# CURRENT MURRAY VALLEY ENCEPHALITIS WARNING FOR THE NORTHERN TERRITORY



MVE is endemic in the northern two thirds of the Territory, and extends into southern NT during wetter than average summer rainfall. "Increased numbers of common banded mosquito can be experienced in the NT at this time of year within five kilometres of freshwater creeks, flood plains and swamps, and seasonally flooded inland areas.

MVE is the most dangerous endemic mosquito borne disease in the NT. Usual symptoms of MVE include:

- severe headache high fever
- drowsiness tremor and seizures, especially in young children

"In some cases the condition progresses to delirium and coma, leading to paralysis or brain damage," Mr Whelan said (Director of Entemology NT). "Despite best care, 25 per cent of people die from the infection and at least 25 per cent will have residual neurological effects.

"Kunjin virus causes a disease with high fever, headache, muscle pain, lethargy and sometimes rash, but more serious complications such as encephalitis are relatively rare. "People most at risk include campers, babies and young children who reside near problem areas. People in small or remote communities and anyone visiting parks and recreation areas where mosquitoes may be active are also at greater risk of contracting a mosquito-borne disease."

Avoid dusk, and dawn, wear long sleeved clothing, consider using DEET or mossie netting if camping out.



Thank you for not smoking on the entire grounds of our medical centre.

#### **Problem Solving**

Who doesn't struggle with day to day issues involving making varying decisions?? This is from the new MyCompass website—check it out on www.mycompass.org.au. Trial still available; not available to general public use until mid 2011

Here is a summary of the steps in the DOGSTAR problem solving process:

**DEFINE:** What is the problem? Be really specific. Whose problem is it? Is it your or someone else's as well?

**OPTIONS:** Brainstorm all possible ways of dealing with the problem without judgement

**GOOD & BAD:** What are the possible outcomes of each possible solution? What might happen?

**SELECT:** Based on your evaluation, choose an option to get started on

TAKE ACTION: Put your solution into place

**ASSESS:** Did the solution work? If not, evaluate what went right and what did not work

**REWIND:** Go back to your original list. Consider trying a different option. Consider whether your options need reviewing or whether your problem is well defined.

#### ALICE SPRINGS FAMILY MEDICAL CENTRE

17 Stuart Highway (cnr Kekwick Ave)
PO Box 4246
Alice Springs NT 0871
Entry via Kekwick Ave

For more information about our medical centre visit

www.alicefamilymedical.com.au



## ALICE SPRINGS FAMILY MEDICAL

### NEWSLETTER

EDITION 18
MARCH 2011

#### **DOCTORS**

Dr Deb Mitchell + various locums
PRACTICE NURSE

Susie Leister RN

#### **ADMINISTRATIVE TEAM**

Practice Manager—Susie Leister Receptionists—Jodie Foley & Diane Tennyenhuis

#### PRACTICE HOURS

Monday to Friday 8:15am—5:30pm Saturday 9:00am—12:00pm (will close earlier if demand is low) Sunday Closed Public Holidays Closed



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to improve Central Australian Health

TEL: 08 8952 7774





#### **ELU CLINICS**

They are back on again—**Tuesday mornings 22nd March and the 29th March** for those eligible for the funded fluvax. Who is eligible? Anyone over age 65 yrs, or 15 yrs if ATSI; anyone who has a chronic medical condition such as asthma, diabetes, heart problems, COPD, renal issues. If you are unsure about your eligibility please ask at reception when booking. Our private fluvax will cost \$25 but is currently not available and we will inform you as soon as we have it in stock. The visit is funded through most account and we will inform you as soon as we have it most account when seen in stock. The visit is funded through medicare when seen in flu clinic

medicare when seen in flu clinic and only when appointments are made, it is not a drop in clinic.

#### SKIN CANCER CLINICS

The skin clinics are back on every 2nd Thursday afternoon until the week before Easter. Dates will be 10th March, 24th March and 7th April 2011. There will be a hiatus until late June as Dr Mitchell will be on sick leave to recover from her own surgery in early May until late June 2011.

Patient demand was high before Christmas so these latient demand was high before Christmas so these

Patient demand was high before Christmas so these clinics have filled quickly. If you are interested in having a skin health check please call reception staff or visit our website for more information of how they are run and the fee schedule.

#### TRAVEL CLINICS (TMA LINKED)

We are going to experiment with running a travel clinic every Tuesday afternoon with Dr Mitchell from 1.30—3.30pm to provide the most up to date travel advice. This will include vaccinations, medical advice on malaria prophylaxis, acute mountain sickness, and various other relevant topics. They will be run as 20 minute appointments similar to the skin clinic format. Please register your interest at reception.

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FEES

Due to increasing operating costs ASFMC have increased Please see the table below for fee comparison:

This only the second increase in fees since September 2006.

061\$	08T\$	לל
\$77\$	07T\$	98
<b>S</b> 9\$	79\$	23
Current Fee	Previous Fee	Medicare Item

#### **4U NDIS JIAMA**

ASFMC Management is keen to utilise the new tool on our updated website to get as many patients as possible to sign up to receive email notifications, including this newsletter quarterly, as well as invitations to various health initiatives, for example the flu clinics at the end of March, or to let our patient population know of recent health issues relevant to Central Australia.

# PLEASE SIGN UP TODAY!! Ask at reception how

WEBSITE—CURRENTLY UNDERGOING CONSTRUCTION

ASFMC Management has been updating and changing our website quite dramatically over the last few weeks. It is still a work-in-progress and we would value feedback from patients about both the content on the website and format. We are keen to provide more easily accessible information to patients via the web to streamline the way we provide current information, both clinical and administrative.

### us.moɔ.lsɔibəmylimefəɔils.www

Please email Jodie jodiefoley@alicefamilymedical.com.au if you have any constructive feedback—positive or negative.

Dr. Mitchell is excited to have on board various locums who will assist in covering the extra patient demand since being left as a solo GP back in early February 2011. They are a mix of male and female locums including Dr. Libby Lewis who will be working at ASFMC in a permanent part-time position for the next 6 months. She starts on the 4th April 2011. This will mean Dr Mitchell will be working more in a part-time ca-

booking appointments.

RECENT EVENTS

Unfortunately we are still in the process of trying to find a suitable second part-time receptionist so Susie and Master Joshua (our son) have been manning the reception desk in the late afternoons. We apologise for any inconvenience but due to the lack of child-care options we are left with no choice for the immediate future.

April we will have the choice of 3 GPs when

pacity to enjoy parenthood and freshen up from late last year. Please be aware as of

Due to locum support for the next 6 months ASFMC have opened their books again to new patients. We currently have > 5500 active patients. We are still looking to recruit a permanent GP and despite an expensive national advertising campaign we have not found anyone suitable as yet. If you happen to know of any potential GPs willing to consider relocating to Alice Springs please to consider relocating to Alice Springs please direct them to our website for more information.