Mater Misericordiae Health Services Brisbane Limited ACN 096 708 922. Raymond Terrace, South Brisbane, Qld 4101 ■ www.materonline.org.au





New look for breast cancer centre

Mater Private Breast Cancer Centre at South Brisbane has undergone a refurbishment to provide patients with an aesthetically relaxing environment in which to receive treatment.

Each year, more than 500 women are treated for breast cancer at Mater Private Breast Cancer Centre, based at Mater Private Hospital Brisbane and Mater Private Hospital Redland.

The refurbishment has been made possible through a \$20 000 donation from patients and supporters and a Mater Foundation grant.

Since opening in 2000 with two specialist breast surgeons, Mater Private Breast Cancer Centre has grown considerably to now include six specialist breast surgeons and a high calibre support team including reconstructive surgeons, medical and radiation oncologists, psychologists, occupational therapists, physiotherapists and breast care nurses.

"The team provides a multidisciplinary approach to breast cancer care from a pre-surgical, intra-operative, post-operative and post-discharge perspective," Mater Private Hospital Brisbane and Redland Executive Director Don Murray said.

"This refurbishment will allow our patients with breast cancer to be treated in a centre that offers increased privacy, a more relaxed and informative waiting area and a greatly enhanced consulting setting.

"It is generally accepted that a comfortable, aesthetically relaxing environment can reduce anxiety and stress at crucial stages of a patient's health journey."

Mr Murray said staff spent three months surveying patients about what they would like to see in the refurbished centre. Their responses were passed on to the architect and building contractors.

"As a result, the redesign incorporates a new reception area, providing more privacy for patients, as well as new lighting to create a softer, more relaxed feel," Mr Murray said.

"Discreet screens have been incorporated into the design of the main area allowing further privacy for patients entering and leaving the consulting rooms.

"As a result, the redesign incorporates a new reception area, providing more privacy for patients, as well as new lighting to create a softer, more relaxed feel."

"This reflects the psychological needs of patients and has been designed specifically to assist with patient relaxation and to reduce stress and anxiety."

Other features include an enhanced communication setting where surgeon and patient positioning is more personalised with an integrated X-ray viewer to assist with clinical explanation and planning.

There is also a flat screen TV, new carpet and fresh paint and furnishings throughout the centre.







CEO's Message

Mater prides itself on providing exceptional care to patients and has recently refurbished the Breast Cancer Centre at Mater Private Hospital Brisbane to ensure an enhanced patient experience for all patients requiring access to this service.

The centre offers expert diagnosis and treatment and a range of support programs tailored to provide assistance and help when a diagnosis of breast cancer is given, throughout treatment and beyond. The refurbishment has created a relaxed ambience and we are sure will add to patient comfort levels and the amenity of the area.

Mater is progressing towards rolling out the Mater Doctor Portal and Mater Patient Portal as part of the national Patient Controlled Electronic Health Record programs. A significant amount of testing and checks are underway to ensure everything is on track for the end of June deadline.

Mater Health Centre Hope Island is also on schedule to open in April 2012 and Mater Pathology has now taken over the pathology services operating out of Holy Spirit Northside as of 5 March 2012.

In this issue we also take a look at a weekly breastfeeding support clinic being held at Mater Pharmacy Redland, two new research trials into subfertility and miscarriage which are currently underway and the upcoming GP Education program.

Regards,
Dr John O'Donnell
CEO Mater Health Services

"Great speaker", "excellent presentations", "practical advice"

Mater's GP Education Program continues to hit new targets with over 180 delegates in attendance at its recent tropical themed GP Education Conference held at Surfers Paradise Marriot Resort and Spa.

The conference, which included two sought after Advanced Life Support sessions, along with highly relevant topics on diabetes, sleep apnea, skin cancer, gastro-oesophageal reflux, male urinary tract infections, viral hepatitis and bowel problems to name a few, were big drawcards for the weekend.

