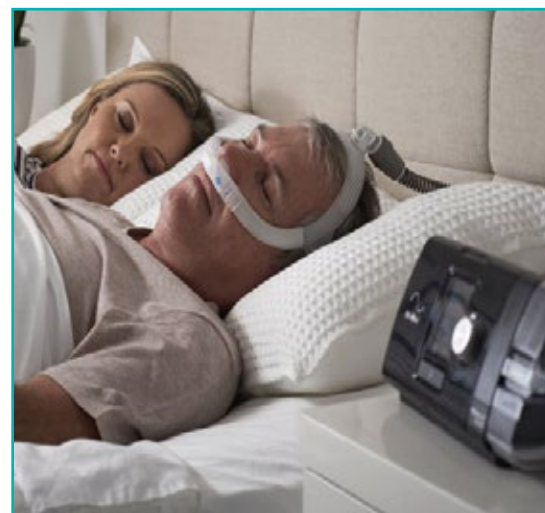
mySleep® opened their first Sunshine Coast clinic last year in Warana. For more than two decades, mySleep® has supported thousands of patients in the diagnosis and treatment of Sleep Apnea. As one of Australia's longest established providers of home-based sleep testing and CPAP therapy, we are proud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

NOW RECRUITING

EMBRACE Clinical Trial at Thompson Brain and Mind Healthcare

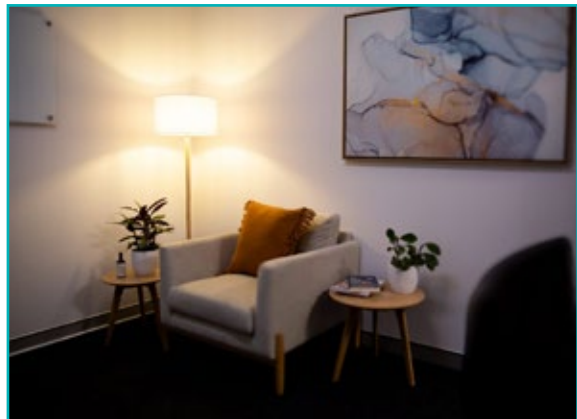
Thompson Brain and Mind Healthcare is the only site in Queensland participating in the global EMBRACE Clinical Trial, one of 67 sites worldwide advancing research into new treatments for Major Depressive Disorder (MDD).

This is an Efficacy and Safety, Phase III, Multi-centre, Double-Blind, Randomised Controlled Study comparing two active doses of CYB003 — a psychedelic-like investigational compound — and placebo in eligible participants with MDD.

The trial integrates CYB003 with structured psychological support using the EMBARK model, enrolling participants who remain on a stable dose of antidepressant medication and have not previously trialed more than two different antidepressants.

It includes two supervised dosing sessions conducted in-clinic, supported by comprehensive therapeutic care, and spans approximately 4.5 months through a combination of in-person and remote visits.

Healthcare professionals are invited to refer eligible patients or learn more about the study by visiting brainandmindhub.org.au





Brain & Mind Hub
Sunshine Coast
Neuroscience for better mental health

07 5220 8790

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brainandmindhub.org.au

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tbmh.org.au



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.



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admin@mbop.com.au

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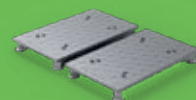
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Dr Russell BOURNE

MBBS, FRACS (Ortho)

Orthopaedic Surgeon

ABN 66 527 615 330

Ph. • (07) 5444 0355

Suite 11
The Sunshine Coast Private
Fax: (07) 5444 0338 Hospital Medical Centre
Elsa Wilson Drive
Buderim Q 4556

21 October 2025

Dear Colleague,

Despite recurrent rumours in the community that I have retired, I have not done so as yet. However, I have given due consideration to the changes that have been occurring with management of patients particularly with arthritis of the hip involving appropriate approaches and post-surgery mobilisation and activity. I do not feel that I am meeting my patient's expectations even though the outcomes of my techniques are extremely reliable.

Therefore, I will not be taking on any new patients with hip arthritis from January 2026. However, I will still provide a service for patients with knee issues particular arthritis and I am very confident that I am well trained and practiced on using all techniques of Knee Replacement Surgery. This includes the standard intramedullary mechanical techniques, patient specific instrumentation and navigation/robotics surgery. I will continue to perform Knee Arthroscopy Surgery as appropriate. I will continue to follow my previous patients even with new conditions if appropriate.

I am available if at any point to discuss issues or queries you may have and I hope to continue to provide a patient centred approach.



