



Dr. Mitchell will complete the final surgical module on nose and lower limb next Feb 2019 to attain the Advance Diploma in Skin Cancer Surgery. It has come to Dr Mitchell's attention that numerous skin cancers that are either consented for removal, either with picato, or surgery in fact seem to be increasingly delayed after a skin cancer clinic check-up.

ASM Management will be more proactive in ensuring a better understanding of the risk of leaving an established skin cancer. Recently on chasing outstanding requests for surgery, two melanomas, numerous SCC and BCC skin cancers were removed, but these could have been smaller and easier procedures if done when first recommended.

If a patient has financial concerns after better understanding the surgical consent form, a single appointment with Dr Mitchell can be arranged, and either a public referral to the Alice Springs Hospital for the local surgeons or a private referral to a Plastics surgeon interstate can be done if a patient has private health insurance.

ASM Management is always trying to ensure financial consent, but the delays in removing what is an obvious skin cancer need to be shortened.

## MY HEALTH RECORD (MyHR)

In case you have not heard the Australian Government has decided to make the electronic health record opt-out before 15th Oct 2018 otherwise one will be created for you. If only organ donation was an opt-out process but it was decided that there were too many consent issues.

There really are too many pro's and con's to list here in this newsletter but Dr Mitchell through a Facebook group of doctors has found a very good summary of the pro's and con's which we will create a link to our website to look at.

If you don't opt out of a My Health Record by 15th October 2018 one will be created for you. Once it is created it can't be undone (though content can be controlled). If you opt out now, you can always opt back in later. If you do have a My Health Record you need to look at the security settings and consider limiting who can access the content. The default setting is the secondary usage will be allowed. ASM Management can confidently state no patient MyHR have been created here. It is interesting to note that we have 100 patients though that have one.

How to opt out:

- Aust Post have forms
- Ring 1800 723 471
- [www.myhealthrecord.gov.au/for-your-family/opt-out-my-health-record](http://www.myhealthrecord.gov.au/for-your-family/opt-out-my-health-record)

Remember the government already has highly sensitive data on you eg. Tax, Medicare and PBS data and Centrelink



# NEWSLETTER

EDITION 7  
**AUGUST 2018**

**DOCTORS**  
Dr Deb Mitchell

**PRACTICE NURSE/DIABETES  
EDUCATOR**  
Susie Leister RN, CDE

**ADMINISTRATIVE TEAM**  
Practice Manager—Susie Leister  
Receptionist—Lynlee Ritenour

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## WHAT'S NEW?

Our practice nurse Tammy decided in late June to return to Congress duties, and we wish her all the best. But as this was such short notice, until ASM has recruited another nurse, either fulltime or part-time, we need to experiment in particular with travel associated follow up consults, with a choice between seeing Dr Mitchell or Susie depending on availability.

We are looking to recruit practice nurses, from as little as a 3–4 hour session per week, up to full-time work. If you, or someone you know is interested, please contact reception, or email Susie at [admin@alicespecmed.com.au](mailto:admin@alicespecmed.com.au). We have the potential to recruit more than one practice nurse.

The experiment to have our previous Practice Nurse be “free” for follow-up travel appointments plus others, became unmanageable. Please be aware Practice Nurse visits will be billed accordingly to the time taken. Some vaccinations may literally take less than 5 minutes, while having our nurse spend up to 60 minutes with a patient to help them talk out their travel plans will be billed for the time taken after the first funded visit.

Lynlee will endeavour to ensure patients are offered the appropriate amount of time required. However Susie will be stricter at running to time and considering she is a Credentialed Diabetic Educator she will certainly not be for free. Our transition from mainstream private general practice happened nearly 2.5 years ago and we have no intentions of returning to that business model.



Dr. Mitchell is currently enrolled at JCU in Townsville doing a Master in Public Health and Tropical Medicine. Last year's subject on “Travel Medicine” started our new range of fact sheets, and this year “Tropical Medicine” requires Dr Mitchell to spend 2 weeks in Townsville for an intensive for that subject in August. We will continue to slowly add to the range of topics, that can be found on our website, as well as emailed out to patients on request after a travel consult.

Epidemiology in Public Health was last semester's topic which in fact reinforced our model on preventative health, at all levels. Formula for Number needed to treat, and a revision on absolute risk reduction and population strategies has Alice Specialised Medicine thinking more seriously about research options in general practice.

The other thing we will start trialing is mailchimp emails, to use for a number of administrative reasons. We are going to trial outsourcing our recall lists, and make a push on ensuring we have up to date emails or SMS contacts. Aust Post is cost exclusive for us, and attempting to ring patients with the new VOIP phone meant lots of missed phone

calls prior to being able to work out how to program our old phone number in, rather than looking like an Adelaide number.

The mailchimp will initially be a trial, and we are looking at recruiting well known patients to review the quality of survey, or recall reminder, or flu clinic invitation so we can amend our templates. We need to push into the digital age to make our practice management costs lower. The plan is once we have this feedback, to put certain links on all our websites, and with new patient information forms, as well as signing up existing patients who have OK'ed previous use of email recalls. This will help us in the cycle of AGPAL accreditation for next year but also catch up on the established recall we have not actioned for skin, or chronic disease, and in particular vaccination schedules that used to be actioned previously.

## INFLUENZA / FLUVAX

There has been lots of media exposure recently about the timing of fluvax and what would be best for an individual will depend on many factors. ASM currently has all fluvax in stock for all ages, but as the Aus Govt changed the funded fluvax dramatically for those aged > 65 years at short notice, this means there are 4 different brands of fluvax in our clinic.

ASM would still proactively recommend all health care professionals, childcare workers and teachers consider getting the private fluvax. The timing is contentious as it is now believed that a person's immunity might wane over the next 6 months so if there was an outbreak late in the year, the protection might not be as good as previously thought. Currently there is influenza B everywhere in central Australia and if interested please book at reception.