

Pindara Private Hospital

medicalmatters



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Celebrating
50 years of
people caring
for people



Pindara
Private Hospital
Part of Ramsay Health Care



The Southport
Private Hospital
Part of Ramsay Health Care



Ramsay
Mental Health

Message from the CEO



Welcome to this latest edition of Medical Matters.

This is a very special time for Pindara Private Hospital as we recently turned 50. It's hard to fathom how many lives the Doctors and Staff of Pindara have touched since the hospital was first opened in 1971 by Gwen and Allan Ramsay (no relation to Paul Ramsay the founder of Ramsay

Health Care, but a wonderful coincidence indeed). My estimate is about 1,000,000 admissions across the 50 years.

Everyone who has been involved with Pindara in any way should all be very proud of the service provided to our community over this time!

I'd like to take this opportunity to specifically thank all GPs past and present who have either worked with us at Pindara, or who have supported us in other ways, such as coming to our education events. We very much appreciate your support!

It's pleasing to be able to share with you that the Pindara major development announced in the last edition of Medical Matters has now been completed. We're excited about bringing online two new 28 bed wards (all single ensuited rooms) which will replace our old medical wards, as well as two new operating theatres. This project will also enable us to increase capacity in our Day Infusion Clinic and our Renal Dialysis Unit.

At The Southport Private Hospital (TSPH) it has been great to see our scope of services in Mental Health and Rehabilitation

grow, which enables us to provide more options to our community. On this front we are particularly proud of our establishment of the Gold Coast's only private ECT service, along with a range of great day and outpatient Rehabilitation and Allied Health services including:

- The pelvic health clinic, including pre and post-natal services and post-operative gynecological and men's health services
- Hydrotherapy – individual and group-based services in our heated hydrotherapy pool
- Cancer Care services
- Post-operative orthopaedic, reconditioning, neurological and pain management day programs.

This year we will be looking to add further programs including Cardiac Rehabilitation and a Parkinson's disease day program, in addition to the development of a specialist lymphedema service.

In concluding, it has been another challenging time for all who work in health care, particularly from late last year with the rise of Omicron and then the major rain event we have had. I would like to sincerely thank everyone who has supported Pindara and The Southport Private Hospital. Many thanks also to all GPs in the Gold Coast and surrounding areas for the important role you have and continue to play in for our community, particularly throughout the time we've been impacted by COVID.

Sincere best wishes for the year ahead... may it be far less challenging!

Mark Page
Chief Executive Officer





Pindara Private Hospital turns 50!

Pindara Private Hospital is celebrating its 50th anniversary - having grown from humble but proud beginnings to now caring for more than 50,000 patients on the Gold Coast each year.

Opened on 30th October 1971 as a 64-bed hospital with three operating theatres, Pindara has experienced extraordinary growth to become a leader in private health care delivery on the Coast.

Chief Executive Officer Mark Page estimates Pindara may have treated around one million patients during its five decade history. It now boasts 14 operating theatres, a Cardiac Catheterisation Lab, Intensive Care Unit, Critical Care Unit and 384 patient beds.

"Pindara has experienced incredible growth and it's only going to continue. We have a \$45 million project on right now which will provide us with two new private wards and two more state-of-the-art operating theatres," Mr Page said.



"Pindara also plays a very active role in teaching and research with many local medical, nursing and allied health students with us every day. In recent years we've developed a Clinical Trials Unit which is involved in groundbreaking research. We currently have more than 25 clinical trials running across the fields of oncology, haematology, respiratory and paediatrics," he said.

Director of Clinical and Hospitality Services Jan Lloyd has been with Pindara for 34 years - having started there as a midwife in 1987. She said it's the team's devotion to patients that makes the hospital so special.

"We have so many talented professionals from our doctors and nurses to housekeeping and catering, who genuinely believe in delivering the best outcomes for our patients. So many patients choose to keep coming back whether it's maternity or oncology or even palliative care, it's the care and the familiarity that is so strong in someone's healing," she said.

Obstetrician and Gynaecologist Dr Andrew Cary is another long-serving member who followed in his father's footsteps* to join the Pindara team in 1993. He has delivered more than 5,000 babies since then.

"It's essentially been the setting for my career. Back in the beginning there were two birth suites, now there are five and while we have everything we need medically, the maternity unit doesn't feel too medicalised. It's fantastic in terms of all its facilities - from the patient's point of view, they're beautiful, comfortable rooms and there's a very individualised approach to every patient," Dr Cary said.

Mark Page said Pindara Private Hospital each year helped around:

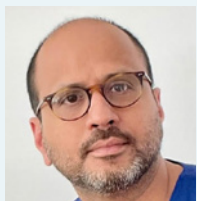
- 1,000 'Pindy babies' to be born
- 20,000 people cared for in the Emergency Department
- 28,000 procedures performed.

"I want to thank our entire team who put our patients first every single day and to our patients, thank you for trusting in us to care for you. I'm especially proud of all of our doctors and staff who over the past 18 months or so have never wavered in providing great care and service despite the myriad of challenges COVID-19 has thrown at us," Mr Page said.

** Andrew's father Dr Ian Cary was also an O&G at Pindara from 1979 to 1999*



New Faces at Pindara Private Hospital



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Benowa QLD 4217

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DR MANZOOR ABBAS

FRACS

General Surgeon & Gastrointestinal Endoscopist

Dr Abbas is a General Surgeon and Gastrointestinal Endoscopist with a special interest in Laparoscopic and Open Gastrointestinal, Hernia, Gallbladder and Vascular surgery.

Dr Abbas successfully completed 5 years of advanced surgical training in general surgery and was awarded the fellowship by the Royal Australasian College of Surgeons. Dr Abbas has held many academic posts including Associate Professor at Bond University. He is currently a senior lecturer at the Griffith University and a regular tutor of junior doctors and medical students. Dr Abbas has special interests in research and has published well over 20 publications in noted Medical Journals and authored chapter in book.

Dr Abbas has trained and worked in hospitals around the globe including United States of America, New Zealand, United Arab Emirates, India, and Australia. Prior to arriving in Australia Dr Abbas was a qualified General and Vascular surgeon from India working as a Research International Associate at the world-renowned institute in United States of America, Mayo Clinic, Rochester Minnesota. Since arriving in Australia Dr Abbas worked and trained extensively in General and Vascular Surgery before being selected for training in General Surgery under the auspices of Royal Australasian College of Surgeons.



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DR STEPHEN BUTLER

BSC(MED)MBBS MS FRACS(VASC)

Orthopaedic Surgery - Hand

Orthopaedic Surgery - Paediatric

Dr Stephen Butler is an Australian trained Orthopaedic Surgeon, specialising in surgery of the hand and wrist for adults and children.

Dr Butler consults privately on the Gold Coast at the Mudgeeraba Hand Clinic, and operates at John Flynn Private and Pindara Private Hospitals. Dr Butler is a consultant Orthopaedic/Hand Surgeon at the Queensland Children's Hospital in Brisbane.

Dr Butler completed his Bachelor of Medicine and Bachelor of Surgery at the University of New South Wales with Honours, and went on to complete orthopaedic training through the Australian Orthopaedic Association (AOA) surgical training program – including a term at the Sydney Hospital Hand Unit.

After completing orthopaedic training and obtaining fellowship with the Royal Australasian College of Surgeons (FRACS), Dr Butler proceeded to complete fellowships in Hand and Wrist Surgery under the supervision of the Australian Hand Surgery Society (AHSS) Fellowship program (PFET). Dr Butler has completed a hand surgery fellowship at the Victorian Hand Surgery Associates and the St Vincent's Hospital in Melbourne, and locally undertook a second hand fellowship at the Gold Coast University Hospital and Queensland Children's Hospital in Brisbane.



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Pacific Private Clinic
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DR RAMESH DAMODARAN PRABHA

FRACS, MRCS

General Surgery

Dr Ramesh Damodaran Prabha is a General Surgeon with subspeciality interest in pancreas, liver and biliary surgery. After completing his general surgery training from Perth, Ramesh undertook a regional general surgery fellowship followed by three years of subspeciality training in hepatopancreaticobiliary surgery at Royal Northshore hospital, Liverpool hospital and Gold Coast University Hospital. He has also previously trained at the prestigious pancreatic surgery unit at Royal Liverpool Hospital, UK.

Dr Prabha has now returned to settle on the Gold Coast with his General Practitioner wife and two daughters. He works as a consultant surgeon at the Gold Coast University hospital and also does regular lists at both GCPH and Pindara Hospitals.