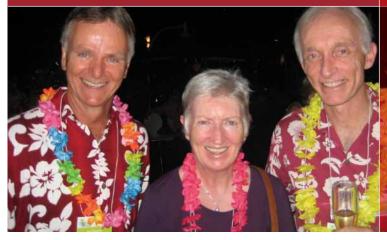
The Beach Boyz weren't the only entertainment for the evening; Dr Steve Costello charmed guests by continuing the CPR message at Saturday night's cocktail party, with CPR chest compression dance moves to the tune of Queen's Another One Bites The Dust.

We look forward to seeing you at Mater's Women's Health Conference in the second half of 2012. Date and venue will be released shortly.

To view Mater's full 2012 GP Education Program please visit **materonline.org.au**.



Above: Dr and Aimee Martinez; Dr and Mary Blanco Below: Dr Roscoe Foreman; Carmel Simpson; Dr Michael Yelland















Hope Island medical hub nears completion

Mater Health Services multidisciplinary medical centre at Hope Island is nearing completion and is scheduled to open in late April.

Mater Health Centre Hope Island, off Broadwater Avenue, will include specialists, Queensland X-Ray, Active Rehabilitation Physiotherapy, My Foot Doctor, Mater Pharmacy and a Mater Pathology collection centre.

Developer Halcyon Days has organised general and dental practitioner services to complete the offering in the single level health facility.

Mater Private Hospital Brisbane and Redland Executive Director Don Murray said Mater Health Centre Hope Island offered a range of opportunities for private specialists and allied health care professionals.

"We are delighted to have been able to come to an agreement with a number of allied health service providers who will enable Mater Health Centre Hope Island to deliver a comprehensive range of health care to local residents," Mr Murray said.

For further information contact Mater Health Services Business Development Director Darren Sonter on 07 3163 1002.

Mater and RACGP Oxygen form partnership to deliver electronic health record

Mater Health Services and RACGP Oxygen have formed a partnership to link general practitioners (GPs) to the Mater Shared Electronic Health Record (EHR), a Wave 2 Personally Controlled Electronic Health Record (PCEHR) project.

Incorporating the Mater Provider Portals and the new Mater Patient Portal, the Mater Shared EHR will enable GPs, private obstetricians, patients and Mater Health Services in South East Queensland to collaborate and share health information in order to provide integrated care for maternity patients.

RACGP Oxygen, an e-health enterprise owned by The Royal Australian College of General Practitioners (RACGP), is working with e-health software developer Pen Computer Systems to deliver an integrated connection to the Mater Shared EHR from GPs' desktops through the PrimaryCare Sidebar®.

Mater's Executive Director of Information and Infrastructure Mal Thatcher said the PrimaryCare Sidebar® would notify GPs their patient has a Mater Shared EHR record and provide a secure link to the patient's record to enable the GP to view, and securely share with Mater, important patient information.

"This valuable initiative ensures vital patient information is available to the patient's consented health care team in order to increase patient safety and provide the most appropriate care," Mr Thatcher said.

The PrimaryCare Sidebar® is an e-health resource that resides on the clinical desktop and integrates with the leading clinical and billing systems in general practice. RACGP Oxygen is currently deploying the PrimaryCare Sidebar® nationally while the Mater Shared EHR program is an initiative that supports the Department of Health and Ageing's national e-health roll-out.

In addition to the Mater Shared EHR functionality (available to GPs in the Mater Shared EHR targeted locations), the PrimaryCare Sidebar® offers a suite of tools and resources that:

- · provide decision support
- assist in increasing quality care
- access best practice knowledge
- save time
- identify profitable opportunities that flow from the provision of quality care.

"Both Mater and RACGP Oxygen see the natural fit for Mater Shared EHR in the PrimaryCare Sidebar® as PrimaryCare Sidebar® is already being deployed and utilised in general practices across South East Queensland. PrimaryCare Sidebar® provides a suite of valuable resources that will improve visibility of the Mater Shared EHR on GP desktops," Mr Thatcher said.

Professor Claire Jackson, RACGP President and GP at Inala Primary Care in Brisbane, said Mater Health Services and RACGP Oxygen teams are working closely with the Greater Metro South Brisbane Medicare Local and Accoras in the roll out of this project.

"Both the RACGP and Mater Health Services have already established relationships with their local practices and demonstrate great experience in rolling out programs to engage practices while improving health outcomes for patients.

