



Queensland Government

Queensland Health

Fraser Coast Health Service District.

TO:

Dr Morgan Naidoo.

FROM:

Dr Terry Hanelt.

DATE:

13/11/2003.

SUBJECT:

Orthopaedic services.

Due to the ongoing media and AOA attention to Orthopaedic Services within this District and in particular the services provided by the Senior Medical Officers in Orthopaedics, I need documentation in relation to the following as a matter of urgency—

- How the competencies of the SMO's have been assessed.
- What conditions they have been assessed as competent to manage independently.
- What conditions they have been assessed as requiring advice on management.
- What operations they have been assessed as competent to perform independently.
- What operations they have been assessed as requiring supervision.
- What complications that must be discussed with an Orthopaedic Surgeon prior to continuing treatment.
- Who is to be contacted when an Orthopaedic Surgeons advice/assistance is required. This will
 vary depending on whether it is a regular working day or at night or a weekend; whether you are
 on leave or not etc.
- How each of the nominated medical Officers and specialists is to be contacted.
- What forms of audit processes are in place and who participates in the audits.

Dr Terry Hanelt
Director of Medical Services
Fraser Coast Health Service District

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G:\DMS\SERVICES\ORTHO\SMO scope of services.doc

Please refer to the attachments detailing SMO Scope of Service for each of the SMO's. All complications must be discussed with an Orthopaedic Surgeon regardless of whether the SMO is capable of managing the complication.

On a regular working day except for when I am on leave, I should be contacted whenever advice/assistance is required. In my absence the relieving/locum orthopaedic surgeon should be contacted. In the event the there is no relieving/locum orthopaedic surgeon then the duty orthopaedic surgeon at Nambour, Royal Brisbane or Princess Alexandra Hospital should be contacted.

The issue regarding consultant availability for advice/assistance when the SMO's are oncall alone after hours on a weekday and weekends is yet to be resolved. Contact with myself is through my pager or mobile phone as is the current practice.

An orthopaedic meeting is held each Tuesday between 1000 - 1200 and is attended by the two SMO's from HBH and the RMO from HBH & MBH. Dr Khursandi and Dr Padayachey are unable to attend due to theatre commitments in MBH. At the meeting the files of patients admitted the previous week are reviewed, DRG's assessed and an audit in regard to complications, morbitity/mortality and outcome completed. Patients scheduled for elective surgery that week are also discussed. The SMO's present cases/x-ray's that require an opinion/assistance.

In addition the SMO's, RMO's and theatre staff associated with orthopaedics attended regular workshops related to equipment that they frequently use in orthopaedics. These workshops are sponsored by various companies and the product representative conducts training sessions on use of the equipment. The VMO's associated with FCHSD have always been invited to the sessions, but to date have not attended a single session, even on three occasions when we had reputed international surgeons giving lectures and doing surgery. It is relevant to note that on one of these occasions when we had an international surgeon presenting one of the VMO's from Nambour Hospital made time to attend the presentation and surgery.

Regards,

Dr Morgan Naidoo Director of Orthopaedics Fraser Coast Health Service District

16th January 2004

Dr Damodaran Krishna commenced duties in the Fraser Coast Health Service District as a SMO in Orthopaedics on the 22nd July 2002.

Prior to this he was employed as a PHO in Orthopaedics at Toowoomba Hospital. Together with another PHO and a Training Orthopaedic Registrar in Orthopaedics he provided services required of a registrar in Orthopaedics in Toowoomba Hospital. In this position he conducted Fracture Clinics, Orthopaedic Outpatient Clinics, and Elective Surgery with consultant supervision and participated in the emergency service for Orthopaedics on a one in three roster. Although there was a consultant on-call Dr Krishna did approximately 90% of the emergency procedures on his own without consultant supervision. The range of procedures is similar to that outlined in his scope of service at FCHSD. He was well regarded by my colleagues at Toowoomba Hospital, some of whom worked for the as a registrar when I was a consultant in Brisbane. He was appointed with excellent references from the Orthopaedic surgeons he worked with in that area.

Dr Krishna is a diligent and caring doctor and has conducted biasself in an exemplenary manner; establishing good rapport with patients and staff alike. He has discharged his clinical duties and responsibilities in manner consistent with his references. He has expressed and demonstrated willingness to participate in junior doctor and post graduate training.

In making a recommendation with regard to Dr Krishna's scope of service I have taken in to consideration his CV outlining his previous experience, discussions and references from my Orthopaedic colleagues from Toowbornia General Hospital, viscosion of his clinical and surgical practice and Orthopaedic Audits.

Dr Krishna is acutely aware of his limitations and level of competence. I have full confidence in his ability to adequately assess and deliver a management plan when ever he is on-call as an SMO.

Dr Morgan Naidoo Director of Orthopaedics Fraser Coast Health Service District

15th January 2004

ELECTIVE ORTHOPATRIC SURGERY.

DR KRISHNA SCOPE OF SERVICE

		_	
	OPERATION	PERFORM Independently	PERFORM WITH SUPERVISION
Rotator Cuff Tendonitis Rupture Simple		~	
Rotator Cuff Tendonitis Rupture Complex	Open Acromioplasty and Cuff Repair		√
Recurrent Anterior Dislocation Shoulder	Open Anterior Stabilisation Bankart / Putti Platt		~
CTS	CTD / Synovectomy	✓	
Dupuytren Contracture	Excision and Z-plasty	. •	
Ganglion / Bursa / Bakers Cyst	Excision	⊀	-
Trigger Finger	Release Tendon Sheath	1	
Extensor Tendon Rupture Thumb	Secondary Repair / Tendon Transfer	*	-
Implants for Fracture Fixation	Removal	1	
Foreign Body	Removal	✓	
Wrist Arthropathy	Arthrodesis	4	
Fracture Non Unions	Bone Graft	v	
Aciniles Tendon Rupture / Tendonitis	Repair / Debridement		
	Bunionectomy	√	
Hallux Valgus	Metatarsal Osteotomy with IF (Ludloff / Mitchel / Lapidus)	· · · · · · · · · · · · · · · · · · ·	
	MTPJ Arthrodesis	√	
Hammer Toes	PIPI Arthrodesis	✓	
Morton's Neuroma	Excision	V	
Subtalar Osteoarthritis / Arthropathy	Arthrodesis	√	

	OPERATION	INDEPENDENTLY	SUPERVISION
Subtalar / Calcaneo – Cuboid / Talonavicular Osteoarthritis / Arthropathy	Arthrodesis		~
Knee	-		
- Effector	Diagnostic Arthroscopy	*	
- Inferior Oscerzanis	Artimoscopic Debridement		
- Internal Deran general	Arthroscopic Meniscectomy	✓	
- Internal Derangement	Meniscal Repair / Replacement		√
- Interest Decamend	ACL / PCL Reconstruction		✓
Leose Bearies	R/O Loose Bodies		✓
Non Viable / Neuropathic - Faces - Earls - Limbs	Amputation	✓	

Dr Morgan Naidoo Director of Orthopaedics Fraser Coast Health service District

01 January 2004

ORTHOPAEDIC SURGICAL SERVICES DR KRISHNA SCOPE OF SERVICE

ORPHOPAEDIC TRAUMA

`	OPERATION	PERFORM INDEPENDENTLY	PERFORM WITH SUPERVISION
Upper Limb Fractures / Dislocations			
Closed Fracture / Dislocations	Closed Reduction	1	
Compound Fracture / Dislocations	Compound Scraib	4	
Fracture Clavicle	ORIF	4	
ACJ Dislocation	ORIF	✓	·
Sterno Clavicular Dislocation	ORIF		✓
Fracture Proximal Humerus	ORIF	4	
Fracture Shaft Humerus	ORIF with Plate & Screws	✓	
Fracture Shaft Humerus	ORIF with Intransciuliary Nailing anterograde / retrograde		✓
Compound Fracture	Compound Scrub / External Fixateur	✓	
Fractures Around Elbow			
Medical Epicondyle	ORIF	4	
Lateral Condyle	ORIF	₹	
Radius Head	ORIF / Excision	✓	
Supracondylar	Percuraneous K wires	✓	
Complex Supracondylar	ORIF		✓
Compound Fracture	Compound Series External Fixaerr		✓
Forearm Fractures			: :
Ulna / Radius / Ulna & Radius	ORIF	✓	
Colles Fracture / Distal Radius Fracture	Percuraneous K Wins	•	
Colles Fracture / Distal Radius Fracture	External Fixateur	•	
Compound Fractures	Compound Scrub / External Fixateur	~	
Wrist Fractures / Dislocations			
Lunate / Peri lunate Fracture Dislocation	Closed Reduction Percutaneous K Wires	✓	
Lunate / Peri lunate Fracture Dislocation	ORIF	✓	
Scaphoid	ORIF Bone Graft	V	

