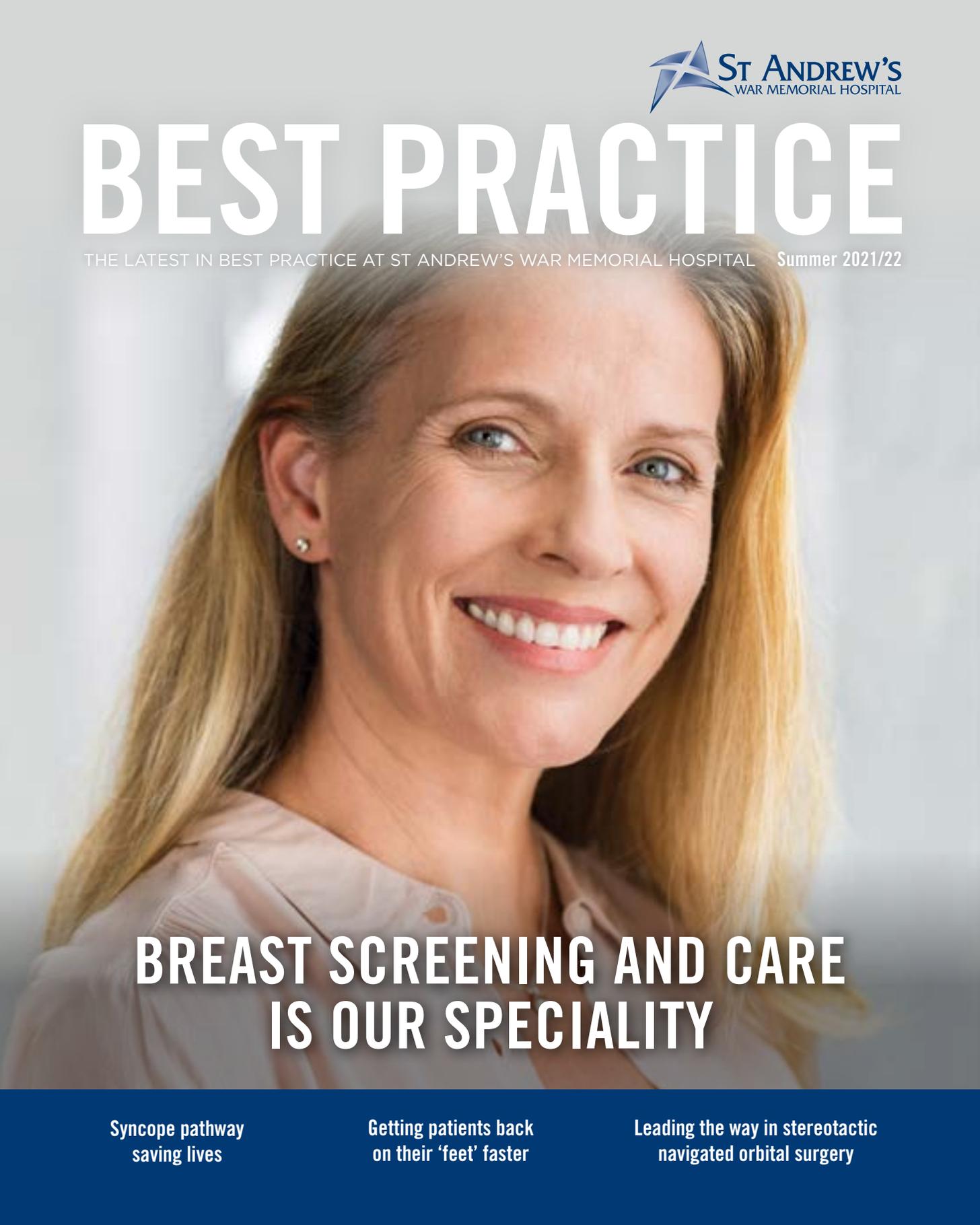


# BEST PRACTICE

THE LATEST IN BEST PRACTICE AT ST ANDREW'S WAR MEMORIAL HOSPITAL Summer 2021/22



## BREAST SCREENING AND CARE IS OUR SPECIALITY

**Syncope pathway  
saving lives**

**Getting patients back  
on their 'feet' faster**

**Leading the way in stereotactic  
navigated orbital surgery**

WELCOME

# Welcome to the summer edition of *Best Practice*.



**While 2021 was indeed another roller coaster of a year, at St Andrew's, we have continued to power on and weather the storms.**

We have been focussed on our commitment to continually enhancing our services. We boosted the St Andrew's Breast Care Service with the addition of Queensland's only Nurse Practitioner in Breast Oncology: Ms Natasha Keir. Our priority is always ensuring our patients receive a timely, informed and caring breast screen service, and Natasha's expert knowledge in the care and management of these patients is second to none.

Our new Syncope Management Pathway - a fast-track evaluation and diagnosis procedure for patients who have experienced an episode(s) of syncope - which started in late 2020, is already delivering life-saving results. You can read about retired financial planner David Ward's experience with the service, in this edition.