"Shared electronic health records provide patients with continuity of care and reduce fragmentation of care, which is particularly important for maternity patients," said Professor Jackson.

For more information about the PrimaryCare Sidebar® and RACGP Oxygen please visit: www.racgpoxygen.com.au or contact 1800 257 053 during business hours.

Case Study: Dr Linus Chang

Dr Linus Chang is a gastroenterologist at Mater Hill Gastroenterology based at Mater Private Hospital Brisbane.

Case Presentation

Mrs BP, a 67 year-old woman was referred for screening colonoscopy for a positive faecal occult blood test. At her index colonoscopy in September 2009 multiple polyps were seen and the largest was resected (TVA). She was rebooked eight months later for resection of remaining smaller polyps.

A colonoscopy six months later revealed a caecal ulcer which failed to lift with submucosal injection of saline. The ulcer was biopsied to reveal carcinoma in situ.

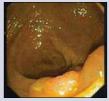
Mrs BP proceeded to right hemicolectomy. She had early T2 colorectal carcinoma just infiltrating muscularis propria. Loss of nuclear staining was seen for MLH1 and PMS2 (consistent with microsatellite instability). No lymph node involvement and no adjuvant chemotherapy was recommended.

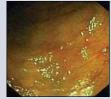
The tumour was surrounded by flat lesions which were sessile serrated adenomas (SSA).





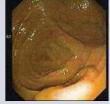
Index colonoscopy in September 2009. Multiple polyps. Largest was resected (TVA).





Colonoscopy six months later. Caecal ulcer failed to lift with submucosal injection of saline





Caecal view September 2009 Caecal view May 2010

Colorectal cancer

- Second most common cause of cancer death.
- Causes nine per cent of cancer death overall.

Risks of colonoscopy:

- 1 in 1000 of perforation or major bleeding
- 0.8/1000 if no biopsy
- 7/1000 if perforation or biopsy.

The risk of interval cancer between screening colonoscopy and repeat procedure depends on endoscopists' adenoma detection rate. A withdrawal time of at least six minutes increases adenoma detection rate¹.

Colonoscopy reduces deaths mainly from left sided colorectal carcinoma, but not right sided lesions². Five per cent of colorectal carcinomas arise as "interval" cancers following a colonoscopy.

Sessile Serrated Adenomas

Distal polyps usually follow conventional adenoma-carcinoma sequence but up to 20 per cent of all colorectal carcinomas may arise from serrated polyps. This was only recognised as recently as 2003. Serrated pathway polyps become cancers with high levels of microsatellite instability (MSI) and can become cancerous more rapidly than conventional adenomas.

Sessile Serrated Adenomas (SSAs)3:

- SSAs represent one to nine per cent of all polyps
- present in one to four per cent of the general population
- · median age of patients 61
- trend toward female gender bias
- more commonly in the proximal colon
- endoscopic appearance:
 - Five mm or larger
 - Flat or depressed
 - Covered by adherent layer of yellowish mucus
- in patients with at least one SSA
 - 12 per cent have low grade dysplasia (LGD);
 two per cent have high grade dysplasia
 (HGD); one per cent have adenocarcinoma.

In a study of all colonic polyps diagnosed between 1980 and 20014:

- 1402 hyperplastic polyps
- 81 polyps in 55 patients rediagnosed as SSA
- 40 SSA patients with no previous history of colorectal carcinoma or adenomatous polyposis high grade dysplasia (AP-HGD)
- of these, five developed colorectal carcinoma, one developed AP-HGD
- colorectal carcinoma more common in SSA patients than in controls with HP (12.5 per cent vs 1.8 per cent) and adenomatous polyposis (AP) (12.5 per cent vs 1.8 per cent)
- all subsequent colorectal carcinoma or AP-HGD developed in proximal colon
- four of five subsequent colorectal carcinoma showed MSI
- conclusion: 15 per cent of SSA patients developed subsequent colorectal carcinoma or AP-HGD, especially in the right colon.

Risk factors for developing SSAs

- cigarette smoking
- obesity
- female gender
- family history of CRC or polyps.