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	Operation	PERFORM Independently	PERFORM WITH SUPERVISION
Hand Fractures / Dislocations			202 24 (2010)
Metacarpals	ORIF	· ·	
Phalanges	ORIF	√	,
Petvis			
Pelvic Ring Disruptions	ORIF		1
Acetabulum Fracture Sample	ORIF	✓	
Acetabulum Fracture Complex	ORIF		√
Privic Ring Disruptions	External Fixateur	*	
Lawer Limb Fractures / Dislocations			
Closed Fracture / Deslocation	Closed Reduction	✓	
Compound Fracture / Dislocation	Compound Scrub	V	
Sub-capital Fracture of Fernur	Cannulated Hip Screws	1	
Sub capital Fracture of	Monopolar / Monoblock Herni Arthroplasty Austin Moore / Thompson's	✓	
Seb capital Fracture of	Monopolar Modular		✓
Saio capital Fracture of Ferman	Bipolar Modular		₹
Later trochanteric / Fer trochanteric / High Subtrockanteric Fracture	DHS	✓	
Femoral Shafi Fracture Sample	Locked Incarredullary Nailing Amerograde Reprograde	~	
Femoral Shaft Fracture Complex	Locked Intramedullary Nailing Amerograde Retrograde		✓
Supracondylar Intercondylar Fracture Simple	Lociesi intranedullary Nating DCS	~	
Compound Fractures	Compound Scrub	· /	
Supracondylar / Intercondylar Fracture Complex	Locked Intramedullary Nailing DCS		-
Compound Femoral Fracture	External Fixateur	✓	
Tibial Plateau Fracture Simple	ORIF / Bone Graft	✓	

	OPERATION	PERFORM INDEPENDENTLY	PERFORM WITH SUPERVISION
Tibial Plateau Fracture Complex	ORIF / Bone Graft		NOISIVAATUU
Tibial Shaft Fracture Simple	Locked Intramedollary Nail	✓ .	
Tibial Shaft Fracture Complex	Locked Intran edalia ; Neil		1
Distil Tibial Fracture Simple	ORIF	✓	
Distil Tibial Fracture Complex	ORIF Periamenia Fran Bore Graft External Fixareur		·
Compound Tibial Shafi Fracture	Eurodeness		1
Ankle Fracture	ORIF	1	
Talus Fracture / Dislocation	ORIE		✓
Calcaneus Fracture	ORIF		✓
Midtarsal Fracture / Dislocation	ORIF		
Metatarsal / Phalangai Fracture	ORIF	· ·	
Hand / Foot Surgery			
Severed Extensor Tendon	Princy Repair	✓	
Severed Flexor Teados	Prinary R	1	
Severed Deptai Nerse	Name of the Same o	1	
Severed Major Nerve Ulnar, Median, Radial etc.	Prince size		√

SMO has adequate the regular of the regular in section and Nephew, and has attended the regular in section are trauma update workshops arranged with the above companies.

Dr Morgan Naidoo Director of Orthopaedics Fraser Coast Health service District

APPLICATION FOR CLINICAL PRIVILEGES (SPECIALISTS)

FOR THE POSITION/S OF	SENIOR ME	DICAL OFF	ICER OR	THOPAGDIC
AT THESE PUBLIC HOSPITA				elete as appropriate)
Clinical Privileges Requested (Specification of the Market Privileges Requested (Specification of the Market Part of the Part	secify in which areas of no	actice clinical privi le and give details o	leges are sought, of any subspeciali	
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minor electry	ie bothopas		Seren 161	(1. li
hemianthrople				rung
NB: TOTAL MA	JOK JOIN'S AT	CTHROPLAS	TY Exel	UDED.
Personal Details Family name Re/Sitn Business address HEKVE	Given name	e(s) <u>SAM</u> OAML	DARAM	
	260	Postcode 46	655	
Private address	t ',	rosicode ,	/ 3 3	<u> </u>
	920	Postcode 4	655	
Telephone: Business	Private	Mol	pile	
E-mail address Date of birth		· · · ·	•	
Date of then /	Sex:	⊡ M	□F	
Qualifications				
Degree/fellowship etc. Apolem AM Surgery	University/college e			qualification
MEDICINE (DSM)	MEDICIN			
		-		
STOLOMA IN ORTHOPA	EDUS 1995			775
AOA . Previous Appointments (List shows a		4.0		
Previous Appointments (List chronol	ogically – attach separate list	if necessary.)	421	
2 Jan 2001 - 1	200 acon Smo	02/100.	7,44	2 /
3. 1995 - Dec 2000 -	Potter harding	Par (f	Owithbe D	ose Hosp.
1. Ichy 2002 mg 2. Ion 2001 — 1 3. 1995 — Dec 2000 —	- Coparedice	- June	Lugeon	1-1-4/
		TO SOUTH THE SECOND SEC	· · · · · · · · · · · · · · · · · · ·	
				

CLINICAL PRIVILEGES APPLICATION FORM FOR SPECIALISTS UPDATED 10/06/2003.

G::DMS/STAFF/Priviligeges/Application forms/New application form (Specialists).doc

Summary of Orthopaedic Surgery performed from 17/07/02 to 19/11/03.

Elective Procedures

	Unsupervised	Consultant assistance	Total
KNEE			
ARTHROSCOPY			
+/- Partial	20	2	22
Memsectory & +/-			l
Removal of loose			
bones			
Removal of metals-	27	0	27
Kwires, screws&			1
plate,			l
intramedullary			
nails			
FOOT SURGERY			
Bunionectomy	3	0	3
Bunionectomy +	5	0	5
fusion 1st MTP 5	·		
Bunionectomy +	6	0	6
modified Ludloff			
procedure			
Lesser toe-	6	0	6
Hammer & curly			
toe correction			
Nail ablation	2	0	2
Dupuytrens	8	0	8
contractive			
Nerve Release	17	0	17
CTR			
Ulna nerve at	5	0	5
elbow			
Lateral cutaneous	1	0	1
nerve of thigh			
WRIST			
SURGERY			
Sauve Kapandgi	1	0	1
procedure			
Wrist fusion	2	0	2
ORIF Scaphoid	1	0	1
Acutek & screw			

SHOULDER SURGERY				
Open Acromioplasty	2	0	2	
Rotator's cuff repair	ı	0	1	

Emergency Surgery

	Unsupervised	Supervised	Total
FRACTURE NECK			
OF FEMUR			
Hemarthroplasty	13	0	13
Cannulated screws	5	0	5
Dynamic hip screw	15	0	15
INTRAMEDULLARY			
NAILS			
Femur	11	1	12
Tibial	4	0	4
Tibial plateau ORIF	2	1	3
Tendon/ nerve repairs	24	0	24
MUA			
Dislocations	10	0	10
Fractures	40	0	40
MUA + Kwires	8	0	8
ORIF			
Humerus	4	0	4
Forearms	4	0	4
Patella	5	0	5
Ankle	17	0	17
Elbow	2	0	2
Hand	2	0	2
Wound Debridement	48	0	48
DPC, 1/D, Skingraft,			
Removal of foreign			
body			

Dr. D. Krishna S.M.O Orthopaedic Surgeon Dr Dinesh Sharma commenced duties in the FCHSD as an SMO in Orthopaedics on the 1st March 2003. Prior to this he worked as a registrar at Newcastle Hospital and did various courses including an Arthroscopic course sponsored by Linvatec and a Fracture Fixation course sponsored by Mathys. He gained specialist registration in Orthopaedic in Fiji in October 1998 after working for 2 years under the supervision of a consultant Orthopaedic surgeon at Laukota Hospital. He was subsequently appointed head of the Orthopaedic Unit at CWM Hospital in Suva, with responsibility for three registrars, graduate and post graduate students, where he concincied Marical Education program in Orthopaedics, did three clinics and two sective operating sessions and Orthopaedic emergencies on a daily basis. The range of procedures in octavism in his scope of service in FCHSD. He was appointed to the FCHSD with excellent references from the Orthopaedic surgeons he worked with as well as Prof. Joe Gabrielle from Newcestie Hospital.