Dr Russell Bourne
ORTHOPAEDIC SURGEON



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

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- Cervical and lumbar degenerative conditions
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- Spine tumours
- Pituitary tumours
- Chiari malformations
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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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- Specialised Allied Health team
- McGrath Breast Care Nurse
- Partnering with University of the Sunshine Coast to offer international 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 Katie Trusewicz
Psychologist
B.A. (Psych.), Postgrad. Dip. App.
Psych., D. Hlth Psych., MAAPi



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



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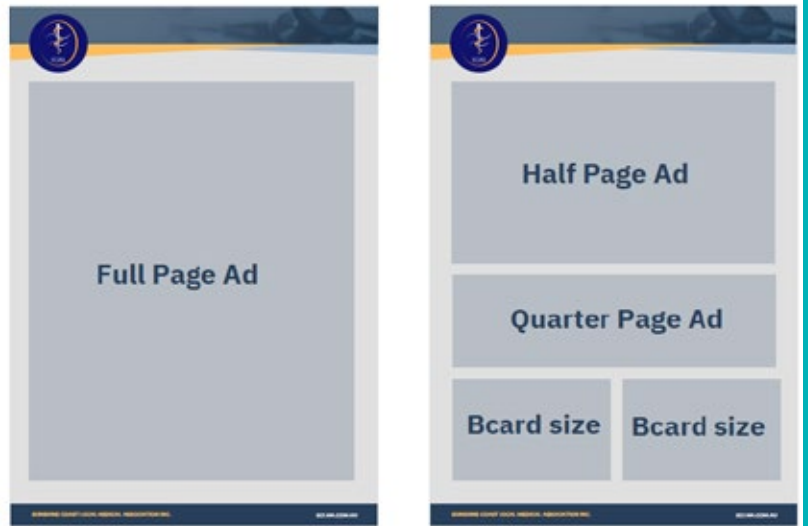
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- All classifieds are subject to the Editor's discretion.
- No charge to current SCLMA members.
- Non-members: \$100.
- Word count no more than 120 words.

- 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 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

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- 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.



Pulse Oceanside 604 , furnished three consulting rooms with kitchenette, reception desk and waiting area is available for short term and long term lease .

Suitable for private practicing doctor working at SCUH or SCUPH. Two car parking on site available .

Contact: 0419953466 .

Email Deepikabhat2003@yahoo.com



From Dr Wayne Herdy

I note with considerable concern the headlines in today's Courier Mail which state that Queensland is going to become the first state in Australia to allow GPs to diagnose and treat ADHD.

This implies that there are large numbers of adult ADHD patients in the community undiagnosed and untreated due to lack of resources. This seems very unlikely.

Looking through the eyes of an addiction practitioner, I have seen many patients who are addicted to amphetamines, who claim to be using the amphetamines illegally to self-treat ADHD which is self-diagnosed and not supported by any symptoms that they can describe to me.

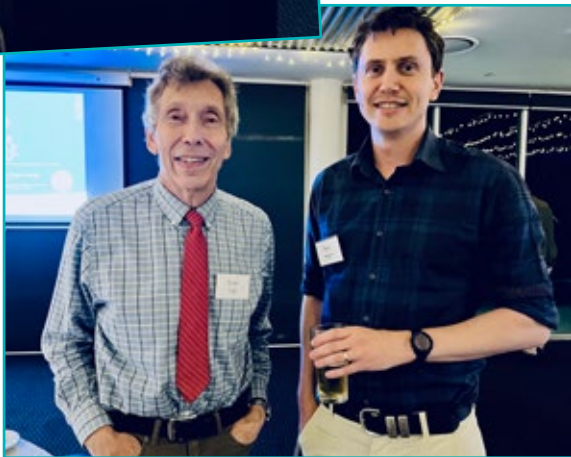
I can foresee that is likely that many patients claiming to have undiagnosed ADHD will doctor-shop until they find a practitioner prepared to make the diagnosis for them and to initiate Amphetamine- like substances as legal treatment for their supposed ADHD. And at the expense of the (Commonwealth-funded) public purse.

Reflecting on the experience of medical marijuana prescribing in Australia, I can also see it is very likely that whole industries will emerge, based on doctors diagnosing ADHD, possibly only in telephone consultations and charging a substantial private fee, resulting in patients being supplied with unending quantities of the ADHD medications, in lieu of their formerly illicit sources of amphetamines, and at public expense.

This decision by the Queensland government is to be deplored. It is based in very little factual information and is pandering to public demand in the same way as the as we have seen medical marijuana formally adopted in Australia to appease public demand for patients who eventually just sought to have a legal source of what they had previously been using illegally.

This ill-conceived decision by the Queensland government should be aggressively resisted by the medical profession in all respects.

Dr Wayne Herdy



Photos: Clinical Meeting with Drs Leith Barney and Christina Sander, 30 October 2025

NEXT SCLMA CLINICAL MEETING AND 27TH ANNUAL GENERAL MEETING FOR 2025

Thursday 27th November 2025

Venue: Maroochydore Surf Club Function Room

Address: 34-36 Alexandra Parade, Maroochydore QLD 4558

February 2026 NEWSLETTER

Content deadline:

Monday 2 February 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



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