We currently don't know how quickly SSAs progress to cancer but one case study suggests SSA progressing to carcinoma in eight months. Mrs BP provides a further case study.

Surveillance post-resection

- SSA with no dysplasia
 - Five years if <three lesions,all <one centimetre in size.
 - Three years if three or more, or any one centimetre or more in size.
- SSA with dysplasia—three years
- screening of first-degree relatives at age 40 or 10 years prior to age of diagnosis.

SSAs are being missed:

 Mortality rates from right sided colorectal carcinoma not decreasing despite increasing use of screening colonoscopy



- · Interval cancers more likely to occur in proximal colon and demonstrate microsatellite instability suggesting they arise from SSAs.
- Adherent mucus coating is not a useful endoscopic sign unless preparation is very good.

Recognising SSAs:

- colonoscopy is the only reliable technique
- · increasing recognition of SSA
- six minutes withdrawal time
- split dose bowel preparation*
- advanced imaging techniques
 - narrow band imaging
 - indigo carmine spray.

Clear superiority of split dose preparation:

- achieves better cleansing than conventional
 - good/excellent views 75 per cent versus 43 per cent (p=.00001)
 - best views within eight hours of last fluid intake
- · adenoma detection rates higher
 - 24 per cent vs 12 per cent, (p=0.001)
- lower rates of failed caecal intubation
 - 1 per cent vs 11 per cent; (p=0.00001)
- · fewer aborted procedures
 - -7 per cent vs 21 per cent, (p<0.0001)⁵.
 - Second most common cause of cancer death.
 - Causes nine per cent of cancer death overall.
- *Split dose colonic preparation:
- traditional colonic preparation consists of solution given day prior to colonoscopy
- split dose prep involves giving for example, two litres of preparation the day prior, and one litre on the morning of colonoscopy.
- ¹ Barclay RL, et al. N Engl J Med. 2006;355(24):2533
- ² Baxter NN, Ann Intern Med. 2009;150(1):1. Singh H, Gastroenterology. 2010;139(4):1128
- ³ Huang CS, et al. Am J Gastro 2011; 106: 229-240
- ⁴ Lu F, et al. Am J of Surg Path 2010; 34(7):927-934
- ⁵ Marmo R, et al. Gastrintest Endosc. 2010 Aug; 72(2):313-20

Which Doctor?

Dr Benjamin Hope

Specialty: Orthopaedic Surgeon

Dr Hope graduated with an MBBS degree (Hons) from the University of Tasmania in 2000, and obtained a fellowship from the Royal Australasian College of Surgeons in Orthopaedic Surgery in 2009. Dr Hope has also completed fellowships in hand surgery at the St Luke's and Sydney Hospital Hand Units in Sydney, Shoulder Surgery at the Instituto Clinical Humanitas, Italy, alongside renowned surgeon Dr Alessandro Castagna, and Upper Limb Surgery at the Princess Alexandra Hospital Brisbane.

Dr Hope has a public appointment at Princess Alexandra Hospital and operates privately at Mater Private Hospital Redland.

Special interests include hand and wrist surgery, trauma and microsurgery, and shoulder surgery, including both open and arthroscopic procedures. Dr Benjamin Hope is an Orthopaedic Surgeon with special interest in upper limb surgery.



Which Doctor? Dr Sagarika Attudawage

Specialty: Consultant Physician in General Medicine

After completing her MBBS at The University of Peradeniya Sri Lanka, Dr Attudawage worked for a couple of years as a Senior House Officer in general medicine before passing MD (Part 1), the same examination which MRCP (UK) candidates sit, passing MD (Part 2) in 2002.

Dr Attudawage came to Australia in January 2004 to undertake general medicine training. She worked as a registrar for three years at Redland Hospital and became a specialist in general medicine at Grafton Base Hospital, New South Wales.

In 2008, Dr Attudawage was appointed as a specialist in general medicine at Redland Hospital. She continues to work at Redland Hospital and has also been practicing at Mater Private Hospital Redland since November 2010.

Dr Sagarika Attudawage is a Fellow of the Royal Australasian College of Physicians and a life member of the College of Physicians Sri Lanka.