Dr Sharma is a diligent and caring doctor and has conducted himself in an exemplary manner; establishing good rapport with patients and staff alike. He has discharged his clinical duties and responsibilities in manner consistent with his references. He has expressed and demonstrated with regimes to participate in junior doctor and post graduate training.

In making a recommendation with regard to Dr Sharma's scope of service I have taken in to consideration his CV ordining his previous experience, discussions and references from Orthopaedic colleges, observation of his clinical and surgical practice and Orthopaedic Audits.

Dr Sharma is acutely aware of his limitations and level of competence. I have full confidence in his ability to adequately assess and deliver a management plan when ever he is one-call as an SMO.

Dr Morgan Naideo
Director of Orificiaedics
Fraser Coast Health Service District

15th January 2009

ORTHOPAEDIC SURGICAL SERVICES DR SHARMA SCOPE OF SERVICE

Elective Orthopaedic Surgery 2:

	OPERATION	PERFORM INDEPENDENTLY	Perform With Supervision
Rotzeor Cuff Tendonitis / Rupture Simple	Open Acromioplasty and Cuff Repair	✓	
Rotator Cuil Tendorius: Rupatre Complex	Open Acromioplasty and		✓.
Recentent Anterior Dislocation Shoulder	Open Anterior Stabilisation Bankart / Putti Platt		✓
CIS	CTD / Synovectomy	√	
Dupustrea Contracture	Excision and Z-plasty	✓	-
Ganghou / Barsa / Bakers Cyst	Exisim	✓	·
Trigger Finger	Release Tendon Sheath	✓	
Extensor Tendon Rupture Tennis	Secondary Repair / Tendon Transfer	~	
Implants for Fracture Firation	R rusov al	✓	
Foreign Body	Rassval	. ✓	
Wrist Arthropathy	A.⊒ odesis	✓	
Fractaire Nea Unieses	Boos Graft	✓	
Acides Tendon Report / Tendonics	2 Debrie	✓	
	Sectionly:	✓	<u>!</u>
Haller Vaiges	V===rarsal Osteotomy with == (Lndloff / Mitchel / Lapidus)	✓	!
	MTPI Arthrodesis	✓	
Hammer Toes	PIPJ Arthrodesis	4	
Morton's Neuroma	Excision	✓	
Subtalar Osteoarthritis / Arthropathy	Arthrodesis		

ORTHOPAEDIC SURGICAL SERVICES DR SHARMA SCOPE OF SERVICE

	SDEECHAR ORGENOR		PERFORM WITH
	OPERATION	PERFORM INDEPENDENTLY	SUPERVISION
tzer Cuff Tendonitis (Open Acromioplasty and Cuff Repair	1	
casor Cust Tendosais:	Caren Acronniopiasty and		· •
cintent Auterior slocation Shoulder	Open Anterior Stabilisation Bankart / Putti Platt		/
ES	CID / Synovectomy	✓	
apaștica Contractare	Escision and Z-plasty	✓	·
anglion / Barra / Bakers yst	Fridan	√	
rigger Finger	Release Tendon Sheath	✓	
xiensor Temion Appiare Firmals	Secondary Repair / Tendon	V	
mplants for Fracture	R-moval	*	
Foreign Body	Removal	1	
Mile Arelandaries	<u>A-i-ode</u> sis	1	
Fracer: Non Unices	Sex Graft	1	
Acido I de R	3 Debriera	1	
/ I Character	5-onectomy	1	
Haling Various	E (Ludloff / Mitchel / Lapidus)	*	
	MTPJ Arthrodesis		
Hammer Toes	PIPJ Arthrodesis	*	
Morton's Neuroma	Excision	/	·
Subtalar Osteoarthritis	/ Arthrodesis	√	

ORTHOPAEDIC SURGICAL SERVICES DR SHARMA SCOPE OF SERVICE

Orthopaedic Trauma

	Operation	PERFORM Independently	PERFORM WITH SUPERVISION
Upper Limb Fractures / Dislocations			
Closed Fracture Dislocations	Closed Reduction	✓	
Compound Fracture / Dislocations	Compound Saub	✓	· .
Fracture Clavicle	ORIF	✓	
ACJ Dislocation	ORIF	✓	
Sterne Clavicular Dislocation	ORIF		✓
Fracture Proximal Humerus	ORIF	✓	
Fracture Sizafi Humerus	ORIF with Plate & Screws	✓	
Fracture Shaft Humerus	ORIF with Imramedullary Nailing anterograde / retrograde	;	✓
Compound Fracture	Compound Scrub / External Fixateur	✓	
Fractures Around Elbow			-
Medical Epicondyle	ORIF	✓	
Lateral Condyle	ORIF	✓	
Rañas Head	ORIF / Excision	✓	
Sapracondyia	Percuraneous K wires	✓	
Complex Supracondylar	ORIF		✓
Compound Fracture	Compound Samb External Fixateur	·	✓
Ferenza Francisco			
Cina Razins / Ulna &	ORIF	√ .	
Calles Fractare Distal	Percutaneous K Ware	~	
Cades Fracture Distal	External Fixateur	√	
Composed Fractures	Compound Scrub ' External Fixateur	✓	
Wrist Fractures / Dislocations			A STATE OF THE STA
Lunate / Peri lunate Fracture Dislocation	Closed Reduction Percutaneous K Wires	✓	
Lunate / Peri lunate Fracture Dislocation	ORIF	√	
Scaphoid	ORIF Bone Graft	✓	

	Operation	Perform Independently	PERFORM WITH SUPERVISION
Hand Fractures / Dislocations			SULEKVISION
Metacarpals	ORIF	✓	
Phalanges	ORIF	✓	
Pelvis		:	
Pelvic Ring Disruptions	ORIF	!	✓
Acetabulum Fracture Simple	ORIF	· ·	
Acetabulum Fracture Complex	ORIF		√
Pelvic Ring Disruptions	External Fixateur	√	-
Lower Limb Fractures / Dislocations			
Closed Fracture / Dislocation	Closed Reduction	√	
Compound Fracture / Dislocation	Compound Scrub	✓	
Sub capital Fracture of Femur	Cannulated Hip Screws	<u> </u>	
Sub capital Fracture of Femur	Monopolar / Monoblock Hemi Arthroplasty Austin Moore / Thompson's	✓	
Sub capital Fracture of Femur	Monopolar Modular	<u> </u>	✓
Sub capital Fracture of Femur	Bipolar Modular		1
Intertrochanteric / Per trochanteric / High Subtrochanteric Fracture	DHS	√	
Femoral Shaft Fracture Simple	Locked Line - Locked National Recognition	✓	
Femoral Shaft Fracture Complex	Locked Intramenulary Nations		✓
Supracondylar Intercondylar Fracture Simple	Name DCS	√	
Compound Fractures	Compound Same	✓	
Supracondylar / ntercondylar Fracture Complex	Locked Invariedullary Nailing DCS		✓
Compound Femoral Cracture	External Fixateur	√	
ibial Plateau Fracture imple	ORIF / Bone Graft	*	· · · · · · · · · · · · · · · · · · ·

		PERFORM	PERFORM WITH
	OPERATION	INDEPENDENTLY	SUPERVISION
Tibial Plateau Fracture Complex	ORIF / Bone Graft		✓
Tibial Shaft Fracture Simple	Locked Intramedullary Nail	1	
Tibial Shaft Fracture Complex	Locked Intramedullary Nail	:	✓
Distil Tibial Fracture Simple	ORIF Periarticular Plate	√	
Distil Tibial Fracture Complex	ORIF Periarticular Plate Bone Graft External Fixateur		✓
Compound Tibial Shaft Fracture	External Fixateur		✓
Ankle Fracture	ORIF	✓	
Talus Fracture / Dislocation	ORIF		*
Calcaneus Fracture	ORIF		✓
Midtarsal Fracture / Dislocation	ORIF		
Metatarsal / Phalangeal Fracture	ORIF	✓	
Hand / Foot Surgery			
Severed Extensor Tendon	Primary Repair	✓	·
Severed Flexor Tendon	Primary Repair	✓	
Severed Digital Nerve	Primary Repair using Microscope	✓	:
Severed Major Nerve Ulnar, Me dian , Radial etc	Primary repair using Microscope		¥*

SMO has adequate knowledge of trauma treatment systems (Mathys Symbol Shir and National Zimmer, Surgical House, Link Orthopaedics etc.) available at Hervey Bay. Maryoorough Hospitals, and has attended the regular in-service and trauma update workshops arranged with the acceptance.

Dr Morgan Naidoo Director of Orthopaedics Fraser Coast Health service District

LIST OF PROCEEDURES - DINESH SHARMA.

