

FREE TO TAKE HOME!

FEBRUARY - MARCH 2020 EDITION



Domestic Abuse



Childhood infections



Healthy food choices



Preventing Falls

YOUR NEXT APPOINTMENT:

ENJOY THIS FREE NEWSLETTER

Please remember that decisions about medical care should be made in consultation with your health care provider so discuss with your doctor before acting on any of the information.
www.healthnews.net.au

● PRACTICE DOCTORS

Dr A Srinivasa

Minor Surgical Procedures, Emergency Medicine, Mental Health, Musculo Skeletal Medicine

Dr Christopher Dias

Available: Monday – Friday

Dr Priya Srinivasa

Available: Monday – Friday

Dr Javier Campuzano

Available: Monday - Friday

Dr Casey Hancox

Available: Monday, Tuesday & Friday

Dr Andrew McAlister

Available Monday, Wednesday & Friday
8.00am - 5.00pm
Thursday - 8.00 - 12 noon

Dr Ruwan Wijemunige

Available Monday, Tuesday & Friday

● PRACTICE STAFF

PRACTICE NURSES:

Erika & Leah

RECEPTION:

Christine, Belinda, Tina & Vanessa

● SURGERY HOURS

Monday to Friday

8.00am – 6.30pm

Saturday

8.00am – 12.00pm

● AFTER HOURS

Home Doctor Service

137 425 – 13 SICK

Weeknights, Weekends & Public Holidays.

Please remember to telephone **000** for immediate attention in the event of an emergency.

● BILLING ARRANGEMENTS

Eligible patients will be Medicare Bulk Billed Monday to Saturday.

Standard Consult with out Medicare Card: \$55.00"

Long Consult without Medicare Card: \$85.00

Workcover & Company's billed directly with Prior Approval.

▷ *Please see the Rear Cover for more practice information.*

● APPOINTMENTS

Consultation is usually by appointment. Urgent cases will be seen on the same day. Patients may have to wait to see the doctor as some consultations can take longer than anticipated. Patients are encouraged to inform the receptionist if they need longer consultations. Patients are seen according to their appointment schedule. However, some patients may have to be seen urgently even though they may not have appointments. Practice follows triage system similar to emergency department in urgent cases.

Home Visits. By prior arrangement only. Patients are encouraged to attend surgery whenever possible.

Calling your doctor. Nursing sister will triage the phone conversations if it is an emergency, the concerned doctor will talk to the patient, otherwise a message will be taken and handed to the doctor. Doctor will then contact the patient at the convenient time.

● ANCILLARY SERVICES

Credential Diabetes Educator. Peta Tauchmann – Insulin Pump Specialist.

Dietician/Nutritionist. Jean-Mari Mouton

Pharmacy. Chemist Warehouse is located in an adjacent building to the Medical Centre. It is open 7 days a week. Phone No: 5549 3822

Physiotherapist. Qualified Physiotherapists are practising at 1/29 Blanck Street, Ormeau. "Ormeau Physio" Phone No: 5547 5666

Podiatrist. Iskren Petrov

Social Worker. Raymond Ho – Family Therapist

Pathology. Queensland Medical Laboratory provides our Pathology Services. They have collection rooms in our shopping centre. This service is available to all members of the public. Phone No: 5549 2011.

Radiology. There is no onsite Radiology service as present. The Practice uses mainly QLD X-ray at Beenleigh.

● SPECIAL PRACTICE NOTES

Email Communication with the Practice: We discourage emails being forwarded directly to our doctors. Email contact can be made through our Reception Staff at reception@ormeaumedicalcentre.com.au

Interpreter Service: Should you require the service of an interpreter during a consultation with your Doctor, please tell reception when making your appointment for you or your family member, or call 1300 131 450 for telephone translator service.

Phone Requests for Prescriptions. Practice encourages patients to make appointments for repeat prescriptions, except in certain circumstances it discourages the phone request for prescriptions. When given, a small charge will apply.

National/State or Territory reminder systems/registers. We wish to advise that the Ormeau Medical Centre participates in the national/state or territory reminder systems/registers (subject to informed patient consent.)

Test Results. Results are reviewed by the doctors and acted on in a timely manner, with your health in mind. If there is any abnormality and need for further management, your doctor will either contact you or ask you to make an appointment for further discussion.





Domestic Abuse

Domestic assaults can take many forms including physical violence, sexual abuse, emotional abuse, intimidation, economic deprivation or threats of violence. Abusing men tend to hold rigid views of male-female roles. They believe that men have the right to dominate and control relationships. Whilst slowly changing, society has tended to reinforce the view that “real men” show strength and aggression.

A high percentage of abusers come from homes where they saw or were victims of physical, sexual or other abuse themselves. Hence breaking the cycle of domestic violence between generations is very important. Attitudes can get passed down with men from such backgrounds being six times more likely to offend.