Dr Sagarika Attudawage is a specialist consultant physician in general medicine and is now practicing at Mater Private Hospital Redland.



Referrals for insured patients can be made to Dr Attudawage at: Mater Private Hospital Redland, Weippin Street, Cleveland QLD 4163 Telephone: 07 3163 7444 Facsimile: 07 3163 7300

Collection centre relocations

Mater Pathology is adding two new centres based in Logan to its extensive network of collection centres.

One new centre opened in March on Wembley Road, and the other, located next to Logan Central Plaza Pharmacy, is due to open in late April.

Both new centres will help continue the Mater Pathology tradition of providing qualified collectors experienced in the collection of adult, maternity, paediatric and neonatal tests.

Mater Pathology also has an extensive home collection service. This service can be fully bulk billed and is available for most residents in Brisbane's greater south region. Home collections can be booked by telephoning 07 3163 8500, and operate from 7 am to 5 pm Monday to Friday. A full list of suburbs serviced by our home collection service is available at pathology.mater.org.au.

Mater Pathology's other collection centres are located at Alexandra Hills, Annerley, Beenleigh, Capalaba, Chermside, Cleveland, Coorparoo, Deagon, Eastern Heights, Eatons Hill, Inala, Ipswich, Kallangur, Kedron, Keperra, Macleay Island, Oxley, Rochedale, Russell Island, South Brisbane, Springfield, Springwood, Sunnybank Hills and Yamanto.

To better service the needs of local patients, the Springwood collection centre recently relocated premises and is now collocated at 2 Murrajong Road, Springwood.

Mater Pathology has more than 90 years experience as Queensland's leading not-for-profit pathology provider, reinvesting revenue back into improving health care.

New collection centres

Mater Pathology Logan Central collection centre 90 Wembley Road, Logan Open Monday to Friday 8 am to 2 pm Closed Saturday Ph: **07** 3299 3074

Mater Pathology Logan Central collection centre (due to open late April)

Logan Central Plaza, 74 Wembley Road, Logan Open Monday to Friday 7 am to 5 pm Closed 12.20 pm to 1 pm daily Open Saturday 7.30 am to 11.30 am

Relocation: Mater Pathology Springwood collection centre has moved.
2 Murrajong Road, Springwood
Open Monday to Friday 7 am to 4:30 pm
Open Saturday 8 am to 12 pm
Ph: 07 3299 2502

For all enquiries, all hours phone **07 3163 8500** or email **pathology.enquiries@mater.org.au**.

Redland breastfeeding support clinic

A community based outpatient breastfeeding support clinic has proven exceptionally popular and has been welcomed by new mothers in Redland.

The clinic was an instant success from its opening in September 2011, and sees approximately eight mothers at its weekly clinic to provide advice and feedback on any breastfeeding issues experienced.

Mater Mothers' Private Redland identified a gap in post natal follow-up for new mothers on leaving the hospital after their allocated stay. Working with Mater Pharmacy Redland the midwives looked at developing an outpatient breastfeeding support clinic to be held at Mater Pharmacy Redland.

Mater Pharmacy Redland already hosts a weekly walk-in baby clinic where new mothers can take their baby to be weighed and to discuss concerns about feeding (breast or bottle) with a Mater midwife. This clinic was very well attended and the midwives felt mothers requiring additional breastfeeding support needed allocated appointment times in a private area.

Mater Mothers' Midwife Noelene Kennedy said she saw her role at the hospital as sending women home suitably equipped to look after their babies.

"By putting in place an outpatient breastfeeding support clinic we've helped women have access to follow up in a community setting so they can feel comfortable and any concerns they have can be attended to quickly by experienced Mater midwives," Ms Kennedy said.

The breastfeeding support clinic is staffed by the same midwives who run

the weekly walk-in baby clinic and they are able to book in 20 minute to half an hour appointments each week with mothers who they feel would benefit from some additional support.

"The longer, private appointment time enables the midwives to spend some time with the mums and their babies and to observe breastfeeding taking place so they can help rectify any problems and provide advice there and then," Ms Kennedy said.