New Faces at Pindara Private Hospital



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DR ABIGAIL EVANS

Embryologist, Bsc. MBBS FRANZCOG

Obstetrician and Gynaecologist

Dr Abby Evans is a Private Obstetrician and Gynaecologist whose practice is based at Pindara Hospital. Dr Abby's life has been fatefully interwoven with the coast. Before she started her medical career, she was an Embryologist at John Flynn Hospital, and started her medical training at Gold Coast University Hospital where she first met Dr Gary Swift.

A Queensland trained Obstetrician and Gynaecologist, Dr Abby finalized her advance training at the prominent high-risk Mater Mothers Brisbane Hospital and QE2 Brisbane Hospital. It was whilst practicing at QE2 that she chose to further advance her laparoscopic surgical skills for endometriosis. She also studied extensively under Professor Goh, a trail blazer in urogynaecology. Dr Abby excelled in advanced specialized modules of colposcopy, pelvic floor disorders and laparoscopic and hysteroscopic surgery.

Dr Abby has worked with the Royal Flying Doctor Service, providing expert care to the women of Western and Greater Western Queensland. Her experience gained working in rural parts of Australia further ignited Dr Abby's flame for promoting women's rights. Dr Abby is dedicated to remaining at the forefront of the latest research pertaining to gynaecological and antenatal needs; she keeps current by regularly attending conferences and meetings. She also contributes to the education of future doctors through her position as a senior lecturer at Griffith University School of Medicine and Dentistry.

Dr Abby is dedicated to hearing your concerns, understanding your issues and/or pain to develop a personalized holistic management program specific to your needs.



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DR EMILY GUAZZO

MBBS, DipAdvSurgAnat, FRACS

Head and Neck Surgeon

Dr Emily Guazzo is a Queensland Trained Otolaryngologist and Head and Neck Surgeon. She completed medical school at James Cook University and completed her advanced surgical training in Queensland through the Royal Australian College of Surgeons. Dr Guazzo further extended her skills at multiple local and international centres of excellence including advanced Otology and Neurotology at Cambridge University, United Kingdom and Bergamo, Italy and Head and Neck Surgery and Skull Base Surgery at Princess Alexandra Hospital Brisbane.

Dr Guazzo is a Senior Lecturer at the University of Queensland and has presented clinical research at international academic meetings and conferences. She has been invited to demonstrate surgical techniques at national and international training courses. She has published numerous peer-reviewed papers and is a reviewer for well regarded national and international academic journals.

Dr Guazzo enjoys all aspects of ENT and loves to collaborate with clinicians and allied health to provide optimal patient care. She has a special interest in paediatrics and looking after families as well as head and neck surgery, otology and skull base surgery. Outside of work, Emily enjoys spending time with her family, exercise and spending time at the beach.

New Faces at Pindara Private Hospital



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DR JEROME MELON

MBBS BSc(Med) FRANZCOG CU

Urogynaecologist / Gynaecologist

Dr Jerome Melon is a subspecialist Urogynaecologist (CU) and pelvic floor reconstructive surgeon, as well as a specialist Obstetrician and Gynaecologist (FRANZCOG).

Dr Melon obtained his specialist qualification from the Royal Australian and New Zealand College of Obstetricians and Gynaecologists in February 2018. He undertook 3 years of subspecialist fellowship training in Urogynaecology and Female Pelvic Medicine and Reconstructive Surgery (FPMRS) at Monash Medical Centre in Melbourne, and McGill University in Montreal, Canada.

Dr Melon is fluent in both English and French. Throughout his career, he has worked and trained in Australia, Hong Kong and Canada.

Dr Melon values every patient experience and strongly believes in informed consent and shared decision making, creating an environment where patients are comfortable to make their best individual choices. He is a highly trained subspecialist surgeon having worked in internationally renowned institutions, who can offer all forms of abdominal, vaginal and minimally invasive surgeries to treat pelvic floor dysfunction.

Dr Melon has authored several research papers in this field and is heavily involved and passionate about the teaching of subspecialist trainees, sitting on the Board of Examiners for the Certification in Urogynaecology (CU) subspecialist examinations.

Dr Melon has a public appointment as an Urogynaecologist at Gold Coast University Hospital and Queensland Pelvic Mesh Service, as well as consulting privately at Pindara Private Hospital (Gold Coast), and Greenslopes Private Hospital (Brisbane).

Dr Melon is very happy to be contacted via phone to assist medical professionals with patient management.



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DR WILL PEVERILL

Interventional Cardiologist

Dr Will Peverill is a Cardiologist with subspecialty training in interventional cardiology specializing in complex coronary intervention and structural heart procedures. He was born and raised on the Gold Coast and attended medical school at Bond University before pursuing training in Brisbane. He trained at both The Royal Brisbane and Women's Hospital as well as Princess Alexandra Hospital where he undertook a fellowship in percutaneous coronary intervention. Following this he undertook an overseas fellowship at the London Health Sciences Centre in Canada where he performed over 1500 coronary interventions as well as a range of structural procedures.

Dr Peverill specializes in complex procedures including chronic total occlusion stenting, transcatheter aortic valve implantation (TAVI) and percutaneous mitral valve repair. He believes in holistic patient care developing advanced stroke prevention strategies with your neurologist including PFO and ASD closure as well as left atrial appendage occlusion. He has a keen interest in advanced heart failure therapies including the use of the MitraClip device. He has returned to the Gold Coast a passionate advocate for the patients of his home town and eager to bring his international expertise to the clinical excellence exemplified by the structural heart team at The Cardiac Centre.

New Faces at Short Street Day Surgery



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www.gcteyedoctors.com.au

DR ESRA SANLI

BMSc, MBBS (Hons), MMed, FRANZCO

Ophthalmology

Dr Esra Sanli is an Australian trained, comprehensive general ophthalmologist, who also holds an appointment as a staff specialist at the Gold Coast University Hospital and works privately at Short Street Day Surgery.

Dr Sanli completed her undergraduate medical degree with Honours at The University of Tasmania. Her specialist ophthalmology training was at the Prince of Wales Hospital, Sydney.

Dr Sanli undertook fellowship training at Cheltenham and Gloucester General Hospital's in the United Kingdom. During this time she honed her skills in cataract, eyelid and lacrimal surgery under the guidance of world renowned oculoplastic surgeon, Dr Ric Caesar.

Dr Sanli prides herself on achieving excellent outcomes for her patients by utilising the most current evidence, advanced diagnostic investigations and personalised therapeutic strategies.

Short Street Day Surgery

Short Street Day Surgery offers a friendly, caring and comfortable environment for a range of surgical procedures.

Our specialist services include:

- IVF and Gynecology, provided by Monash IVF, located on site.
- Ophthalmology (including Pediatric from 1 year), provided by The Eye & Laser Centre & Eye Specialist Institute, located on site.



To view our Specialists,
scan here

Short Street Day Surgery

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shortstreetdaysurgery.com.au



Short Street
Day Surgery
Part of Ramsay Health Care



Weight Loss Surgery is Not the Easy Way Out – it is the Only Way Out

Weight loss surgery has been emerging for decades in Australia as a powerful tool to treat morbid obesity. Despite the fact that bariatric operations are next to the most common procedures performed in Australia today, weight loss surgery is often still seen as a cosmetic operation and regarded as the easy way out.

In Sweden, long-term follow up studies were started more than two decades ago to compare the outcome of conservative weight loss with bariatric operations. Surgery achieved 18% total weight loss after 20 years over only 1% in the medically-managed patient group (L Sjostrom Inter J Med 2013), proving that surgery is actually the best proven method to lose weight in morbidly obese patients.

Good sustained long term weight loss in obese patients is the paramount goal of any weight treatment, and multiple studies have shown substantial health benefits over decades after surgery.

Type 2 Diabetes has always been a typical disease of the elderly but with the rapidly increasing numbers of obese people in Australia, metabolic problems are frequently seen in a much younger population. Australian scientists were some of the first to identify a much improved blood sugar metabolism after weight loss surgery. It was found that weight loss surgery achieves better long-term blood sugar control, which helps to reduce the requirement for diabetes medication (PR Schauer et al NEJM 2017). These findings have resulted in weight loss surgery now often being called “metabolic surgery”.

The improved metabolic situation is often observed with increased physical activity after weight loss surgery, which also reduces the risk factors for cardiovascular diseases and results in a 50% risk of having a myocardial infarction (T Owen et al AMCC 2011).

Obesity is known to reduce fertility and increases time taken to conceive (L Poston et al Lancet Diabetes Endocrinol 2016). Fat

tissue was found to produce interferons and other messengers, which interfere with reproductive hormones. Female as well as male fertility is negatively affected in obese patients. Bariatric surgery has shown to improve conception rates and hirsutism, and improve sperm quality and erect dysfunction in males (L Moxthe et al Journal of Reprod Infert 2020).