Sadly, many women still feel trapped in violent relationships. They stay there, silent, for different reasons— financial insecurity, to keep a roof over their children’s head, a hope they can change their man for the better and fear of reprisal and lack of support.

Community awareness programs

have helped bring the topic into the open whereas previously it was hidden. It is important for anyone in violent relationships to seek help. Once domestic violence is in the open, effective policing with priority response is available. Anger management programs can be offered to offenders (even by courts, as an alternative to jail).

For these programs to work there must be desire to change. This starts with the perpetrator accepting responsibility for their actions.

The domestic violence helpline number is 1800RESPECT (1800 737 732).

 <https://www.1800respect.org.au/>



Childhood infections – minimising the spread

Viruses are spread by airborne droplets and are around us 365 days of the year, although more people get unwell with them in winter. There are various theories around this including less sunshine and spending more time indoors. Air conditioning whilst making our lives more pleasant is also good for spreading viruses.

Teach your child to cover their mouth when coughing as this makes a big difference as does sneezing into a hanky or tissue. Get them to wash their hands. If your child is unwell then keep them home. This not only helps them get better quicker it makes it less likely they pass it on to others. Ensure that your child is fully vaccinated.

There are no force fields but many ways you can make it less likely your child will catch a virus. Regular physical activity has been shown to strengthen the immune system but it is wise to cease or at least reduce exercise while unwell. Eating a healthy diet with adequate fruits and vegetables and getting enough sleep also helps.



Melanomas

Australia continues to have the highest rates of melanoma in the world. That does not mean that every spot on the skin is cancerous or potentially cancerous though. Melanomas are in fact the least common form of skin cancer but the most life threatening. The Melanoma institute estimates 15,229 cases in 2019 and some 1726 deaths.

There are certain characteristics, which point to a spot on the skin being a melanoma but none are absolute. An asymmetrical lesion, with an uneven border and multiple colours would be a textbook melanoma. Another pointer is changes over a short period of time like a few weeks.

On the flip side a spot of any colour, which has been present for five years without changing at all, is normally going to be quite harmless.

With digital technology it is possible for moles to be photographed and comparisons made after a few months to see if there is change. When there is

enough suspicion then the mole may be biopsied and analysed in the lab to get an exact diagnosis. Once again not every spot will need this.

An annual skin check with your doctor is a good idea and check any new or changing spots which are of concern with your doctor. New does not always equal cancer though-which is a good thing. The best way to avoid getting skin cancer is to take care in the sun. The message of slip, slop, slap is not new but remains valid. Over summer there is no reason not to enjoy an outdoor lifestyle but remember to look after your skin.

Healthy food choices for school-aged children

Some one in four Australian children are overweight or obese. There are two main drivers of this. Firstly, is the tendency for children to snack on high calorie foods and drinks. Second is the replacement of physical activity with time on computer or other electronic devices. We can't turn back time, but it is not all bad news. There is much you can do as a parent or guardian to help a child who is battling with weight.

Back to school means thinking about lunch boxes. It is fine to have a sweet treat in the lunch box occasionally but there are many healthy options for snacks too. Sticks of carrot or celery can be a great snack to eat on the run and fruit in season is a great option too. Be careful with snack bars and by reading the labels you can select those with natural ingredients, whole grains and less sugar. Read the labels on cracker biscuits too. Some are high in fats and sugar, whilst others (like rice

crackers) are not. A mix of seeds nuts (watch for allergies) and dried fruit is another simple snack as are cheese sticks or popcorn.

Substitute water for sweet drinks. Eliminating liquid calories can cut down calorie intake without leaving a child hungry. Have soft drinks only on special occasions or no more than once a week. Rather than fruit juice, give your child a piece of fruit and a glass of water. This gives them more fibre and fewer calories.



Urinary incontinence

Bladder incontinence is the uncontrolled, unexpected or unwanted passage of urine. There are two forms. Stress incontinence is when the bladder is 'squeezed' by outside pressure (e.g. Coughing). Urge incontinence is when the bladder has a sudden urge of its own to empty itself. Many women suffer a combination of the two.

Medical problems, which predispose to incontinence include diabetes, prolapse, some neurological disorders, bladder infections or side effects from some medications. Most often the problem is weakness of the pelvic floor muscles or the sphincter that closes off the opening of the bladder (urethra). This can be made worse by childbirth trauma, ageing and menopause. Emotional stress, constipation or weight gain can also worsen things.

Many women put up with this needlessly. The good news is that majority of women can achieve a cure or at least significant improvement with fairly simple measures. The first step is talking to your GP. There is no need to be embarrassed.

Symptoms, which should lead you to your GP, include passing urine more than six to eight times a day, getting up most nights to pass urine, pain or burning when urinating, needing to dash urgently when feeling the need to pass urine or having wet pants.