The booking calendar for appointments is available to midwives at Mater Mothers' Private Redland and to Mater Pharmacy Redland staff and paediatricians can refer into the service.

"We've had very positive feedback on the clinic from mothers, midwives, pharmacy staff and paediatricians," Ms Kennedy said.

"Paediatricians often refer to the service and equally the midwives are able to refer onto a paediatrician if there is anything they are concerned about."

The breastfeeding support clinic is held every Friday morning at Mater Pharmacy Redland. Women with babies under six weeks old can be referred by their GP, paediatrician, pharmacist or midwife.

Mater Mothers' Hospital in South Brisbane also offers a Breastfeeding Support Centre available Monday to Friday from 8.30 am to 2.30 pm.

For further information, please contact: Mater Pharmacy Redland on **07 3163 7411** or alternatively **07 3163 7342** to speak with a Mater midwife. To contact the Breastfeeding Support Centre at South Brisbane, please contact **07 3163 8200**.





Research trials underway for previous subfertility

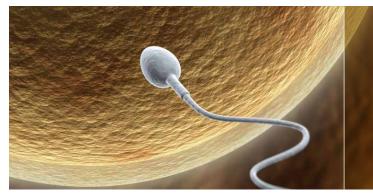
and recurrent miscarriage

Two research projects specifically designed for couples experiencing subfertility or recurrent miscarriage are underway at Mater's Fertility Services Clinic.

Mater's Fertility Services Clinic has been caring for the fertility and reproductive health needs of couples for more than 30 years. The clinic provides expertise in the use of fertility cycle charting for subfertility and miscarriage and offers a specialised clinic associated with a tertiary hospital—a unique service in Australia.

The research projects aim to assess the effectiveness of progesterone in helping to maintain a healthy pregnancy:

- The 'Pregnancy Maintenance Trial' is currently recruiting women under seven weeks gestation, with a history of recurrent miscarriage (>= 3).
 Many of the women presenting to the clinic with fertility concerns have consequently been diagnosed with a hormonal deficiency in the second half of their menstrual cycle. This is often due to defective ovulation.
 If a pregnancy follows this sub-optimal ovulation, there is an increased chance of miscarriage.
- The 'Supporting Threatened Outcomes with Progesterone' (STOP)
 trial is recruiting women with a threatened miscarriage less than 10
 weeks, with a subsequent intra-uterine pregnancy with a fetal heart
 rate. Medical literature concludes women diagnosed with threatened
 miscarriage have a higher rate of miscarriage and difficulties during
 their pregnancy and that progesterone is often low in these threatened
 pregnancies.



The aim of Mater's two research projects is to assess whether support in early pregnancy with progesterone (an important hormone in early pregnancy) decreases the rate of miscarriage in this previously subfertile population.

The trial will involve women being assigned to take either progesterone or placebo as a pessary until 12 weeks by dates.

All women who present to Mater's Fertility Services Clinic will be seen by experienced doctors and midwives. If eligible they will be offered participation in the trial. No out of pocket expenses will be incurred. A comprehensive participant information package and consent process will be provided.

If you feel this research could benefit one of your patients or you require further information, please contact Mater Fertility Services Clinic on telephone **07 3163 2505**.

Request for interpreting services

Mater provides a coordinated interpreting service across its seven hospitals to enable people to participate in their care by facilitating communication for patients with limited skills in English.

Mater Interpreting Service Coordinators can arrange onsite or phone interpreting services with phone interpreters available 24 hours a day, seven days a week.

At Mater, care is provided to patients coming from approximately 140 different countries where English is mostly not the first language spoken. Interpreting services are provided to, on average, 1200 patients per month in approximately 55 different languages. The most common languages requested during 2011 included Vietnamese, Mandarin, Arabic, Hindi and Persian/Farsi. Some of the commonly requested new and emerging languages include Tamil, Hazaragi, Kirundi and Rohinga.

The principal function of Mater's Cultural Diversity Unit, established in July 2010, is to provide strategic and practical advice, support and education to staff to continually improve Mater's cultural responsiveness to patients. It plays a significant role in building long term relationships with culturally and linguistically diverse background (CALDB) communities to facilitate feedback on patient experiences and to enhance communication between patients and staff regarding the cultural needs of diverse groups served by Mater.