By achieving good long term weight loss, back pain and also obstructive sleep apnoea improves. (AF Joaquim et al Global Spine Journal 2020, H Ashrafian et al Obesity Surgery 2014).

As mentioned above fat tissue produces numerous messengers. Some of them were found to increase carcinogenesis. The Australian Cancer council listed thirteen different cancer types to be more frequent in obese people.

It is no surprise that the life expectancy in obese is shorter compared to normal weight individuals (Fontain KR et al JAMA 2003).

There is now, by far, enough evidence to understand that morbid obesity has substantial negative health implications. Good long term weight loss in patients with obesity achieved by weight loss surgery can reverse this process; by taking this health burden of people, bariatric surgery is additionally known to substantially improve quality of life (N Lindekilde et al Obes Rev 2015).

Bariatric surgery is not suitable for all people and to be successful patients need good long-term support to maintain the lifestyle changes. However, once substantial weight loss has been achieved and support structures have been set, the so called “easy way out” proves to be the most successful way out.

Dr Harald Puhalla
Bariatric Surgeon

Bariatric Service

A new lease on life

Obesity is a major health care problem and one of the most frequent causes of preventable death in Western countries in the 21st century. Bariatric surgery is the only current treatment that has been shown to achieve major and durable weight loss, which can lead to total or partial control of a wide range of common and serious diseases, such as diabetes, heart disease and hypertension according to a Medical Journal of Australia report.

Bariatric Surgery at Pindara

At Pindara Private Hospital, we are committed to providing high quality, personalised care for patients who undergo bariatric surgery.

Our highly experienced bariatric surgeons work closely with our team of skilled nurses to deliver high quality care. An individual plan is developed for each patient's hospital stay, including prior to admission, while in hospital, and through to discharge.

What types of surgery do our specialists perform at Pindara?

Our Bariatric specialists couple surgical options with holistic and integrated programs. This may include a dietitian, psychologist, and exercise physiologist involvement, with the aim to achieve one long lasting solution for the patient.



To view our Bariatric Surgeons, scan here





‘Game changing’ new skin cancer treatment now available on the Gold Coast

A unique treatment designed to remove skin cancers from delicate and difficult areas is now available on the Gold Coast - exclusively at Pindara Private Hospital.

Mohs surgery is a combination of dermatology and pathology, where a specialist Dermatologist removes the skin cancer in stages, using a microscope to examine the tissue for cancer cells as they go. Layers of skin are removed and examined until there are no more cancer cells present.

Named after the surgeon who developed it, Frederic E. Mohs, the surgery has been described as a ‘game changer’ for skin cancer treatment as the complete removal of cancerous cells allows for the highest cure rate. The procedure also preserves as much healthy tissue as possible.

Queensland’s skin cancer rate is among the highest in the world, and accounts for around 80% of newly diagnosed cancers each year.

Dermatologist Dr Andrew Freeman from The Skin Centre at Pindara Private Hospital, said Mohs was an excellent treatment for skin cancer on delicate parts of the body.

“When we’re treating areas such as the lips, eyelids, fingers and ears, we need to take extra care to preserve the healthy tissue and minimise scarring, whilst still removing all the cancer,” Dr Freeman said.

“The roots of the skin cancer may extend beyond the visible portion of the tumour so if the roots are not removed, the cancer could recur.”

“The reconstruction is as important as the removal of the cancer, especially on the face. The Mohs technique allows a precise removal of the cancer, which is important because every millimetre of tissue you lose on the face makes a difference,” he said.

Pindara Private Hospital Chief Executive Officer Mark Page said The Skin Centre was again leading the way with increasing the range and types of health care services Gold Coasters can access in their own community.

“Previously locals would have travelled to Brisbane or interstate for this treatment, so we are thrilled to offer this procedure in conjunction with Dr Freeman at Pindara Private Hospital,” Mr Page said.

“We enjoy such a wonderful outdoors lifestyle here on the Gold Coast and for locals who need treatment for skin cancer, it’s reassuring for them to know they can access a range of treatment options right here.”

The Mohs procedure is performed under local anaesthetic or sedation and specialists analyse the removed tissue while the patient waits. The steps are repeated until the cancer has been removed.

Patients get their results on the day, meaning they don’t have an anxious wait to discover if their cancer is gone.

For more information visit www.theskincentre.com.au



Breast Health Understanding - the next step to greater awareness?

In the past, breast cancer has existed as a matter of taboo and embarrassment, which meant early detection and diagnosis was rare. However, over the years, the involvement of more women and actively bringing out the disease in the open has brought about a revolution against breast cancer. The introduction of breast screening programs in the 1990s sent breast cancer detection and treatment on a trajectory that has seen exponential improvements in treatment, diagnosis and prognosis. In addition, breast self-examination became a public health push that has contributed to managing breast cancer.

According to the McGrath Model of Care, the recent shift from breast self-examination to being “breast aware” isn’t enough. We need to go one step further to “breast health understanding”. Breast health understanding, as quoted from McGrath Model of Care, “means being aware of the importance of breast health, having confidence in recognising changes in your breast, knowing the risk factors of breast cancer, and learning how to complete your regular health checks”.

Breast Cancer Awareness Month which commenced October 1, is an excellent opportunity to create a space to remind all Australian women about putting their health and well-being first. Breast health understanding in the clinical setting, therefore, becomes a matter of education and health promotion. The four pillars of breast health understanding promoted by the McGrath Foundation are **Awareness, Confidence, Knowledge, Behaviour**.

Awareness: Being “breast aware” is about being familiar with your breasts, knowing how they look and feel and knowing what is normal for you. According to the McGrath Foundation, three-quarters of Australian women believe they are breast aware, only 16% having the appropriate knowledge and skills. This notable gap between being aware and possessing the skills and knowledge to act provides us as clinicians insight on how a new generation of women and men with greater awareness can be built.

Confidence: Confidence is key to identifying any changes that may indicate breast cancer. Confidence comes with experience through regular breast checks, knowing what to look for, and reporting any changes. Therefore, promoting breast self-examination and education of reportable changes is of great importance to all patients, especially non-screening eligible groups.

List of reportable symptoms:

- a new lump in your breast or underarm
- thickening or swelling of part of your breast
- irritation or dimpling of your breast skin
- redness or flaky skin in your nipple area or your breast
- pulling in of your nipple or pain in your nipple area
- nipple discharge other than breast milk
- any change in the size or the shape of your breast
- pain in any area of your breast (bcna.org.au)

Knowledge: Knowledge of reportable changes, risk factors for breast cancer and myths about breast cancer can help lead to early diagnosis and better outcomes. There are many tools available to calculate risk for breast cancer, and while some, such as family history, are not modifiable, some are. Every woman should learn about these to understand her own risk.

Behaviour: Promoting the habitual behaviours of self-breast checks and breast screening are key to early diagnosis. Self-breast examinations at the same time each month can alert women to changes in their bodies that require a medical exam. For example, a woman with a breast lump, pain, or nipple discharge should be examined and referred to a private radiology department for diagnostic mammography. Breast screening of asymptomatic women aged 50 to 74 years every two years targets those at higher risk, detecting early disease.

The introduction of “understanding breast health” to a rapidly evolving approach to the management of breast cancer is timely for a proactive, knowledge-rich generation. Conversations can contribute to awareness, knowledge, confidence, and healthy behaviour. Empowering our patients with breast health understanding is a step closer to increased awareness in the community, naturally manifesting as early detection, diagnosis and treatment. Early detection remains the best chance of survival.

Julie Gault
Breast Care Nurse

CancerCare

Receiving a diagnosis of cancer can be daunting. But choosing a cancer service for treatment doesn't have to be. Pindara Private Hospital offers the best in personalised cancer care.

With a treatment plan tailored to our patients needs and a network of coordinated support services under the one roof, our experienced team is ready to help along every step of the cancer pathway.



CancerCare Navigator

We help our patients keep track of all the cancer wellness services they are participating in with the help of a CancerCare Navigator – a dedicated, specialist nurse who coordinates all aspects of cancer care. They are an easy to reach point of contact, with all the information patients could need and support they could want.



CancerCare ACTIVATE

The multidisciplinary CancerCare ACTIVATE program is specially designed for people who have experienced a decline in functioning and quality of life as a result of cancer treatment.

ACTIVATE combines education, exercise and support in a small group setting for two hours, twice a week for six weeks. The program aims to boost our patients ability to enjoy an active and fulfilling life.