FRACTURES:

- 1. DHS 13 (1 needed to be redone because of image intensifier problem)
- 2. Hemiarthroplasty 5
- 3. Cannulated Screws 3 (1 had late MRSA infection)
- 4. Miss a Nail 1
- 5. Interlocking Rod Femur 6 (1 had fracture neck of femur)
- 6. Recon. Femoral nail 1
- 7. Supracondylar Fracture Femur 3
- 8. Tibial Plateau 3 (Needed assistance because of unstable reduction)
- 9. Interlocking Rod Tibia 4
- 10. Distal Tibial Plate 1
- 11. Tibial Plafond 2
- 12. Ankle 12
- 13. Clavicle 1
- 14. Greater Tuberosity Humerus 1
- 15. Shaft Humerus (+ Bone Graft) 1
- 16. T Condylar Lower Humerus 1
- 17. Lat. Condyle Humerus 2
- 18. Med. Epicondyle 2
- 19. Tension Banding Olecranon 1
- 20. Forearm -3
- 21. K Wires Distal Radius 3
- 22. Metacarpals 3
- 23. Transcaphoid Perilunate #/Dislocation 1
- 24. Phalanges 2 (1 needed assistance because of difficult reduction in comminuted fracture)

EXTERNAL FIXATION:

- 1. Humerus 1
- 2. Wrist 2

MUA:

- 1. Wrist 17
- 2. Ankle-2

WOUND:

- 1. Debridement 9
- 2. Delayed Closure 2
- 3. Full Thickness Skin Graft 2

TENDON REPAIRS:

- 1. Biceps 1
- 2. Flexor Fingers 3
- 3. Extensor Fingers 3
- 4. Ankle-1
- 5. Tendoarchilles 1

NERVE REPAIR

- 1. Digital 1
- 2. Superficial Radial 1

CLOSED REDUCTION JOINTS:

- 1. Shoulder 1
- 2. Radial Head 1
- 3. Hip Prosthesis 2
- 4. Elbow-1

REMOVAL F.B. - 5

KNEE WASHOUT - 1

EXCISION RADIAL HEAD - 1

PATELLECTOMY-1

DRAINAGE ABSCESS -- 1

ELECTIVES:

- 1. Knee Arthroscopies 18
- 2. Carpal Tunnel Decompression 7
- 3. Ulna Nerve Release 2
- 4. Dupuytrens Contracture 5
- 5. DeQuervains Release 1
- 6. Excision Olecranon Bursa 2
- 7. Excision Lumps 3
- 8. Hallux Valgus 2
- 9. Arthrodesis Toes 2
- 10. Removal Metalware

Wires -9

Plates &/or Screws - 10

Ex. Fix. -3

ARTHROPLASTIES ASSISTED:

- 1. THR-15
- 2. TKR-14
- 3. Unicompartment Knee 24. Shoulder 1

Fraser Coast Health Service District.

Enquiries to: Dr Terry Hanelt

Executive Medical Administration

Telephone: Facsimile:

. . .

(07) (07) -

Email:

File Number: Our Ref.:

Your Ref.:

7/01/2003.

Dr Dinesh Chandra Sharma

EMPLOYEE RELATIONS

3 1 JAN 2003

RECEIVED

FIЛ.

Dear Dr Sharma,

I am please to advise that approval has been given for your appointment to the position of Senior Medical Officer in the Department of Orthopaedics with the Fraser Coast Health Service District. The position is primarily based at the Hervey Bay Hospital for on-call purposes but routine duties will be required at both Hervey Bay and Maryborough Hospitals. The commencement date is negotiable and is desired as soon as possible. The position must have been commenced by 07/04/2003 or the offer will lapse. Your appointment will be in accordance with the terms and conditions of the Senior Medical Officers and Resident Medical Officers Awards — State. The salary rate will be dependent upon registration status with the Medical Board of Queensland and years experience. The level of appointment is in the range of—

- C1-1 C1-2 (\$3,573.00 to \$3,684.80 per fortnight) if not vocationally registered and not a holder of FRACGP
- C1-1 to C1-5 (\$3,573.00 to \$4,020.20 per fortnight) if a FRACGP or Vocational Registration is held.
- MO1-1 to MO1-7 (\$3,684.80 to \$4,649.80 per fortnight) if Specialist registration with the Medical Board of Queensland is obtained, and maintained.

Your commencement salary rate will be C1-1 (\$3,573.00 per fortnight) subject to confirmation of registration status with the Medical Board of Queensland.

A copy of the award is available from the Human Resource Department or on http://qhin.health.qld.gov.au/ersu/resource/smormo95.pdf

Hervey Bay Office Hervey Bay Hospital Cnr Nissen St and Urraween Rd

Hervey Bay Postal Hervey Bay Hospital PO Box 592

Maryborough Office Maryborough Hospital 185 Walker Street,

The following conditions apply:-

- Employment is conditional upon maintaining registration with the Medical Board of Queensland as a Medical Practitioner.
- Remuneration at the rate applicable to a specialist is conditional upon gaining and maintaining registration with the Medical Board of Queensland as a Specialist.
- Limited Right of Private Practice is available for Registered Specialists who obtain a Medicare
 Provider Number enabling billing of patients for private services. Details of these arrangements
 are available by contacting the Director of Medical Services or the Human Resources
 Department.
- Study leave entitlement is thirteen (13) weeks on full salary for each five (5) years of continuous service, and may be taken on a pro-rata basis after an initial (1) year of continuous service.
- Conference leave of one (i) week on full salary for each year of continuous service up to a
 maximum accrual of 2 weeks.
- Long service leave entitlement of 13 weeks after 10 years of service.
- Detailed conditions for the above leave and provisions for other categories of leave such as sick, examination, bereavement, etc. are included in the Award and the contents of the Industrial Relations Manual.
- As an employee of Queensland Health you are required to contribute to the Queensland Health Superannuation scheme, Q Super – Accumulation Account.
- Your contribution will commence at the standard level of 5% and therefore receive the higher level of 12.75% employer contribution and automatically receive insurance.
- If you do not wish to contribute at this rate, you can elect to reduce your contribution down as low as 2%. Contributions of at least 2% must be maintained and insurance cannot be cancelled. Q Super will forward a package giving you more information, after your first pay period.
- A fully maintained motor vehicle will be provided for official and private usage within reason.
- A residence will be provided or a rental subsidy to a maximum of \$170 per week will be paid. The choice depends upon availability of a suitable residence owned by the Health Service. Telephone rental will be paid. An allowance is paid towards the cost of calls. An allowance is paid towards the cost of electricity. These allowances are detailed in the Queensland Health Industrial Relations Manual.
- As a District Health employee you may be required to work at any facility within the Fraser Coast Health Service District.
- Performance of duties in private facilities within the District may be required.
- Performance of duties within other Public Hospitals within other Queensland Health Districts may be required.
- An Identification badge is to be worn at all times whilst on duty with the Health Service.
- The Fraser Coast Health Service District has a NO SMOKING policy and smoking is only permitted in designated area outside the Health Service Building.
- You will be required to read the "Code of Conduct" and sign the acknowledgement page together with the other forms that make up the commencement package prior to commencement. These are available from the Medical Executive Support Officer at Hervey Bay Hospital.
- The Health Service will reimburse the cost of a one way economy airfare for you, your partner and any dependent children upon production of the receipt for your plane ticket. Reimbursements cannot be made on the ticket alone as the amount shown is often different to the actual amount paid
- · Citizens of the Republic of Fiji are not entitled to treatment under the Medicare system in

medical treatment whilst in Australia. Everyone should subscribe to the Ambulance service as any Ambulance transport attracts a significant fee people who are not subscribers. This can be organised upon arrival.

- Queensland Health indemnifies employees as long as the staff member was involved in
 performing duties for Queensland Health and the action was not wilfully negligent or a criminal
 act. Some form of private indemnity is advisable as every medical practitioner offers advice or
 writes a prescription from time to time outside the work environment and Queensland Health
 would not indemnify any legal action arising from these acts.
- The Health Service will not accept liability for damages sustained to private motor vehicles while being driven or parked on Health Service property and will not accept liability for loss of damages including theft or fire, to private property or personal effects which are used or stored in premises or accommodation owned or used by the Health Service. Employees are themselves responsible for arranging the appropriate insurance cover and premium payment for private property or personal effects in such circumstances.