To request interpreting services for your patient at Mater please contact one of the coordinators on 07 3163 8776 during business hours. Onsite interpreters need to be pre-booked with a minimum 24 hours notice.

Please contact Jenny Ryan if you would like to participate in a Cultural Awareness education session or have any enquiries related to interpreting on phone **07 3163 8022** or email **jennifer.ryan@mater.org.au**.

■ LOUD treatment for Parkinson's

Patients with Parkinson disease suffering from voice and speech disorders can now access Lee Silverman Voice Treatment (LSVT)® LOUD certified clinicians at Mater Health and Wellness.

LSVT® LOUD is a scientifically documented efficacious program, which has been studied and developed by doctors for the past 20 years.

- LSVT® LOUD improves both the voice and speech of individuals with Parkinson disease by treating the underlying physical pathology associated with the disordered voice.
- Treatment focuses on improving vocal loudness and immediate carry over into daily communication enabling patients to maintain and/or improve their oral communication.
- LSVT® LOUD is administered on an intensive schedule of 16 individual, 60 minute sessions over a period of one month.
- 90 per cent of patients improve vocal loudness from pre to post-treatment.

- Approximately 80 per cent of patients maintain treatment improvements in their voice for 12-24 months post-treatment.
- All patients report improvement in their ability to communicate.
- LSVT® LOUD is being successfully delivered by over 4000 certified LSVT clinicians in 41 countries.

Patients attending LSVT® LOUD require an ear, nose and throat (ENT) specialist referral. A list of ENT specialists practising at Mater can be found at www.materonline.org.au.

Further information about LSVT® LOUD is available online at www.wellness.mater.org.au or www.LSVTGlobal.com. Enquiries can be made direct to Mater Health and Wellness on 07 3163 6000.





UPCOMING GP EDUCATION

Mater's GP education team have developed an exceptional program for you over the coming months. Please join Mater's key specialists for complimentary dinner and drinks as they cover a range of topics relevant to your practice.

DIABETES, KNEE REPLACEMENTS AND REHABILITATION		
DATE, TIME AND VENUE	Monday 16 April 2012, 6.30 pm to 9 pm Mater Redland	
PRESENTERS	Dr Talib Aljumaily — Physician: Diabetes—an update Dr Sanjay Joshi — Orthopaedic Surgeon: Improving outcomes for knee replacements Dr Victor Voerman — Rehabilitation and Pain Management Specialist: Rehabilitation medicine—an overview	
ACCREDITATION	4 Category 2 points	
GP MATERNITY SHARED CARE UPDATE		
DATE, TIME AND VENUE	Tuesday 17 April 2012, 6 pm to 9.30 pm Mater South Brisbane	
PRESENTERS	Preconception care and fertility	
ACCREDITATION	4 Category 2 points	
TOPIC TO BE CONFIRMED		
DATE, TIME AND VENUE	Tuesday 15 May 2012, 6.30 pm to 9 pm Mater South Brisbane	
PRESENTERS	To be confirmed	
ACCREDITATION	4 Category 2 points	

TOPIC TO BE CONFIRMED		
DATE, TIME AND VENUE	Tuesday 5 June 2012, 6.30 pm to 9 pm Mater Redland	
PRESENTERS	To be confirmed	
ACCREDITATION	4 Category 2 points	
GP MATERNITY SHARED CARE ALIGNMENT PROGRAM		
DATE, TIME AND VENUE	22 and 29 May 2012, 6 pm to 9.30 pm Mater South Brisbane	
	Prerequisite requirement for GPs wishing to provide shared antenatal care with Mater Mothers' Hospital. Program covers alignment requirements, MMH policies and includes completion of an exam.	
	Program is delivered over two consecutive weeks: Part 1 – 22 May, Part 2 – 29 May	
ACCREDITATION	40 Category 1 points	

TO REGISTER

Please contact Sara McDonald on email sara.mcdonald@mater.org.au or telephone 07 3163 1036. You can also visit materonline.org.au for Mater's full 2012 GP Education Program.