CancerCare Specialties

Different types of cancer require different types of treatment. We specialise in treating a wide range of cancers including but not limited to:

- Blood (lymphoma, leukaemia & myeloma)
- Bowel & colorectal
- Breast
- Lung & mesothelioma
- Melanoma & skin cancer
- Urological (including kidney, bladder, testicular & prostate)



Scan QR Code
to view our
specialists



Integrated Cancer Care making a positive difference for cancer patients

Ramsay's Integrated Cancer Care program is helping thousands of patients navigate their cancer journey from diagnosis, right through to treatment and recovery.

The Cancer Care Service Line partners with Ramsay hospitals, Ramsay Health Plus, rehabilitation services, Ramsay Connect and Ramsay Psychology to provide cancer patients with a personalised pathway for their treatment and recovery, both in and out of hospital.

Under the Integrated Cancer Care model, patients are assessed for their navigation needs and most patients are assigned a Cancer Care Navigator who can help them to develop a plan, connect with their clinical team and answer any questions or concerns they may have from diagnosis, through treatment and beyond.

Doctors also enjoy easy access to multidisciplinary teams at the right time, and can rest assured their patients are being supported during and after their diagnosis and treatment.

Ramsay Health Care's Cancer Director Sue Sinclair said the Integrated Cancer Care program was achieving excellent results.

"Since the Integrated Cancer Care model was implemented in April 2020, our patients have reported a 39% decrease in anxiety and depression scores from diagnosis through to the end of their treatment," Ms Sinclair said.

"Our Cancer Care Navigators are guiding patients through that clinical pathway and helping them access services, such as physiotherapy or psychology, at a time that's best suited to their needs.

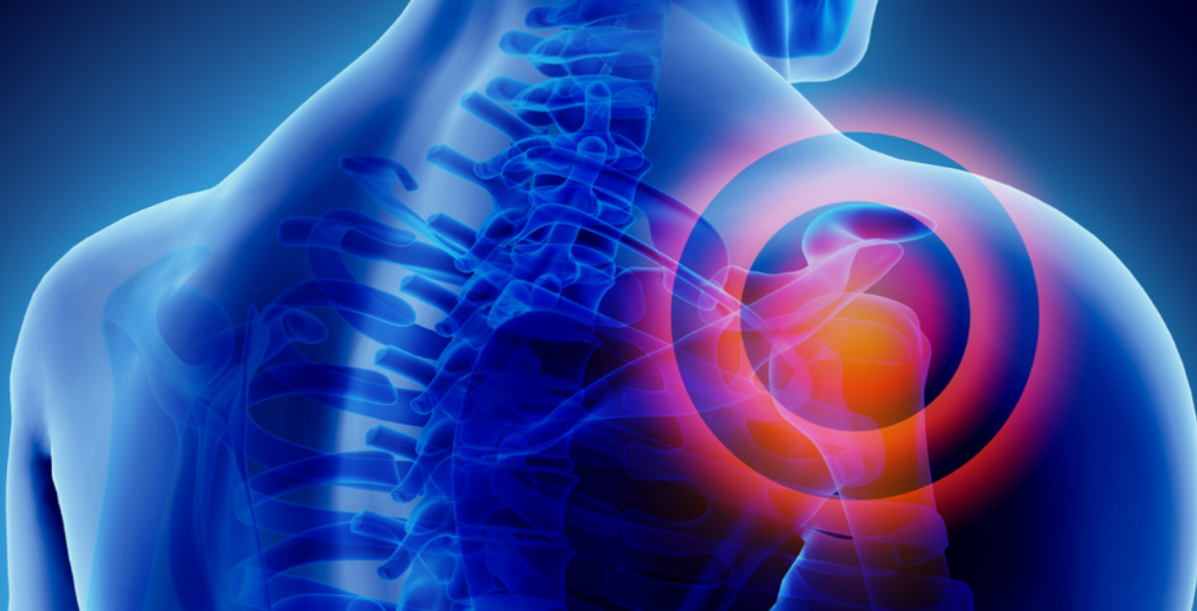
"We know being diagnosed with cancer can be one of the most challenging and daunting times in a person's life - so it's wonderful to see that our navigators are helping them through that difficult period," she said.

As the largest private provider of cancer care in Australia, Ramsay Health Care has a large network of cancer services. Ramsay Health Plus has incorporated an exercise and nutrition pathway as part of cancer treatment, while patients with more complex needs can access the ACTIVATE Day Rehabilitation reconditioning cancer program, where they're supported by a multi-disciplinary allied health team and small group therapy.

A pilot program is nearing completion where patients have been able to take advantage of Ramsay Connect's phone-based program to transition from acute cancer care to community care. This includes health coaching and up-skilling patients to effectively manage their own chronic care needs. The evaluation is underway and early results with improvement in patient's self-care and confidence in managing their needs.

Ramsay Psychology also provides face to face or Telehealth consultations for patients with moderate levels of anxiety and/or depression.

Patients accessing the Integrated Cancer Care model have reported improvement in their mobility, self-care, pain and discomfort levels and their overall health through the ACTIVATE program.



Investigations for Patients with Shoulder Pain



Patients who present with significant shoulder problems often warrant further investigation particularly if they have had symptoms for over 3 months. The following is a guideline for investigating shoulder problems.

Plain x-rays.

Although very simple this is an extremely important investigation. It is the best modality to diagnose arthritis. Any patient who presents with restriction in the passive range of motion usually has a diagnosis of either frozen shoulder or arthritis. An x-ray will determine which of these two is likely. X-rays in a patient with frozen shoulder are usually normal and of course those with arthritis clearly show degenerative disease. X-rays are also very useful for acute calcific tendinitis.

This is particularly important in someone who presents with marked shoulder pain with a very short duration of onset (often waking with severe shoulder pain). Serial x-rays will show resolution of calcium in cases where the calcium is being resolved. Plain x-rays also help to diagnose subacromial spurs which are common in rotator cuff disease.

Ultrasound

Unfortunately, ultrasounds are inaccurate unless performed by someone with specific expertise in musculoskeletal imaging. Ultrasounds have largely been superseded by MRI scans.

MRI

This is an excellent investigation for shoulder problems. It gives a very accurate assessment of rotator cuff tears. It also shows acromioclavicular joint disease, but it should be noted that this condition is often asymptomatic and simply represents age related change. It is not an ideal investigation for arthritis with plain x-rays being preferred. It is also not particularly accurate for label tears unless an MR arthrogram is performed.

CT scan

CT scan is useful in several situations. In patients with proximal humerus fractures it is important to determine if surgery is indicated. It is very important in investigation of patients with shoulder dislocation. A CT scan may demonstrate the presence of a bony Bankart lesion (a fracture of the anterior glenoid). In patients with such a lesion an open stabilisation such as a Latarjet procedure is often required rather than an arthroscopic procedure. CT scan is also used to investigate patients with arthritis when it is used to plan shoulder replacement surgery.

Bone scan

Bone scan is not often required but maybe used as a screening tool in people with an unusual presentation. Conditions such as metastatic disease or occult fractures may be diagnosed by a bone scan.

Blood tests

These are indicated in the case of suspected infection with CRP, ESR and full blood count being the most important tests. Blood tests are also useful in diagnosing polymyalgia rheumatica or rheumatological conditions such as rheumatoid arthritis. Patients will often present with bilateral shoulder pain without a definite history of trauma. An inflammatory arthropathy screen is appropriate in such situations.

Other Investigations

Cervical spine disease may present with shoulder pain. Cervical spine x-rays and an MRI may be indicated if a neck problem is suspected.

X-ray shows marked arthritis of the shoulder with complete loss of joint space and a loose body lying anterior to the neck of the humerus.

X-ray showing an anatomic shoulder replacement. A short metal stem is seen in the humerus. This is combined with a ceramic head. The outline of the plastic glenoid can be seen on the left of the image with two small metallic dots indicating the pegs which are drilled into the bone to secure the component.

Dr Terry Hammond,
Orthopaedic and Shoulder Surgeon



Is your patient suffering from joint pain or a sports injury?

Let's help them get back to the life they love.

We perform over 5000 orthopaedic procedures every year, including arthroscopic elbow, arthroscopic shoulder, hand and wrist procedures, to foot and ankle surgery and total hip, knee & shoulder replacements.

We offer streamlined and collaborative services to ensure our patients receive prompt imaging, diagnosis and treatment across both common and complex cases. With the very latest in computer navigation, 3D imaging & robotics, intensive care unit, multidisciplinary medical, surgical and nursing care as well as onsite physiotherapy; our facility aims to provide patients with the highest level of care possible.