Your attention is drawn to the confidentiality clause 63.(1) in the Health Services Act 1991 – "An officer, employee or agent of the department must not give to any other person, whether directly or indirectly, any information acquired by reason of being such an officer, employee or agent if a person who is receiving or has received a public sector health service could be identified from that information." Maximum penalty – 50 penalty units.

Please advise your acceptance or rejection of the offer within two weeks. Thank you for your assistance, I trust it will be a mutually rewarding association.

Yours sincerely.

Dr Terry Hanelt

Director of Medical Services

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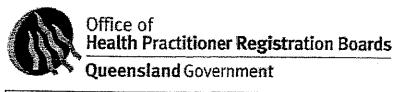
Fraser Coast Health Service District.

I accept

the above terms and conditions of this appointment.

Signed Brance Dated 13/01/03

Please sign both copies of this letter and return one copy to the Dr Hanelt at the Hervey Bay Hospital.





Medical Practitioners Register Registrant Details

-		Acres	w. >
V:07	FOh:	^~~	Company.
Sea	LUII.		# 1.77 = · · ·
	April 1980		

Name: Dr Dinesh Chandra Prasad Sharma

Registrant Number: 1030636

Gender: M

Registration Category: Special Purpose - Section 135

Registration Status: Current Registration From: 17/01/2005 Registration To: 16/01/2006

Special Purpose Activity: To fill an area of need as a Senior Medical Officer in Orthopaedics at Fraser Coast Health Service District or any public hospital authorised by the Medical Superintendent on a temporary basis.

Address

HERVEY BAY QLD 4655

Qualifications

Qualification MB BS FIJI

Institute

Fiji School of Medicine

Year 1987

Country Fiji

Conditions imposed on this registration

There are no conditions imposed on this registrant.

Undertakings given by the Practitioner to the Board

There are no undertakings entered into with this registrant.	
--	--

Disciplinary Action

There are no disciplinary action given to this registrant.

Go back to top of page

- Disclaimer -

SPECIALIST PRACTICE.

As a requirement for specialist registration in Fiji I was required to work under supervision for two years post specialist qualification. I worked in Lautoka Hospital under the supervision of my consultant Mr Eddie McCaig (FRACS – Orthopaedics) and upon his recommendation the Fiji Medical Council registered me as a Specialist in Orthopaedics in October 1998.

My specialist practice was based at the CWM Hospital in Suva. It is a 500 plus bed teaching hospital for both undergraduates and postgraduates. The surgical unit had about 120 beds that were shared by the different subspecialties on demand basis.

I was the head of the Orthopaedic Unit and there were atleast three registrars working under my supervision. Undergraduate and postgraduate students were also attached to my unit. The programme for the week included two grand rounds, three clinics, two operating days plus emergencies on a daily basis. Our other responsibilities included writing reports for various purposes, attending court cases as expert witness and assessing workman's compensation claims. We also participated in the weekly surgical department teaching sessions, monthly audits and lunch hour hospital teaching sessions.

I was also a member of the theatre utilisation committee that dealt with all the aspects of theatre use.

The clinics were general and included new and follow up cases. The professor of surgery at the medical school who is also an Orthopaedic Surgeon also attended one clinic per week. I sought his opinion on any aspect of Orthopaedics whenever I needed to. The clinics were also teaching clinics where the registrars would be presenting cases or shown interesting cases or findings. Our elective operating lists were also planned through these clinics.

Various statistics during my specialist practice is included.

I also worked as a part time visiting specialist at the Suva Private Hospital where I conducted one clinic per week and performed surgeries whenever time permitted.

- Manipulation Under Anaesthesia Upper Limb- 215 Lower Limb- 75
- 2). Skeletal Traction- 11
- 3). Wound Debridement / Change of Dressing- 98
- Open Reduction Internal Fixation Wires- 17
 Plates and Screws- 87
 K Nail- 15
- 5). DHS-28
- 6). Hemiarthroplasty-3
- 7). Removal Metalware- 60
- 8). Arthrotomy Hip- 11 Knee- 27 Shoulder- 2 Ankle- 1
- External Fixation Lower Limb- 10 Upper Limb- 3
- 10). Knee Arthroscopy- 38
- 11). Spine
 Discectomy- 8
 Decompression- 3
- 12). Amputations Forearm- 2 Below Knee- 4 Symes- 1 Toe- 3
- 13). Excision Lumps / Biopsies- 29

- 14). Shoulder Stabilisation- 7
- 15). Correction CTEV- 10
- 16). Tendon Surgery Repair- 5 Lengthening- 2 Transfer- 1
- 17). Drainage Abscess / Osteomyelitis- 33
- 18). Fasciotomy- 4
- 19). Removal Foreign Body-5
- 20). Skin Graft- 17
- 21). Wound Closure- 5
- 22). Bone Graft- 6
- 23). Pinning SUCFE- 7
- 24). Excision Radial Head-7
- 25). Carpal Tunnel Decompression- 4
- 26). Release Contracture- 2
- 27). Trigger Digit- 1
- 28). Arthrodesis- 2
- 29). Patellectomy- 1
- 30). Hallux Valgus- 2

- Manipulation Under Anaesthesia
 Upper Limb- 195
 Lower Limb- 67
- 2). Skeletal Traction-7
- 3). Wound Debridement / Change Dressing- 93
- Open Reduction Internal Fixation of Fractures K Wires- 22 Plates and Screws- 81 K Nail- 12 Screws Only- 25
- 5). DHS-23
- 6). Hemiarthroplasty- 5
- 7). Removal Metalware Wires- 28 Plates/Screws- 20 Rods- 3 External Fixator- 5 Skeletal Traction- 5
- 8). Arthrotomy

Hip-11

Knee-35

Ankle-2

Shoulder-2

Elbow-3

9). External Fixation

Lower Limb-7

Upper Limb- 1

- 10). Knee Arthroscopy- 42
- 11). Spine Discectomy- 12 Decompression- 7
- 12). BKA-1

- 13). Excision Lumps/Biopsies- 19
- 14). Shoulder Stabilisation- 7
- 15). Correction CTEV- 15
- 16). Tendon Surgery Repair- 5 Lengthening- 3
- 17). Drainage Absœss / Osteomyelitis- 52
- 18). Fasciotomy- 2
- 19). Removal Foreign Body- 7
- 20). Skin Graft- 8
- 21). Wound Closure- 12
- 22). Bone Graft- 2
- 23). Pinning SUCFE-9
- 24). Excision Radial Head-3
- 25). Carpal Tunnel Decompression- 12
- 26). Patellectomy- 3

- Manipulation Under Anaesthesia Upper Limb- 167 Lower Limb- 38
- 2). Skeletal Traction-5
- 3). Wound Debridement / Change of Dressing- 82
- 4). Open Reduction Internal Fixation of Fractures K. Wires- 28
 Plates and Screws- 59
 Screws only- 23
 K. Nail- 8
 Enders Nail- 2
- 5). DHS-20
- 6). Hemiarthroplasty-8
- 7). Interlocking Rod Femur- 3 Tibia- 5
- 8). External Fixation Femur- 3 Tibia- 10 Humerus- 3
- 9). Arthrotomy Hip- 16 Knee- 42 Ankle- 4 Shoulder- 2 Elbow- 1 Wrist- 1
- 10). Knee Arthroscopy- 31
- 11). Fasciotomy Leg- 8 Forearm- 3

- 12). Spine
 Discectomy- 5
 Decompression- 12
 Fusion- 3
- 13). Amputations BKA- 3 AKA- 1
- 14). Excision Lumps / Biopsies- 26
- 15). Shoulder Stabilisation- 4
- 16). Correction CTEV-15
- 17). Tendon Surgery Repair- 4 Lengthening- 7 Release- 2
- 18). Drainage Abscess / Osteomyelitis- 69
- 19). Change POP-45
- 20). Removal Foreign Body- 18
- 21). Skin Graft- 22
- 22). Delayed Wound Closure- 18
- 23). Bone Graft- 7
- 24). Pinning SCUFE- 6
- 25). Excision Radial Head-4
- 26). Carpal Tunnel Decompression- 5
- 27). Trigger Digit Release- 3
- 28). Removal Metalware Wires- 33 Plates/Screws- 26 Rods- 4 External Fixator- 6 Skeletal Traction- 7

