

# GP Liaison Newsletter

December 2007

Wairarapa District Health Board keeping you informed

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## Christmas 2007



If you're anything like me Christmas Eve is a day set aside for the frantic buying of presents. Each year I promise myself that I will be more organised the next year, but never quite pull it off. I'm afraid my tardiness has also crossed over into the writing of this festive addition of the newsletter. In fact I have left it so late that this may actually be your New Year addition of the GP Liaison newsletter. Whichever, I hope you have/had a wonderful Christmas and New Year!

## Breakthrough in GP referring for CT scans and MRIs



Long has it been argued that if GPs had access to CT scans and MRIs patient care could be improved and unnecessary out-patient appointments could be reduced. Unfortunately the Ministry of Health position has been to restrict DHBs' funding for GP access to these investigations, making it very costly for DHBs to grant access to community providers.

However, in a pioneering move by Wairarapa DHB, local GPs will now be able to request CT scan, MRI, Dexa and Nuclear Medicine investigations providing they have discussed the case with either a Wairarapa Hospital specialist or radiologist.

Should a GP feel that one of these investigations would benefit his/her patient they should discuss the case with a relevant specialist at the hospital or the duty radiologist (available via Pacific Radiology reception).

If the specialist consulted agrees to support the test then his/her name should be included in the clinical history or the request form.

The report from the investigation will be sent to both the GP and specialist involved, though the duty of care remains with the GP. No referral of the patient to specialist care is inferred by this process. If referral is required this should be done in the normal formal manner.

## Ultrasound



Due to continued problems with maintaining a full staffing contingent the ultrasound department remains stretched. Routine ultrasounds are taking up to six months to be performed at the present time.

I would advise that patients are informed of this wait and given the options of private scanning where appropriate.

A reminder as well to include as much clinical information on the request form as possible as the final decision on priority is made by the radiologist who only has the information on the form to go on.

## Exercise ECG

Just a reminder to all GPs to ensure that patients referred for exercise ECGs are able to undertake the test. There have been recent occurrences of patients referred for a treadmill who have required walking frames to mobilise!

## Specific contra-indications

- Inability to walk on a treadmill
- Uncontrolled heart failure
- Unstable angina

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## ENT Blitz

Dr Nicola Hill, ENT specialist from Dunedin, will be at Wairarapa Hospital from 14-18 January. There are still a few specialist appointments and theatre slots available, so if any GPs have any urgent ENT patients with a pressing need for assessment please fax your referrals to the Outpatient Department.

## Hidden Gems

There are a couple of specialist physiotherapy services run out of Wairarapa Hospital out-patients that possibly not all GPs will be aware of.

Firstly we have Jenny Collett visiting once a month providing specialist physiotherapy for lymphoedema patients.

We are also lucky to have Carol Armitage, another physio from Palmerston who offers fortnightly treatment for women with urinary problems.

Both are happy to accept direct referrals from primary care.

## Smokefree screening

From November 5th all Wairarapa Hospital patients have been asked on admission if they are smokefree and if their household is smokefree.

Patients identified as not smokefree will be given a brief smokefree talk, offered Nicotine Replacement Therapy (NRT) and cessation support. Nurses who attend training courses will be able to prescribe NRT.

Patients will also be offered smokefree support and a reminder that hospital grounds are smokefree. Jan Struthers, Pre-admission nurse, has been trialling the new screening process since August. "The results have been very positive and patients have been very receptive. Far from the exchange being awkward patients were very matter-of-fact and welcoming of the offer of support," she says. In fact of those who identified as smokers 60% accepted referral for cessation support.

## Cancer Society



Cancer Society

The Wairarapa Cancer Society have recently relocated to new premises at 140 Dixon street and their new manager Anna Cardno is keen to remind everyone of the services that are offered by the society.

## Cancer Society, Wairarapa Centre

140 Dixon Street, Masterton  
Ph 378 8039; Fax 378 8042; Mob: 027 318 6698  
waicannz@xtra.co.nz; www.cancersoc.org.nz

Cancer patients and their families deserve access to the best possible support available.

Refer them to the Cancer Society - the first point of contact for cancer services.

### Our patient services are free, and include:

- Cancer Information Nurse free phone 0800 CANCER
- Information, counselling and emotional support
- Library, available for loan
- Cancer Connect NZ - peer support by phone
- Cancer Chat NZ - online discussion forum
- Can Support - support groups, educational courses, lifestyle courses & workshops
- Free transportation to treatment
- Financial Assistance Grant scheme

### Our health promotion services include:

- Sunsmart Shade loan scheme, free for public & private events
- Sunscreen, sunglasses and sun hat sales
- Sunsmart Schools Accreditation
- Smokefree information, advocacy & promotion
- Prevention, Screening & Early Detection
- Healthy Eating, Healthy Action lifestyle advice

*Minimising the impact of cancer on our community through information, research, health promotion and support services.*

## Special Farewell

After many years of service to cancer patients in the Wairarapa our Oncology nurse Sharon Jackson van de Weyer is moving on to offer her many skills to Hutt Valley DHB. I know she has been an excellent help and link for primary care to the world of oncology and will be sorely missed.

Recruitment is underway to find new incumbents to take on her role.

Until next time  
Simon Snook

## EXPECTED AVERAGE WAITING TIMES FOR FIRST SPECIALIST APPOINTMENTS AND ELECTIVE SURGERY AT WAIRARAPA HOSPITAL AS AT 30 NOVEMBER 2007

Unforeseen events may cause waiting times to change so please use this information as a guide only

### FIRST SPECIALIST APPOINTMENT

	Urgent	Semi-urgent	Routine
ENT	2-4 weeks	3 months	5 months
GENERAL SURGERY	2-4 weeks	2 months	5 months
GYNAECOLOGY	2-3 weeks	1-2 months	3 months
COLPOSCOPY	1-4 weeks	4-12 weeks	6 months
ORTHOAEDIC	2-4 weeks	2 months	4 months
OPHTHALMOLOGY	2-4 weeks	6 months	6 months
PLASTICS *	4 weeks	4 - 6 weeks	3 months
UROLOGY	2-4 weeks	5 months	5 months
MEDICAL	2-4 weeks	3 months	5 months
PAEDIATRIC	2-3 weeks	3-4 weeks	3-4 weeks

\*Plastics is provided in the Wairarapa by the Hutt DHB  
Waiting Time = time from receipt of referral at Wairarapa Hospital to outpatient appointment

### ELECTIVE SURGERY

	Urgent	Semi-urgent	Routine
ENT	As arranged	3 months	5 months
GENERAL SURGERY	2-3 weeks	6-12 weeks	5 months
GYNAECOLOGY	2-4 weeks	8-12 weeks	5 months
ORTHOAEDIC*	2 weeks-6 months	5 months	6 months
OPHTHALMOLOGY*	1-2 months	3-4 months	6 months
PLASTICS	2-4 weeks	1-2 months	2-3 months
UROLOGY	1-2 months	3 months	5 months

Waiting Time = time from date of outpatient appointment to treatment

\* Some Orthopaedic patients are reviewed six monthly by the Orthopaedic Clinical Nurse Specialist if they do not yet meet the criteria for being given certainty for surgery.