Our Emergency Department is also open 24/7 where presenting patients will receive immediate assessment, treatment and referral to a specialist.



To view our
Orthopaedic
Specialists, scan here



Rehabilitation Services at The Southport Private Hospital

Our comprehensive array of day and in-patient programs are designed to help our patients recover to assist them in returning to leisure, work or other lifestyle pursuits.

With an expert team of multidisciplinary allied health professionals, lead by rehabilitation specialists our facilities include a 44-bed rehabilitation unit, indoor heated hydrotherapy, fully equipped and spacious gym, Ramsay Health Plus Outpatient Clinic, free and secure onsite parking plus café onsite.

In-patient Programs

- Amputee Program
- Cardiac Rehabilitation Program
- Neurological Rehabilitation Program
- Orthopaedic Rehabilitation Program
- Reconditioning Rehabilitation Program

Day Programs

- Neurological Rehabilitation Day Program
- Orthopaedic Rehabilitation Day Program
- Reconditioning Rehabilitation Day Program

Patients can be referred following assessment by their General Practitioner and will be admitted under the care of a rehabilitation specialist.



To view our
programs,
scan here



To view our
Rehabilitation
Specialists,
scan here

The Southport Private Hospital

21 Spendelove Avenue, SOUTHPORT QLD 4215

Ph: (07) 5671 8000

southportprivate.com.au



**Pindara
Private Hospital**
Part of Ramsay Health Care



Heal your mind, **Heal your body**

In the hustle bustle of our lives, in this fast pacing world, we're losing the humane personal connections. The power to connect and communicate is actually the basis of a doctor-patient relationship.

We need to understand that our brain/mind controls it **ALL** – our emotions, needs, physical and mental symptoms and **PAIN**.

Chronic pain remains an unmet need. Even in 2022 modern scientific era, where medicine has made immense progress, chronic pain remains a challenging problem.

Millions of patients are suffering and looking for a cause and cure, even after multiple tests, scans, doctors' visits, prescriptions. Chronic pain/suffering presents in various forms – such as chronic headaches, fibromyalgia, chronic fatigue, chronic pain, stress and anxiety.

These symptoms are possibly triggered by a stimuli – internal or environmental, it could be a minor trauma. Most of the times cause remains unknown but what may follow is a cascade of neurochemical storm which activates millions of neurons secreting neurochemicals, trying to forget the symptoms.

In reality, brain/mind then get focused, we may say obsessed with these symptoms, trying to find an answer and a solution – possibly **MIND OVER MATTER**.

The real challenge is to understand this concept and we take control of our **MIND/BRAIN**. We control it, rather than it controlling us.

To deal with chronic pain and symptoms most important is to **STOP THE QUEST**. Instead direct this energy, and use it somewhere else – **DISTRACT YOUR MIND**. Change the focus from negative to positive. It won't be easy or quick, it, may take weeks, months or even years, however if persistent then it will certainly be rewarding.

Your **BRAIN** is your **POWER TOOL**, your car, your machine. You need to drive it to the destination of your choice. Pace yourself, learn to relax, keep your mind engaged, meet friends, go outside, do exercise, listen to music, dance, watch movies or have a cuppa. Try to indulge in small pleasures of life.

**Body will heal
When brain is healed.**

Dr Meena Raj,
Neurologist

Introducing Ramsay

We are excited to unveil our new brand Ramsay Mental Health. Our new name and refreshed look represents the evolution of our mental health brand over the last five decades. While the logo may have changed, our core belief system of people caring for people remains the same.

As the largest private provider of private mental health care in Australia, Ramsay Mental Health is dedicated to making a real difference in the lives of those we treat.

Ramsay Clinic Gold Coast

Previously known as The Southport Private Hospital, the newly named Ramsay Clinic Gold Coast continues to provide comprehensive mental health services to the Gold Coast and wider community.

Our mental health service offers inpatient programs for youths (from 16 years of age) and adults requiring treatment for mood, anxiety, personalities disorders and alcohol dependency. We also offer neurostimulation services and a comprehensive range of day and community programs.

We are **the only private Electroconvulsive Therapy (ECT) provider on the Gold Coast** saving our community from having to travel to Brisbane for this service.

Our multidisciplinary team is dedicated to providing holistic care underscored by the best available, evidence-based psychiatric and psychological treatment.



To view our
Psychiatrists,
scan here

Ramsay Clinic Gold Coast

21 Spendelove Avenue, SOUTHPORT QLD 4215

Ph: (07) 5671 8000

ramsaymentalhealth.com.au

Mental Health



Ramsay
Mental Health

Ramsay *Psychology*



New dedicated, outpatient, psychology service

Phone 1300 171 715 | Fax 1300 171 786 | enquiries@ramsaypsychology.com.au

Ramsay Psychology is committed to giving you and your patients easy access to a psychologist for a wide range of mental health presentations experienced by adolescents, adults and older persons including:

- Mood disorders including Depression
- Anxiety
- Perinatal, antenatal & postnatal depression & anxiety
- Substance misuse & addiction
- Trauma & PTSD
- Stress & burnout
- Adjustment disorders
- Interpersonal & family difficulties

Why Ramsay Psychology

Referrals are easy. You can simply address your referrals to Ramsay Psychology Gold Coast. Or if you prefer, to a specific psychologist at the practice.

We match patients and psychologists carefully. We have a triage service to match your patients with a psychologist whose experience best suits their needs.

Extra support is available. If your patient needs outpatient psychology services outside of our onsite psychologists' experience, we have an extensive team of psychologists available via telehealth to offer support to patients.

Access is flexible. We offer both face-to-face and telehealth appointments for the convenience of patients.

We work in partnership with you. We keep you in the loop, providing regular patient updates.

Ramsay Psychology Southport

21 Spendelove Avenue, Southport QLD 4215

Ph: 1300 171 715 | Fax: 1300 171 786

ramsaymentalhealth.com.au

People caring for people

Part of Ramsay Health Care. Ramsay Psychology complements the existing inpatient facilities and day programs at The Southport Private Hospital to provide comprehensive mental health care for the whole community.

Referrals and Fees

Ramsay Psychology is taking enquiries now for the Gold Coast practice and the team of experienced psychologists are accepting referrals for patient appointments from January.

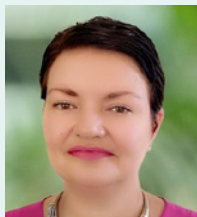
In the meantime, should it be needed, your patients have access to Coffs Harbour Surgical Centre telehealth appointments with the experienced psychologists at the Ramsay Psychology practices in NSW.

A Medicare rebate is available to individuals who have been referred to Ramsay Psychology with a Mental Health Care Plan. We also see clients who are self-funded.



Ramsay
Mental Health

New Faces at Ramsay Psychology Southport



MARGARET CAMPBELL

BA (Soc. Science), PG DIP (Psychology)

Registered Psychologist

Margaret is a Registered Psychologist with extensive clinical experience in a wide variety of mental health presentations. Margaret works with both adolescent and adult clients to manage a comprehensive range of symptoms and conditions including depression, anxiety, mood disorders, psychosis, complex trauma, personality disorders, addiction and substance abuse, emotional and behavioural problems, suicidality and self-harming behaviours. Other areas of expertise include providing care to women who experience Domestic and Family Violence, parenting difficulties and perinatal mental health concerns.

P: 1300 171 715 | F: 1300 171 786 | ramsaymentalhealth.com.au



GARRICK CHATTERJEE

BA(Psych); BSocSci(Hons) Psych; MHRM

Registered Psychologist

Garrick is a Registered Psychologist with a master's degree in human resource management and is passionate about making a positive difference in people's lives. Garrick has worked across clinical and organisational psychology for more than a decade including working with all facets and levels within organisations from executives to the shop floor.

P: 1300 171 715 | F: 1300 171 786 | ramsaymentalhealth.com.au



DRAGOS ILEANA

BSc Psych, MPsych Clin, MAPS, FCCLP

Clinical Psychologist

Dragos is a Clinical Psychologist and Psychotherapist with almost 20 years of experience working in both public and private mental health sector. He has gained experience in working cross-culturally in a wide range of mental health and relationship issues, as well as, in assisting his clients to reach their innate potential and enable personal growth, improved wellbeing and to live a meaningful life.