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1). Manipulation Under Anaesthesia- Fractures
      Wrist-74
      Thumb-I
     Forearm- 45
     Supracondylar Humerus- 29
     Toe-1
     Ankle-21
     Leg- 42
     Growth Plate Lower femur- 1
  2). Closed Reduction Joints
     Hip-4
    Patella-2
    Ankle-3
    Shoulder- 5
    Elbow-5
    Finger-3
    CDH-1
 3). ORIF (Plates and Screws)
    Forearm- 61
    Ankle-19
    Femur- 2
    Humerus-2
    Tibial Plateau- 1
    Acetabulum- 1
    Intra articular fractures lower end humerus- 4
   Tibia-3
    Glenoid-1
   Neck of femur- 1
4). K Wires
   Capitellum- 1
   Medial epicondyle humerus- I
   Lateral condyle humerus- 3
   Supracondtlar humerus- 2
   Distal radius- 5
   Fingers- 8
   Toe-2
5). DHS-17
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6). Hemiarthroplasty hip- 5

- 7). Interlocking Rods Femur- 10 Tibia- 2
- 8). K Rod Femur- 5
- 9). External Fixation Humerus- 2 Femur- 2 Tibia- 7
- 10). Tension Banding Patella- 7 Olecranon- 5
- 11). Skeletal Traction --
- 12). Patellectomy- 5
- 13). Excision Radial Head- 2
- 14). Tendon SurgeryRepair patella tendon- 1Release- 2Torticollis- 1
- 15). SpineDecompression- 20Discectomy- 7Reduction and posterior cervical fusion- 3
- 16). Biopsies Synovial- 6 Bone- 8 Lumps- 3
- 17). Excision
 Bursa- 3
 Ganglion- 2
 Lumps- 6
- 18). Fasciotomy Forearm- 2 Leg- 2

19). Removal Metalware Wires-29 Plates-13 Screws- 18 Rods-2 Ext. fixators- 13 Skeletal traction pins- 4 20). Pinning Sucfe- 8 21). CTEV Correction- 14 22). CTEV Change POP- 37 23). Inferior Capsular Shift- 2 24). Reconstruction Lateral Ligament Ankle-1 25). Skin Graft- 8 26). Wound Debridement- 43 27). Arthrotomy Hip-4 Knee-14 Ankle- 2 Elbow-2 28). Delayed wound closure- 7 29). Carpal Tunnel Decompression- 5 30). Release Trigger Digits- 2 31). Knee Arthroscopy- 35 32). Transposition Ulnar Nerve-1 33). Supracondylar Osteotomy Humerus- 1 34). Amputations BKA-1 AKA- 4 Forearm- 1

35). Removal Foreign Body- 2

- 36). Drainage Abscess/Osteomyelitis- 61
- 37). Exploration Sinus- I
- 38). Excision Exostosis- 2
- 38). Open Reduction Joints MCP- 1

OPERATIONS PERFORMED IN 2002

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1). Manipulation Under Anaesthesia- Fractures
    Wrist-92
    Thumb-3
    Forearm- 41
    Supracondylar Humerus-35
    Toe- I
    Ankle-14
    Leg - 32
    Knee- 1
    Distal Femur- 1
 2). Closed Reduction Joints
    Hip-6
    Patella-3
    Shoulder-10
   Elbow- I
   Finger-5
   CDH-1
3). ORIF (Plates and/or Screws)
   Forearm- 81
   Ankle-21
   Femur Shaft-4
   Supracondylar Femur- 3
   Humerus-2
   Tibial Plateau-8
   Acetabulum-2
   Lower end Humerus- 6
   Tibia-2
   Neck of Femur-3
   Metacarpal-2
   Symphysis Pubis- 1
   Scaphoid-1
4). K Wires
  Supracondylar Humerus- 7
  Distal Radius- 4
  Lisfrancs Joint- 2
  Lateral Condyle Humerus- 5
  Radial Neck-1
  Distal Femur- 1
  Hand-7
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- 5). DHS-22
- 6). Hemiarthroplasty Hip-8
- 7). Interlocking Rods Femur- 12 Tibia- 4
- 8). K Rod Femur- 3
- 9). Enders Nail Femur- 3
- 10). Rush Pin Forearm-2
- 11). External Fixation

Wrist-2

Tibia-8

Femur-3

Ankle- 1

12). Tension Banding Patella- 3

Olecranon- 7

- 13). Skeletal Traction-12
- 14). Patellectomy- 7
- 15). Excision Radial Head- 3
- 16). Tendon Surgery

Extensor Mechanism Knee- 2

Release- 4

Repairs-8

17). Spine

Decompression-15

Lumbar Discectomy- 9

Cervical Discectomy and anterior Fusion-2

Reduction and posterior fusion cervical spine- 5

18). Biopsies

Synovial-9

Bone-12

Lumps-8

- 19). Excision Bursa-7 Ganglion-5 Lumps-12 20). Fasciotomy Forearm-3 Leg- 1 21). Removal Metalware Wires-35 Plates and Screws- 17 Screws-13 Rods-5 Ext. Fixator- 10 Skeletal Traction-9 22). Pinning Sucfe- 6 23). CTEV Correction- 18 24). CTEV Change POP- 45 25). Shoulder Stabilisation Inferior Capsular Shift- 5 Bristows-1 26). Anterior Cruciate Ligament Reconstruction- 3
 - 27). Skin Graft- 11
 - 28). Wound Debridement/COD- 92
 - 29). Arthrotomy Hip- 10 Ankle-2 Knee-11 Elbow-2

- Shoulder- 3
- 30). Delayed Wound Closure- 14
- 31). Carpal Tunnel Decompression- 12
- 32). Release Trigger Digits- 4

- 33). Knee Arthroscopy- 32
- 34). Osteotomy
 Supracondylar Humerus- 2
 Supramalleolar- 1
- 35). Amputations AKA-2 BKA-2
- 36). Removal Foreign Body- 5
- 37). Drainage Abscess / Osteomyelitis- 70
- 38). Excision Exostosis-4
- 39). Sequestrectomy- 7
- 40). Open Reduction Joints Elbow- 1 Hip- 1 Toe- 1
- 41). Arthrodesis Knee- 1
- 42). Closure meningomyelocoele- 2
- 43). Tendon Transfer- 2



Address:

PO Box 1465 Pialba Qld 4655

Phone:

Fax

Dr Sean Mullen FRACS (Orth)



To:

Attention: Corita

From

Vicki Manning - Practice Manager

Dr Morgan Naidoo

Phone: Public Hospital Pages: 1 (including this page)

CC:

As you indicated previously Sean's OT lists will be moving to Wednesday PM from 01/07/2004. This is quite difficult for us to accommodate, however we will be able to support this if Dr Mullen does his clinic on the same day as his OT. What we have worked is a four week roster that means Sean will be available on weeks 3 & 4 commencing Wednesday 7 July 2004.

I have listed all of the available dates below. I believe that this will give the public hospital the same number of sessions as if Sean was coming ½ day once a week.

Wednesday 7 July 2004 Available all day

Wednesday 14 July 2004 Unavailable all day

Wednesday 4 August 2004 Available all day

Wednesday 11 August 2004 Available all day

Wednesday 1 September 2004 Available all day

Wednesday 8 September 2004 Unavailable all day

Wednesday 29 September 2004 Available all day

Wednesday 6 October 2004 Available all day

Wednesday 27 October 2004 Available all day

Wednesday 3 November 2004 Unavailable all day

Wednesday 24 November 2004 Available all day

Wednesday 1 December 2004 Available all day

Wednesday 22 December 2004 Unavailable all day



ORTHOPAEDIC

Queensland Health

Enquires to: Dr Morgan Naidoo

Director of Orthopaedics

Telephone: (07)

Facsimile:

(07)

Email:

@health.qld.gov.au

Dr Sean Mullen Fraser coast Specialist Centre

Pialba Q 4655

Dear Sean.

Re: Theatre Management as of 1st July 2004

I trust that the Clinic and Theatre arrangements are satisfactory. As I discussed with you on 17th February 2004 the current Theatre arrangements will continue until the 30th June 2004 and as planned the new Theatre Management arrangements whereby the Elective Theatre session at Hervey Bay Hospital will be reduced to one in the afternoon from 1300 - 1700. This will allow staffing for an Emergency Theatre at Hervey Bay Hospital from 0800 - 1800 and optimum utilisation of Theatre sessions and beds at Maryborough Hospital for Elective Surgery. I know this does create some inconvenience but there is a strong case to support the new Theatre Management Plan. Future funding for the district for further theatre sessions and beds at Hervey Bay Hospital will be supported if there is optimum utilisation of the human and infrastructure resources at Maryborough Hospital.

I trust the delay in the implementation of the new Theatre Management Plan will allow you arrenough time to reschedule your private practice commitment to enable you to utilise the Wednesday afternoon session at Hervey Bay Hospital.