A physical exam and various tests may be needed including 'urodynamic studies' to measure pressure and function in and around the bladder.

The cornerstone of treatment is pelvic or bladder exercises aimed at strengthening muscles or retraining the bladder. A specialist physio can be helpful. Some women may need surgery.



Preventing Falls in the Elderly

Falls can be serious health issue in older people. It is estimated that one third of those over 65 fall each year. Fortunately, most are not injured. However, there is the risk of fracturing (breaking) the hip which is greater in those with thin bones (osteoporosis). A fractured hip is a medical emergency that requires major surgery and can impact life expectancy.

Much can be done to reduce the risk of falls. Family and friends can help to lessen dangers for an elderly friend or relative.

When people are on multiple medications the risk of side effects or mistakes with doses increases. Check with your GP if treatment is still needed and doses are correct. Get eyesight checked and corrected, where possible. Problems such as cataracts, glaucoma or degeneration of the retina can slowly worsen vision in a way that is easily missed, making falling more likely. Unsteadiness on the feet can be due to medical problems of balance or low blood pressure – ask the doctor to check.

Lack of exercise may lead to weakness of leg muscles and poor coordination – a light exercise program can make a huge difference. Equally fixing simple problems like bunions or flat feet can prevent tripping.

Around the home, check and remedy any hazards likely to lead to a fall. This includes slippery floors, uneven walking surfaces, poor lighting, or cluttered living areas. It may be useful to have handrails installed into the bathroom or toilet. Talk to your doctor about having a home risk assessment done (usually under the ACAT scheme).

Ormeau Medical Centre

● OTHER PRACTICE SERVICES

- Antenatal Planning & Management
- Child Development Assessments
- Dietician Screening
- Drug Screening
- Derm Doc – Mole Scan
- Electrocardiography
- GP Mental Health Plan
- Health Care Assessments
- 45 Year Old Health checks
- Immunisations: Corporate, Travel, Children
- Medical Examinations – Corporate & Private
- Healthy Kids Check – 4 years
- Pap Smears
- Workcover
- Audiogram
- Chronic Disease Management

● SPECIAL PRACTICE NOTES

Privacy & Confidentiality.

Practice follows the privacy and confidentiality procedures as recommended by RACGP. All the staff have to sign to abide by this in their contract. Results and information is not released to a third party without the written permission of the patient.

Patient Feedback. We welcome your comments or suggestions. Please feel free to talk to your GP or the Practice Manager regarding any issues. If you prefer, you can contact the Office of the Health Ombudsman on Telephone: 133 OHO (133 646).

Communication. A doctor is available during normal surgery hours for emergency advice. Our staff are experienced in deciding the appropriate response to any phone request.

Referrals. Doctors in this practice are competent at handling common health problems. When necessary, they can use opinions from Specialists. You can discuss this openly with your doctor, including potential out of pocket expenses.



BROCCOLI PESTO PASTA

Ingredients

- 1 head of broccoli (about 8 oz.)
- Kosher salt
- 6 ounces orecchiette or other short pasta
- ½ cup grated Parmesan
- ½ cup (packed) fresh basil leaves
- 3 tablespoons olive oil
- 2 teaspoons fresh lemon juice
- Freshly ground black pepper

Recipe Preparation

Separate broccoli stalk from florets and finely chop florets. Trim woody end of stalk, then peel and finely chop. Cook stalk in a large pot of boiling salted water until bright green, about 3 minutes. Add florets and cook until crisp-tender, about 3 minutes more. Using a slotted spoon or mesh spider,

transfer broccoli to a large bowl of ice water, then drain on paper towels.

Add pasta to same pot of boiling water and cook until al dente. Drain pasta, reserving 1 cup pasta cooking liquid, and return to pot.

While pasta cooks, transfer broccoli (reserve a handful of florets) to a food processor and add Parmesan, basil, oil, and lemon juice.

Season with salt and pepper, then process until smooth.

Toss pasta with broccoli pesto, adding more pasta cooking liquid as needed to coat evenly. Toss in reserved broccoli florets and season with salt and pepper.

Do Ahead: Broccoli pesto can be made up to 1 day ahead. Let cool, then press plastic wrap directly on surface before covering to avoid discoloration and chill.

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| 5 | 3 | | | 7 | | | | |
| 6 | | | 1 | 9 | 5 | | | |
| | 9 | 8 | | | | | 6 | |
| 8 | | | | 6 | | | | 3 |
| 4 | | | 8 | | 3 | | | 1 |
| 7 | | | | 2 | | | | 6 |
| | 6 | | | | | 2 | 8 | |
| | | | 4 | 1 | 9 | | | 5 |
| | | | | 8 | | | 7 | 9 |

SUDOKU