P: 1300 171 715 | F: 1300 171 786 | ramsaymentalhealth.com.au



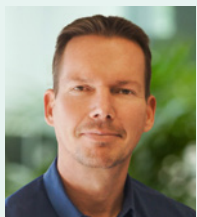
DARREN MOSS

Advanced Grad Dip. Psych Science

Registered Psychologist

Darren Moss is a Registered Psychologist with years of experience working with clients in therapeutic settings, including many years of practice as a Personal Trainer. In his role as a general psychologist, this past experience across both health domains has allowed him to aid his clients in both reinvigorating their lives emotionally and physically.

P: 1300 171 715 | F: 1300 171 786 | ramsaymentalhealth.com.au



STEFAN RETHFELDT

B.Ed. & M.Sc. (Ed.Psych); B.H.Sc. (Honours) & Ph.D. (Psych.); M.Clin.Psych.

Registered Psychologist

Stefan is an experienced senior Clinical Psychologist offering compassionate, collaborative and evidence-based assessment and psychotherapy for individuals and groups. He works from a humanistic and client centred base and tries to make each session as meaningful as possible for each person.

P: 1300 171 715 | F: 1300 171 786 | ramsaymentalhealth.com.au



MOLLY ROBBINS

BSocSc (Psych), BAppSc (Hons), MCLPsych, MAPS, FCCLP

Clinical Psychologist

Molly is a Clinical Psychologist with more than 22 years of experience. Molly has enjoyed working with adults, adolescents and children experiencing depression and anxiety, stress, trauma and grief, workplace issues, anger, parenting and relationship difficulties, health concerns related to injury and illness, as well as bipolar, personality and psychotic disorders. Molly's therapeutic practice integrates Cognitive Behavioural Therapy (CBT) with other evidence-based modalities like Acceptance and Commitment Therapy (ACT) and Mindfulness.

P: 1300 171 715 | F: 1300 171 786 | ramsaymentalhealth.com.au



CATHERINE STOVOLD

Bachelor of Psychology (Hons); Master of Professional Psychology

Registered Psychologist

Catherine is a Registered Psychologist with a particular interest in the assessment and treatment of mental health disorders in the perinatal period, including antenatal and postnatal anxiety and depression. During her training, Catherine developed an interest in attachment theory and the impact of early life experiences on mental health and subsequent interpersonal relationships. She has extensive experience working with parents and carers and has worked with a variety of clients with a trauma background, including developmental trauma.

P: 1300 171 715 | F: 1300 171 786 | ramsaymentalhealth.com.au



Luxury experience resumes for Pindara Private Hospital mums

Pindara Private Hospital is proud to announce its partnership with Palazzo Versace Hotel has resumed, meaning Gold Coast mums can once again be treated to luxury after welcoming their baby into the world from April 19 this year.

The Pindara Palazzo Platinum Package allows women, their partners and new baby to leave hospital and enjoy their postnatal care in a hospital-assimilated environment.

Pindara Private Hospital Chief Executive Officer Mark Page said he was thrilled to once again offer Gold Coast mums the option of staying in five-star luxury after giving birth. The nine-year partnership had to be temporarily paused during the COVID-19 pandemic.

“We are so pleased to recommence our partnership with Palazzo Versace and I have personally had so many Pindy mums ask me when we would be restarting this program, so it’s wonderful to finally be able to say the Platinum Package is back,” Mr Page said.



“This service is an extension of Pindara Private Hospital and is fully supported by our own highly qualified and experienced staff, so our new mums can rest assured that they will have access to a Pindara midwife or maternity nurse at Palazzo Versace throughout the day and evening.”

Gold Coast mum Montana Stenner and her partner, Titans player Ash Taylor, were among the first couples to indulge in the Platinum Package in 2021, having welcomed their second child, baby Hazel into the world on Monday 7th June.

“Hazel is going really well, she’s very relaxed. Our son Oscar is 18 months old and he’s pretty wild so hopefully she’s the chilled one,” Montana said with a laugh.

“This time around we chose to do the Palazzo Versace stay because I think it’s more relaxed than hospital. I was already pretty chilled from the beautiful vibe at Pindara but this is next level,” she said.



Marketing and Communications Manager Frances Scarle said she was thrilled to reignite the partnership with Pindara Private Hospital for the Palazzo Platinum Package.

“We look forward to welcoming mothers and their babies to Palazzo Versace for an opulent and tranquil stay as part of the transition between leaving Pindara Private Hospital and returning home,” Ms Scarle said.

“From the moment new parents enter the grand lobby, the Palazzo Versace team will be at their service to ensure this precious moment is combined with relaxation, luxurious amenities and the opportunity to enjoy the Versace lifestyle.”



Expect the best when expecting at Pindara Private Hospital

Pregnancy and birth are exciting and challenging events for a family.

At Pindara Private Hospital, we understand this, and deliver the ultimate private maternity experience. **As the Gold Coast's first and most experienced private maternity service** we combine kindness, care and expertise, supporting families through pregnancy, birth and beyond.

- One on one obstetric care from leading Gold Coast specialists
- Unique Know My Midwife program offering the very best in continuity of care
- Private deluxe and parenting and birthing suites
- Platinum Palazzo Versace Package post-natal stay option
- Comprehensive childbirth and parenting classes
- Plus much more



To view our
Obstetricians,
scan here



Innovative surgical technique performed at Pindara Private

Pindara Private recently became the site of the first vaginal natural orifice transluminal endoscopic surgery (vNOTES) procedure to take place on the Gold Coast. This novel procedure combines the best of both worlds where endoscopic surgery can be performed via the vaginal approach.

This innovative procedure allows surgeons to access the intraperitoneal cavity following insertion of a device vaginally. After placing the ports, pneumoperitoneum is then achieved, allowing surgeons to visualise the uterus, fallopian tubes and ovaries without difficulty thus performing conventional laparoscopic surgery through the vaginal port itself. This facilitates completion of the surgery with precision and safety.

The first few hysterectomies with bilateral salpingo-oophorectomies were performed by Dr Vivien Wong at Pindara Hospital. "The vNOTES approach has allowed access to the adnexa and has given me, as a urogynaecologist, an ability to perform hysterectomy with bilateral adnexal surgery at the time of prolapse repair without any incisions on the abdomen," Dr Wong said.

vNOTES has been adopted all over the world, with studies showing safety and feasibility of performing hysterectomy with bilateral salpingectomy, salpingo-oophorectomy or ovarian

cystectomy with significantly less operating time, shorter hospital stay and less estimated blood loss. There was no difference when compared to conventional laparoscopy in intra- and postoperative complications, readmissions or analgesic requirements.

"Aftercare is equally important as the surgery itself, and with vNOTES our patients will not only have shorter operating time, and reduced use of medication, they will also notice that their pain is more manageable, which means they are back on their feet quicker," said Dr Wong.

When adopting the vNOTES approach, some re-orientation is required but is not difficult for most gynaecologists who perform laparoscopic work. The bottom-up approach is very similar to the traditional vaginal route, but now just with a much clearer and unobstructed surgical space.

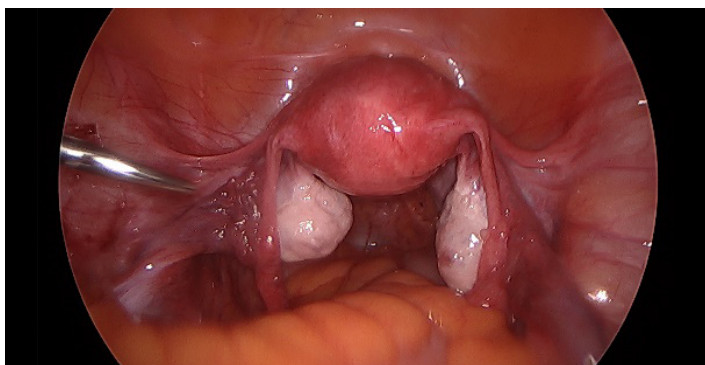
As this surgical technique gains in popularity, what is certain is that this less invasive approach will deliver benefits of improved safety and outcome for both patients and surgeons. It is indeed a leading-edge approach, thus expanding a surgeon's armamentarium when treating their urogynaecological patients.