Yours faithfully

Dr Morgan Naidoo DIRECTOR OF ORTHOPAEDICS Fraser Coast Health Service District 26th February 2004

CC: Mike Allsopp (District Manager FCHSD), Dr Terry Hanelt (Director of Medical Services)

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APPOINTMENT SCHEDULING CLINIC MAINTENANCE FORM

D NEW CLINIC ALTERATION OF EXISTING CLINIC
SITE: HERVEY BAY / MARYBOROUGH
NAME OF CLINIC OKTHOPHEDIC NEW REVIEW CLINIC CLINIC CODE: ORTHAD
DISCIPLINE CLINIC RELATES TO: ORTHOPHEDIC S
PRINT DAILY APPOINTMENT LIST: YESY NO
SHOW MOVED/CANCELED ON DAILY LISTS: YES / NO
PRINT X-RAY LIST: (YES)/ NO
DOCTOR NAME: DR S MULEN HBCIS CODE: SMUL
CLINIC START TIME: 9-00
CLINIC FINISH TIME: 12:00. Please state finishing time for last appointment
TOTAL NUMBER OF APPOINTMENTS: 10
DO YOU WISH CLINC TO BE OVERBOOKED IF NECESSARY: YES! NO
DATE CLINIC TO START: 10, 03, 04
WEEKDAYS THE CLINIC TO RUN: WEDNESDAY.
FREQUENCY OF CLINIC: FORTNIGHTLY COMMENTS TO BE DISPLAYED ON SCREENING D'ROOKING LINKESS AUTA
COMMENTS TO BE DISPLAYED ON SCREEN: NO O'BOOK INC. UNLESS AUTH DO YOU WISH THE CLINIC TO BE CLSOED ON PUBLIC HOLIDAYS: (YES) NO
SCHEDULE COMPLETED BY: Rachel Smith
SCHEDOLL COMMELLED DT. RUCKUL GITHOUT
TATE 16 1 02 1015 9
CONSULTANT'S SIGNATURE: VI
(This form will not be processed without the Consultant's Signature)
NB: Clinic template on reverse of form must be
completed before your request can be processed.
DATE FORM RECEIVED:/
DATE PROCESSED ON HBCIS://
<u> </u>

CLINIC TEMPLATE

	•	<u> </u>		
	-APPOINTMENT TIME 24 hour Clock	IOCK N= New Appointment R= Recall/Review Appointment UR = Unrestricted Appointment U = Urgent released 2 days before appointment		- NO. OF APPOINTMENTS DURING THE TIME SLOT
		URN = Urgent New released 7 days before appointment URR = Urgent Recall released 7 days before appointment.		*
	09.00	N	30 min	
. [09.30	N	30 min	
	10.00-	R	15 min	
	10-15	WD./DS	15min	
	10-30	R	15 min	-)
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ORTHOPAEDIC SESSIONS - DR MULLE

			<u>PM</u>			AM	MONDAY
			PM			AM	TUESDAY
	THEATRE	1300 - 1700	Ma	CLINICS	0830 – 1200 Ward Round	AM	WEDNESDAY
Average of the control of the contro			<u>PM</u>			AM	THURSDAY
The state of the s			<u>PM</u>			AM	FRIDAŸ

Dr Sean Mullen F.R.A.C.S (Orth)

Orthopaedic Surgeon
Special interest in Arthroplasty & Sports Medicine

Phone: Fax: A/H:

Provider No: 0648575B

12 February 2004

Dr Morgan Naidoo Director of Orthopaedics Hervey Bay Hospital Nissan Street Hervey Bay 4655

Dear Morgan

Thank you very much for the letter that we received today regarding operating session times. Dale Erwin has also rung Sean regarding this matter.

As I explained to Dale, Sean is happy to try and work in with the Fraser Coast Health Service District and not be an imposition on any budgetary constraints. I also indicated to Dale that afternoon sessions are more difficult for us as Sean often works late into the evening because of the number of patients and we would not be able to achieve this in a morning. However solutions can always be found.

After discussing this with Dale, she indicated that there were some options. There are morning lists available at Maryborough, which of course would not be a problem for Sean. However as per your agreement with Sean it will impact on on-call arrangements. I also indicated to Dale that any other morning in Hervey Bay would be fine as long as we were given at least 4 weeks notice to move already booked patients to different timeslots. As I previously mentioned, afternoons are extremely difficult because of the reduced consulting time that this provides us.

Once you have sorted out with Dale when Sean will be operating and what days are clinics, if you could fax the schedule through that would be great. If you could do the schedule through the whole period that you are on leave, it would be appreciated.

On a different topic, Sean was wondering if he could get the schedule of educational meetings and Mortality and Morbidity meetings. Just to enable us to make sure Sean is free to attend these.

Thank you for your assistance in these matters.

1/lely

Jg/anne Kelly

[2/0 a/04]

WITHOUT PREJUDICE
Not to be released to third party without my written permission



Address:

PO Box 1465 Pialba Qld 4655

Phone:

Fax:

Dr Sean Mullen FRACS (Orth)



To:	Dr Morgan Naidoo	From: J	oanne Kelly		
Fax:	i	Pages: 1			-
Phone	8:	Date: 04	4/02/04		
Re:	Resumption of services at HBH	CC:			
# Cor	montes				

Comments:

Dear Morgan

Thank you very much for your letter dated 03/02/04. With regard to start and finish times that you have asked about, after discussions with clinics and theatre, I believe the session times are 8:30am - 12:00pm. This allows a ward round from 8:30am - 9:00am and for the clinic or theatre to commence at 9:00am. If this is different to what you understand please do not hesitate to let us know and we will work in with your times.

As far as the arrangements for clinics go, whatever is the standard template is fine. A half hour for a new patient is also adequate. Sean is happy to do a clinic one week and theatre the next week or if you want him to do a block of clinics or a block of theatre that is fine. Just let him know where you would like him each week.

As far as transferring your afternoon theatre list to Maryborough, that is not necessary. Sean will only be at Hervey Bay Hospital in the morning so any operating in the afternoon will not be a problem. Sean will only be at Hervey Bay Hospital until 12:00pm and therefore will not be able to provide consultant cover during the day.

Thank you very much for forwarding the February roster. As I indicated in the previous fax Sean is available for on-call for the weekend $27^h/28^h$ March however he will not be available until after 8:00pm as he is flying back from Brisbane. We are also away from the $6^h - 13^h$ March. The clinic or operating session during that period will also need to be cancelled.

Sean's preference is not to be on the weekday roster as it is difficult with him sometimes in Maryborough with his private patients. However in fairness to everyone if there are times when someone is away and the on-call roster is too onerous, Sean is more than happy to help out.

I hope this is satisfactory but if there are any further questions please do not hesitate to contact Sean or myself at the rooms.

Regards

Jganne



Queensland Government

Queensland Health

Fraser Coast Health Service District.

SUBJECT:

Summary of meeting of Friday 16th January 2004 held in the Administration Conference Room at Hervey Bay Hospital.

Present at the Meeting were -

- Dr Terry Hanelt, Director of Medical Services, Fraser Coast Health Service District.
- Dr Morgan Naidoo, Director of Orthopaedics, Fraser Coast Health Service District.
- Dr Sean Mullen, Visiting Medical Officer in Orthopaedics, Fraser Coast Health Service District.

Agreed that there should be formal teaching sessions for the Senior Medical Officers in Orthopaedics and these sessions must be on a regular basis on a predetermined and published basis.

Agreed that formal Morbidity and Mortality Meetings are to commence and all Orthopaedic Medical Officers be invited to participate.

The review by the Australian Orthopaedic Association, which is to occur soon, is expected to provide some guidance as to what that association considers as appropriate training and Quality Assurance activities.

The AOA review report will provide guidance for supervision requirements and clinical privilege delineation for the Senior Medical Officers. These matters to be further considered after that report in an attempt to find a system that is acceptable to the District, the Orthopaedic Surgeons and the AOA.

Correspondence from the Hospital to Dr Mullen be directed through Ms Carita Sellers, the Executive Support Officer for Medical Services. This was due to the lack of receipt by Dr Mullen of communications from the Director of Orthopaedics.

Dr Mullen will recommence the provision of regular Clinical Sessions with the District in early February 2004. This will initially be a morning session and may be extended to a whole day after further consultation with Dr Mullen. Dr Mullen would do consultations during the month of February and commence Theatre sessions from March.

