



Dr. Mitchell will complete the final surgical module on nose and lower limb next Feb 2019 to attain the Professional Diploma in Skin Cancer Surgery through UQ. It has come to Dr Mitchell's attention that numerous skin cancers that are either consented for removal, either with picato to shrink or treat early SCC, 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 and is concerned about scarring or cosmetic outcome.

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 Jan 31st 2019** due to increasing concern about privacy and informed consent. 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 **31st Jan 2019** 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 8  
**Nov/DEC 2018**

**DOCTORS**  
Dr Deb Mitchell

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

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

Proud to be working with the  
community to improve Central  
Australian Health



**Accredited  
General Practice**

**TEL: 08 8952 7774**



## WHAT'S NEW?

Alice Specialised Medicine would like to wish all our patients a relaxed Xmas break and hoping that 2019 is a healthy one. We will close the week prior to Xmas with a staggered departure of our staff, with the final day being Wednesday 19th Dec 2018. Lynlee will return to work Monday 14th Jan 2019 for half days to start booking appointments, with clinical appointments starting the following week.

We started trialing mailchimp emails to use for a number of administrative reasons. We are outsourcing our recall lists, and make a push on ensuring we have up to date emails or SMS contacts. This has worked well for the annual skin check reminders and ASM is keen to advertise our flu clinics this way, as well as other important health messages.

Please visit our website [www.alicespecmed.com.au](http://www.alicespecmed.com.au) to sign on for any newsletter topics that interest you (including this newsletter which is only 3–4 x a year). Due to ever increasing overheads we need to be more IT savvy, or increase our fees to cover the ever increasingly overheads.

We are still 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.



Dr. Mitchell is currently enrolled at JCU in Townsville doing a Master in Public Health and Tropical Medicine and in 2019 her subjects will include Environmental Health, Expedition and Wilderness Medicine and Diving Medicine.

## TRAVEL APPOINTMENTS

With the rush to school holidays and patients travel plans overseas, we wanted to quickly remind everyone that even though we do our best to cater to everyone's demands it is impossible to please every person. In particular we have decided to trial getting more specific information about people's travel plans to better utilise our limited resources. If we have your detailed itinerary, proof of previous vaccinations or blood serology, we can better provide exceptions for our booking availabilities. There is more to travel medicine than a mandated yellow fever vaccination and if for example, a child is not fully vaccinated, or an adult traveler is unwilling to consider more important health advice, ATM would not be the best resource as we are trying to provide holistic, thorough and current travel advice.

## JAPANESE ENCEPHALITIS

There has been lots of media exposure recently about the risk of Japanese Encephalitis when travelling to Bali for example. The geographical distribution of JEV extends from Japan, maritime Siberia and Korea in the North, to the Philippines in the East, through SE Asia and Southern Asia to Sri Lanka, India, Pakistan and Nepal in the West and as far South as Indonesia and Papua New Guinea and Torres Strait Islands in Australia. Mosquitoes (Culex breed is different to other mosquito born illness such as malaria and dengue are transmitted by the Aedes breed) transmit the virus and are active during the day.

Many infections are asymptomatic or non-specific with encephalitis estimated to occur only in 1 in 300 infections. However, encephalitis has a mortality rate of 10–25% but rises up to 50% for comatose patients. Death is more common in the young and the elderly. The incubation period is 6–16 days and the onset is sudden, although often preceded by gastro symptoms, especially in children. Fever, headache and altered mental state are the main presenting features.

The main source of infection is rice fields where the vector Culex mosquito breed becoming infected from pigs or birds. In tropical areas transmission is often linked to local monsoonal weather patterns.

There is a vaccine for JE called **Imojev** which we can usually get within 48 hours with credit card pre-payment, and it gives you protection for the next 5 years. There is a less than 1 in 100,000 chance you may be infected during travel to a country that experiences regular outbreaks of the disease but short-trips are not entirely risk-free and mosquie repellent is a must.