Dr Vivien Wong
Urogynaecologist

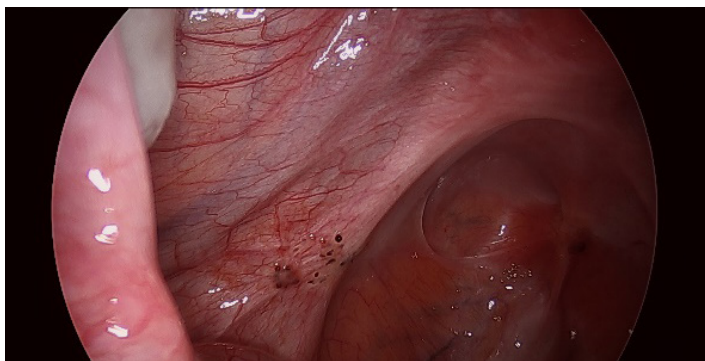


Endometriosis review and update:

Endometriosis is a common condition where endometrial tissue (glands and stroma) is found ectopic to the endometrial cavity. Endometriosis can be diagnosed via laparoscopy on the peritoneum in the ovarian fossae, uterosacral ligaments and Pouch of Douglas, but can be found anywhere in the pelvis and rarely outside of the pelvis including the pleural cavity and diaphragm. Adenomyosis is endometrial tissue in the muscle layer of the uterus. If a patient has endometriosis she has a 20% chance of adenomyosis. Endometriomas in the ovaries, which may be diagnosed with Ultrasound, can be markers of severe disease.



Normal Pelvis



LJUSendo

There are a lot of theories on the pathogenesis of endometriosis including Sampson's theory of retrograde menstruation, the theory of mullerianosis and defective embryogenesis, cellular metaplasia and more recently neonatal uterine bleeding with stem or progenitor cells.

Women with endometriosis can often have a delay of diagnosis for up to seven years, often suffering with chronic pelvic pain. Endometriosis can present clinically with dysmenorrhea, pelvic pain, dyspareunia, dyschezia, dysuria or infertility. A high index of suspicion is important. Initial management can include a pain diary, simple analgesia (NSAID's) and hormonal management. The oral contraceptive pill has good evidence for symptom management and preventing disease progression or disease recurrence.

Work up should include an ultrasound. Superficial peritoneal disease is difficult to assess, but endometriomas, obvious nodules and negative sliding sign are a good indicator of severe disease. MRI and tertiary level dedicated Ultrasound are particularly useful in detecting deep infiltrating endometriosis.

Laparoscopy has long been regarded as the Gold Standard for diagnosis and management. Excisional surgery by specifically trained specialists rather than ablation is more beneficial for histological diagnosis, reduced recurrence and improved symptoms in deep infiltrating endometriosis. Recurrence rates depend on underlying genetics as well as resection technique, age at resection, ovarian suppression post and severity of disease.

In my practice at GC SHE Health we offer management for endometriosis and infertility which in 50% women will go hand in hand. If you have any questions on Endometriosis please don't hesitate to contact us.

Dr Abigail Evans

Embryologist
Bsc, MBBS, FRANZCOG





The **Penicillin Allergy De-Labeling** in **Paediatric OutPatients (PADLPOP)** study is underway at Pindara Private Hospital

Approximately 10% of the population report having a penicillin allergy. However, most penicillin allergy labels remain unverified and are unjustified. In fact, over 90% of patients reporting a penicillin allergy are able to tolerate penicillin when testing is undertaken.

Penicillin allergy labels are associated with poorer patient outcomes, contribute to the challenge of managing antimicrobial resistance and have significant health economic implications. The importance of this issue was highlighted in the recent Parliamentary enquiry into allergy and anaphylaxis. Submissions described an “urgent need to de-label patients from their unproven drug allergies” as well as the difficulties with accessing these services which were acknowledged as being “rarely available” in the public setting.

To address this unmet need Paediatricians at the Leading Steps Paediatric Clinic in conjunction with the Pindara Hospital Emergency Department, Pindara Clinical Trials Unit and Pindara Pharmacy have developed a de-labelling service for children who are at ‘no risk’ (e.g. avoiding because of a family history or gastrointestinal side effects) or ‘low risk’ (a benign rash without any high risk features) of having a true penicillin allergy.

In 2020 The Australian Society for clinical Immunology and Allergy (ASCIA) released a consensus statement for the

assessment of patients with suspected penicillin allergy. This provided recommendations for the risk stratification of patients labelled as penicillin allergic and guidelines for the community assessment of patients identified as ‘no risk’ or ‘low risk’ of a true penicillin allergy.

The PADLPOP study will assess the implementing the ACSCIA guidelines into the private secondary care setting i.e., clinical assessment with a general paediatrician and oral provocation testing in the emergency department at Pindara Private Hospital. The study aims to verify that general paediatricians/emergency physicians can safely assess, risk stratify and undertake oral provocation challenges in children presenting with ‘no risk’ or ‘low risk’ histories for penicillin allergy. The study also aims to demonstrate that Penicillin allergy testing is cost-effective with a health economic evaluation of the data.

Participants and their doctors will be provided with clear documentation verifying allergy status as well as guidance as to which antibiotics can be safely used in the future. This will ensure that treating doctors are able to prescribe antibiotics which support best clinical practice.

Importantly, there is no cost to participants and they do not need to have private health insurance.



Inclusion criteria

- Parent reported allergy to penicillin
- Age 1-16 years
- Parent or legal guardian able to provide informed consent

Exclusion criteria

- History consistent with a 'high risk' of a penicillin (rash with the last year or angioedema and/or systemic symptoms or unknown history).
- Pregnancy.
- Significant immunosuppression due to medical treatment including daily oral steroids exceeding a dose of 0.5mg/kg.
- Any unstable medical condition which in the opinion of the investigator will place them at increased risk should a serious adverse event occur e.g. brittle asthma or heart failure.

Eligible patients wanting to participate in the study require a referral. Referrals should be addressed to Dr Amy Whittaker, Leading Steps Paediatric Clinic.

If you or your patients wish to find out more about the study, please see <https://leadingsteps.com.au/penicillin-allergy-study> or contact the clinical trials unit on **07 5588 9702**.

Private access to the best in an Emergency

Accidents and emergencies happen anywhere, anytime and when they do it is good to know after-hours Gold Coast emergency care is available 24 hours a day, 365 days of the year through the Pindara Emergency Department.



To view live emergency waiting times, scan here



Wait time

For our patient's convenience there is a live **emergency wait time clock** on our website providing an estimated expected wait time and number of people currently waiting – perfect for patients who want to be seen quickly and promptly.



Specialities

At Pindara, emergency cardiac situations receive rapid access straight to our Cardiac Catheterisation Lab via our Emergency Centre where a team of experts are on hand 24/7 to diagnose, treat and manage these conditions as fast as possible.



Fees

Patients do not need to hold private health insurance to attend our emergency department and no appointment is needed. Some out-of-pocket costs are applicable to patients, regardless of level of private health cover.

GP Hotline Call 07 5588 9000





Pfizer vaccination associated chest pain on the Gold Coast.

Over the past few months cardiologists across the Gold Coast have noted a number of patients with chest pain after the Pfizer mRNA vaccination. I've had 20 referrals across John Flynn and Pindara in the past 6 weeks. This rate seems to be out of keeping with the US reported rates of Pfizer vaccine-induced myopericarditis of 2.7 per 100,000, and may be more closely aligned to an Israeli cohort study of 1 in 6000. To that end I thought it may be helpful to cover what we know including the new Cardiac Society of Australia and New Zealand (CSANZ) guideline on this.

Clinical Presentation

Patients are typically young males under 30 with women 10 times less likely to be affected. Symptoms usually come on between 1 and 5 days after the vaccine with 76% of cases occurring after the second dose. These patients present variably ranging from chest pain or shortness of breath with no ECG changes or troponin rise to those with classic diffuse saddle shaped ST elevation and PR depression on their ECG, elevated troponins and even minor LV dysfunction. Patients with previous chronic heart failure or coronary

artery disease do not have higher rates of vaccine induced cardiac issues and these are therefore not a contra-indication to Pfizer vaccination.

Management

Fortunately, this appears to be almost universally benign illness that improves over days to weeks. There have been 2 cases worldwide where a fulminant myocarditis has developed, and one mortality, but none of these three cases have been definitively proven to be vaccine-induced. The vast majority of cases are mild. Those with normal ECG's and troponins should be advised to avoid strenuous exercise until the resolution of symptoms and to return for assessment within 48 hours if ongoing symptoms. Those who have ongoing symptoms or ECG/troponin abnormalities require referral to a cardiologist for an echo and evaluation.

Advice for patients

To put this into context, patients have a 2.7 per 100,000 chance of developing a mild, largely self-limiting myo/pericarditis post Pfizer vaccination. This is compared to high rates of multiple serious adverse events

from COVID infection which includes a 11 per 100,000 risk of developing peri/myocarditis post COVID infection. COVID-induced peri/myocarditis on the other hand has a mortality rate of 3.9%. Regarding patients who develop these symptoms after their first dose, there is no clear evidence regarding what to do with the second dose. CSANZ guideline suggests either avoiding mRNA vaccinations entirely and taking an alternative such as AstraZeneca/Novavax or deferring the second dose by at least 6 months.