Dr Mullen is prepared to work at either of the public hospitals within the District for his elective and clinic sessions. If however, elective and clinical work are at Maryborough, Dr Mullen will be unable to do on-call. The reason being is that it is impractical to do ward rounds at two different facilities. If the elective work and on-call are both at Hervey Bay Hospital, there will be no issues with on-call.

All patients seen in the public hospital are the hospital's patients not a specific doctors however Dr Mullen is available to discuss patients that he has operated on. During business hours, the Director

Hervey Bay Office
Hervey Bay Hospital
Cnr Nissen St and Urraween Rd
HERVEY BAY Q 4655
Phone 07 41206666 Fax 07 41206799
E-mail: Terry Hanelt@health.qid.gov.au

Hervey Bay Postal Hervey Bay Hospital PO Box 592 HERVEY BAY Q 4655 88 Maryborough Office Maryborough Hospital 185 Walker Street, MARYBOROUGH. Q. 4650. Phone 07 41238355. Fax 07 41231606. E-mail: Terry_Hanelt@health.qld.gov.au of Orthopaedics will be the first person that is contacted and he can discuss the matter further with Dr Mullen. After hours, the consultant on-call will again be contacted first. If Dr Mullen is available that consultant would be able to again discuss the matter with Dr Mullen. When Dr Mullen is on-call, the process will work in a similar manner. Dr Mullen would be contacted first and-if-it-was-another-doctor who-had-performed the-surgery, the matter-could-be-discussed-with them if necessary. These are contemporary arrangements that occur in most other hospitals. Dr Mullen agreed to provide his rooms and home e-mail addresses to allow trial transmission of digitised radiological films to determine whether these were of adequate quality.

Whether the Senior Medical Officers should have ambulatory clinics seeing new patients when the Consultant was not available for advice or immediate clinical review was discussed. Agreement could not be reached on this matter. Advice from the AOA may assist in resolution of this matter.

The issue of availability of a consultant at all times was discussed. It was agreed that the ideal was to have a consultant available for advice and supervision as required at all times. It was accepted that due to the limited number of Specialist Orthopaedic Surgeons available within the District this would not always be possible. During these periods other hospital medical staff would perform treatments within the bounds of their Clinical Privileges. Protocols for obtaining advice from remote specialists would be developed and implemented in any case where consultation was required prior to implementing treatment. The process of assessment for granting of Clinical Privileges is to be developed in consultation with the Australian Orthopaedic Association and must also comply with Queensland Health policy.

Notes of the meeting were to be typed up and signed off by the participants.

Terry Hanelt

Dr Morgan Naidoo

Dr Sean Mullen

Dr Sean Mullen F.R.A.C.S (Orth)

Orthopaedic Surgeon

Special Interest in Arthroplasty & Sports Medicine

Phone
Fax
A/H:

Provider No: 0648575B

4 September 2002

Terry Hanelt Hervey Bay Hospital Nissen Street PIALBA Q 4655

Dear Terry,

The recent addition to my family has resulted in demands on my time increasing substantially. For this reason I have decided to withdraw my services for the elective work at Hervey Bay Hospital. Therefore after September 30th 2002, I will no longer be available for the Wednesday elective operating list and clinic. I however will continue to be available for the after hours on-call roster. The patients currently on my waiting list for clinics and theatre will have to be distributed between the other full time orthopaedic staff.

As I previously mentioned, I will continue to be a part of the on-call roster. This means that trauma patients I operate on will be transferred to the doctor who is receiving patients the next day according to the roster. As I no longer will be having a clinic, post-operative care will have to be taken over by that doctor.

I hope that this change does not cause too many problems. The recent appointment of a full time Senior Medical Officer should minimise the impact on patient waiting times. Once the demands on my time ease I would be happy to return to elective work if my services are required. Thank you for your assistance in this matter.

Regards,

Sighted but not signed

Dr Sean Mulien

cc: Morgan Naidoo

WITHOUT PREJUDICE

Not to be released to third party without my written permission

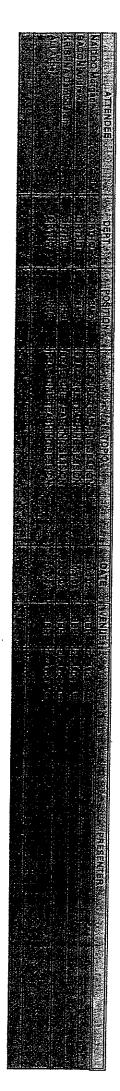
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SUMMARY OF CPD	CTIVIT	ES 200	3	
MAINTENANCE AND KNOWLEDGE OF SKILLS:			Progressive Total	
Section 1: Meetings	for 2003	Requirements Met? Y/R	2002-2004 Triennium fetal hours [2004 2002] afus totals from 2002 and 200 8]	· : :
Category 1 (minimum 50 hours over 3 years, average 17 hours per year)	18	y	6#	
Category 2 (1 hour per hour attended)	3	7	9	•
Category 3 (1 hour per 4 hours attended)				1
Total hours for categories 1, 2 and 3 is 100 hours for 3 years (33 hours per year) and may be accrued over each triennium. Total for this year:	27		<i>73</i>	:
Section 2: Self Directed Learning: (minimum 30 hours per year) (40 hours per year for non-operating surgeons)	<u>5a</u>	<u> </u>	192	
Section 3: Hospital Based meetings: (minimum 10 hours per year)	22	· <u> </u>	42	
Section 4: Audit: 1. Morbidity / Mortality Meetings: (minimum 3 hours per year) 2. Surgical Caseload: - Summary sheet completed - Total operative record kept	<u>4</u>	- <u>'</u>	<u>x</u> <u>y</u> y	
- Adverse events record kept	. •	~		
Peer Review: Any aspect of practice reviewed	Yes ((a)		
What was the part(s) of your practice reviewed?				
Name of Reviewer:				•
Section 5: Cradentialling:				
I have a certificate of credentialing at an ACHS hospital, Hospital Name:	SAY AM	v ma	RYBORDUE	4 HOSPITAL
Section 6: Medico Legal Meetings: (as part of category 1, 2 3 or above) (for non-operating surgeons)		. <u> </u>		
I declare that the information in these forms is a true and prop year 202 and they my records will be givallable for review for Signed: Nan	or vermoallon pur	continuing orthop poses. 17086-	naedic activities for the	12CI
Please forward this report to the AOA CPD Manager by 31 Ja. Please keep a copy for your records.	nuary in the year	efter the CPD ac	tivītes have occurred.	

SUMMARY OF CPD ACTIVITIES 2004

			•			
MAINTENANCE AND KNOWLEDGE OF SKILLS:						
Section 1: Meetings	Hours for 2004	Requirements Met? Y/N	Progressive Total 2002-2004 Triennium total hours (2004 pius totals from 2002 and 2003)			
Category 1 (minimum 50 hours over 3 years, average 17 hours per year)	13.5	<u>~</u>	8/5			
Category 2 (1 hour per hour attended)	48	<u> </u>	428			
Category 3 (1 hour per 4 hours attended)	6	7	9			
Total hours for categories 1, 2 and 3 is 100 hours for 3 years (33 hours per year) and may be accrued over each triannium. Total for this year:	72.5		1 <u>38</u> .5			
Section 2: Self Directed Learning: (minimum 30 hours per year) (40 hours per year for non-operating surgeons)	60	y	<u>/62</u>			
Section 3: Hospital Based meetings: (minimum 10 hours per year)	15	7				
Section 4: Audit: 1. Morbidity / Mortality Meetings: (minimum 3 hours per year) 2. Surgical Caseload: - Summary sheet completed - Total operative record kept - Adverse events record kept	<i>4</i>	<u>Y</u> <u>Y</u> <u>Y</u> <u>Y</u>	12 Y Y Y			
Peer Review; Any aspect of practice reviewed	a					
What was the part(s) of your practice reviewed?	Yes No	INCAC PO	RACTICE			
Name of Reviewer:						
Section 5: Credentialling:						
I have a certificate of credentialing at an ACHS hospital.						
Hospital Name: MCRUEY & M		MARKE	SOREVEN			
Section 6: Medico Legal Meetings: (as part of category 1, 2 3 or above) (for non-operating surgeons)						
I declare that the information in these forms is a true and proper account of my continuing orthopaedic activities for the years 2004 and that my records will be available for review for verification purposes.						
Signed: Mouse Name:	DR N	76RGAN	. N. NAIDO			
Please forward this report to the AOA CPO Manager by 31 January	ary in the year afte	er the CPD activit	les have occurred.			