I hope this article has provided some guidance, the CSANZ guideline can be accessed at https://www.health.gov.au/sites/default/files/documents/2021/09/covid-19-vaccination-guidance-on-myocarditis-and-pericarditis-after-mrna-covid-19-vaccines_0.pdf

If you would like to discuss this further or have a specific clinical query in mind, as always please feel free to reach out to me via my mobile or willp@cardiac-centre.com.au

Dr Will Peverill
Cardiologist

Flexibility, mobility, recovery

Ramsay Health Plus Southport is conveniently located at The Southport Private Hospital and provides a range of allied health services in one location.

Ramsay Health Plus Southport offers a specialised women's, men's and pelvic health clinic. Our team of allied health professionals provide high quality, personalised care based on scientific evidence for a wide range of conditions, with a focus on women in their childbearing years and men and women suffering from incontinence, pelvic pain, or bladder and bowel dysfunction.

Services

- Hydrotherapy
- Physiotherapy

Treatments

- Cancer Rehab
- Pre and Post Surgery
- Pregnancy and Women's Health

21 Spindelove Avenue, SOUTHPORT QLD 4215

Ph: (07) 5671 8000

ramsayhealthplus.com.au



plus



Ramsay

health

plus

CardiacCare

Ramsay CardiacCare services offer patients the gold standard in cardiac care, supporting patients through diagnosis, treatment, and recovery.

From emergency cardiac assistance to ongoing chronic cardiac conditions, our leading multidisciplinary team are here to ensure patients receive the best treatment and support possible.



Emergency CardiacCare

At Pindara, emergency cardiac situations receive rapid access straight to our Cardiac Catheterisation Lab via our Emergency Centre where a team of experts are on hand 24/7 to diagnose, treat and manage these conditions as fast as possible.



Chronic Heart Conditions

Our multidisciplinary team of experts will help manage symptoms, medications and optimal wellness assisting patients in regaining their independence and quality of life.



Facilities

Our state-of-the-art diagnostic services, Cardiac Catheterisation Lab and theatres at Pindara enable our specialists and multidisciplinary team to provide comprehensive cardiac care. In addition to our 24/7 emergency department, Pindara cardiac facilities encompass a coronary care unit, an acute cardiac ward, cardiac catheter laboratory, Intensive Care Unit and much more.



To view procedures performed at Pindara scan here



To view our Cardiac Specialists, scan here



Dr Sandra Fang

B.Med Sc, MBBS, FRANZCP
The Southport Director of Psychiatry

Ph: 07 5671 8999

Fax: 07 5671 8990

Areas of Expertise — General Adult Psychiatry, ECT, Mood and Psychotic disorders, Older Persons Psychiatry, Perinatal Psychiatry.



Dr Ajith Navaratne

FRANZCP, MD PSYCHIATRY, MBBS
Psychiatry

Ph: 07 5671 8999

Fax: 07 5671 8990

Areas of Expertise — mood disorders, anxiety disorders, repetitive transcranial Magnetic Stimulation (TMS)



Dr Hany Ghabrash

MBBch, CABMSPsych, ACLP(M), FRANZCP, AMA(M)
Psychiatry

Ph: 07 5671 8999

Fax: 07 5671 8990

anxiety and mood disorders, psychosis, personality vulnerabilities, OCD, mental and physical wellbeing and the impact of relationships and trauma on mental health and resilience.



Dr Sam Mikhael

FRANZCP(AUS), Cert. Old Age Psych. (AUS), AMC Cert. (AUS),
MBBCH (EGY)

Psychiatry

Ph: 07 5671 8999

Fax: 07 5671 8990

Areas of Expertise — Old Age Psychiatry, Anxiety Disorders, Psychotic Disorders, Depressive and Bipolar Affective Disorders, Personality Disorder, and Trauma- related mental health issues including PTSD.



Dr Vineel Reddy

FRANZCP MRCPsych (UK) DCP (Ire) MBA (UK) MBBS
Psychiatry

Ph: 07 5671 8999

Fax: 07 5671 8990

Areas of Expertise — mood disorders, anxiety disorders, psychotic conditions, substance misuse problems, trauma (PTSD), personality disorders and Electro Convulsive Therapy (ECT) a proven alternative treatment for depression.

Mental Health Services include

- Acute inpatient mental health programs for a range of mood and anxiety disorders
- Outpatient day programs for non-acute mental health issues, including group therapy
- Specialists suites adjacent to the Hospital
- Access to a team of highly qualified psychiatrists and psychologists

Ramsay Clinic Gold Coast accepts mental health referrals from other hospitals, medical specialists, general practitioners and self referrals.

For more information call **07 5671 8128** or email practicemanager.tsp@ramsayhealth.com.au

Rehabilitation Unit includes

- 42 bed purpose built rehabilitation unit
- Inpatient and day programs available
- Access to a team of highly qualified rehabilitation allied health staff
- Programs available for orthopaedic, neurological, amputee, musculoskeletal, pain management, arthritis and pulmonary rehabilitation.
- New fully equipped gym and heated indoor hydrotherapy pool
- Patient care is overseen by experienced rehabilitation specialists Dr Benedicte Mancel and Dr Chin Wong

For more information about programs available please call **07 5671 8000**

This is not a comprehensive list of specialists with visiting rights to this Hospital. Please contact the Hospital to establish if your preferred specialist is accredited here.

General Enquiries
07 5671 8128

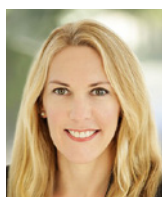
Facsimile
07 5671 8132

Medical Objects
Intake.tsp@ramsayhealth.com.au

General Enquiries
07 5588 9888

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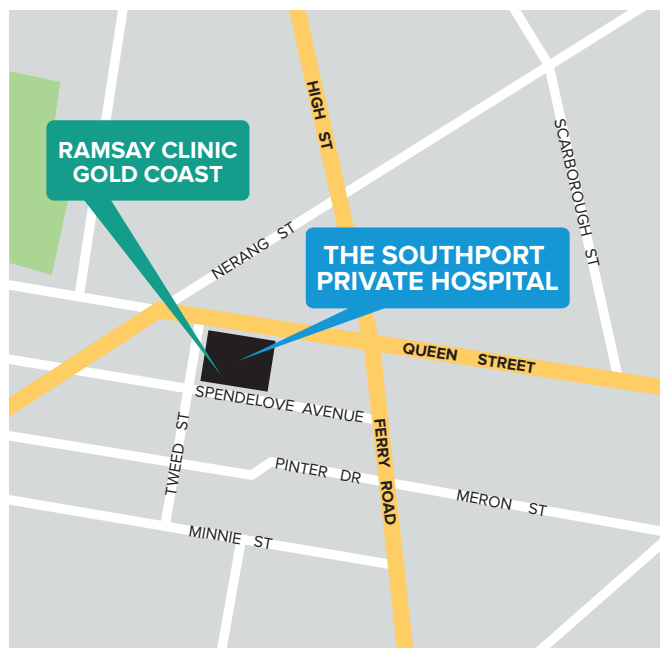
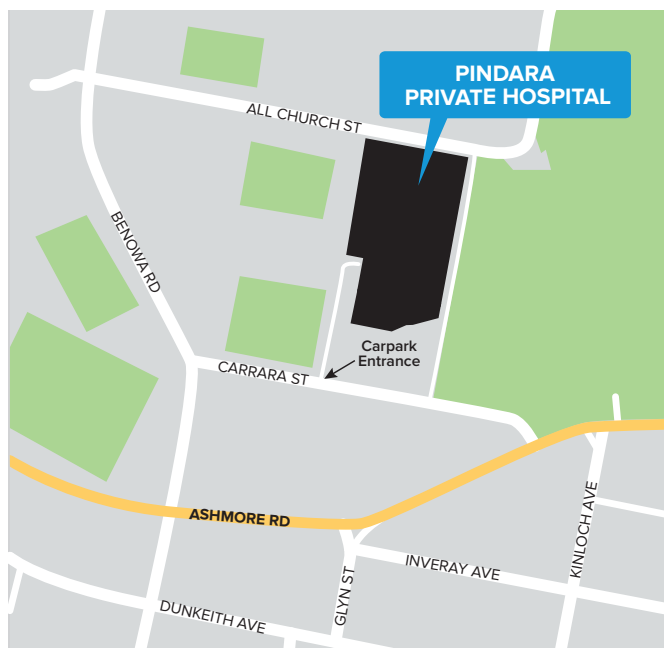
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