Meanwhile, St Andrew's oculoplastic and orbital surgeons, Professor Timothy Sullivan and Dr Matthew Cranstoun have been involved in pioneering the use in Queensland of stereotactic navigation in orbital surgery for the management of orbital conditions including thyroid eye disease and orbital tumours. This new technique is improving patient outcomes and reducing operating time for these complex cases. It is an interesting read to see how advances in technology continue to assist our surgeons.

We also feature a story about St Andrew's dedicated outpatient rehabilitation programs that provide specialised

help, so patients can manage some of the side effects of their conditions to enhance their quality of life and improve their overall wellbeing. These multidisciplinary outpatient programs cover Men's and Women's Health conditions (prostatectomy, breast cancer, gynaecological and colorectal) to chronic illnesses like Parkinson's, in addition to musculoskeletal, neurological, and other conditions and illnesses.

In December, we lost one of our longest serving VMPs, Dr Kevin Hourigan. Aged 82 and just a few years since his retirement, Kevin was a compassionate and admired member of the St Andrew's family, having helped establish gastroenterology services at the hospital more than 40 years ago. We are grateful for his life but our loss will be felt for a long time to come.

We have recently welcomed new specialists in paediatric gastroenterologist Dr Chris Burgess, respiratory specialist Dr Tom Skinner and ophthalmologist Dr Tom Moloney. These doctors all come with a wealth of experience.

Wishing you all the best for 2022 as we chart our way out of the COVID-19 pandemic. Of course, if I can provide any assistance, please don't hesitate to contact me.

**Dr Michael Gillman**  
MBBS, FRACGP  
Director of Medical Services  
St Andrew's War Memorial Hospital  
michael.gillman@uhealth.com.au

# what's inside



Spotlight



Allied Health Feature



Innovation

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**Angela Stavropoulos**  
Business Advisory

**Kristy Baxter**  
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# VMP PROFILE UPDATES



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**Dr Tom Skinner**

Respiratory & Sleep  
Medicine Specialist  
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**Dr Tom Moloney**

Ophthalmologist  
T 07 3831 8606

Dr Christopher Burgess supports children of all ages – from infants to adolescents – and their families through the diagnosis and effective management of all types of gut problems.

This includes disorders affecting the digestive tract, liver, nutrition and feeding. He has specialist experience treating acid reflux, constipation, gastrointestinal allergies, coeliac disease, abdominal pain, irritable bowel syndrome, liver disease and more.

Dr Burgess has a special interest in inflammatory disorders of the gut, and recently completed a two-year fellowship in Edinburgh researching risk factors and outcomes of paediatric-onset inflammatory bowel disease.

He is also an experienced endoscopist and colonoscopist with full accreditation at St Andrew's War Memorial Hospital.

Dr Tom Skinner was awarded his undergraduate degree in physiotherapy in 2005, before working as a respiratory physiotherapist in Brisbane and London. He went on to study medicine, and graduated from the University of Queensland in 2012 with honours. Tom trained in thoracic medicine at the Royal Brisbane and Women's Hospital (RBWH), Greenslopes Private Hospital (GPH) and The Prince Charles Hospital (TPCH).

Dr Skinner is a well-rounded practitioner with a broad range of skills across all aspects of respiratory and sleep medicine. His particular respiratory interests include: COPD, asthma, lung cancer, unexplained breathlessness and cough, and pleural disease. He has trained in interventional bronchoscopy and is adept in both radial and convex EBUS and transbronchial-cryobiopsy.

In 2020, Dr Skinner completed a sleep medicine fellowship at TPCH. His sleep medicine interests include: obstructive sleep apnoea and complex sleep disordered breathing. Through his time at TPCH he trained in the management of patients with neuromuscular disorders and respiratory failure, including motor neuron disease.

Dr Skinner strives to deliver personalised care, considering each patient at an individual level. He also has an interest in the management of respiratory and sleep disorders in older patients.

Dr Tom Moloney is an ophthalmologist specialising in retinal and macular diseases and vitreoretinal surgery.

Dr Moloney studied Medicine at the University of Queensland and completed his specialist ophthalmology training in Queensland. He then undertook the Medical Retina and Uveitis Fellowship at the prestigious Moorfields Eye Hospital in London and subsequently returned to Brisbane to complete the Vitreoretinal Surgery Fellowship at the Royal Brisbane and Women's Hospital. He was awarded the RANZCO Topham Scholarship to support his fellowship training in the United Kingdom.

He is a Fellow of the Royal Australian and New Zealand College of Ophthalmologists, a member of both the American Society of Retinal Specialists and the Australian and New Zealand Society of Retinal Specialists and a member of the American Society of Cataract and Refractive Surgeons.

Dr Moloney holds a public appointment as a Consultant Vitreoretinal Surgeon at the Royal Brisbane and Women's Hospital. He also holds academic appointments at the University of Queensland and is involved with the teaching and training of medical students, optometrists and ophthalmology registrars.

Dr Moloney's specialty interests include:

*Intravitreal injection and laser treatments for:*

- Age Related Macular Degeneration
- Retinal Vein Occlusion
- Diabetic Eye Disease

*Vitreoretinal surgery for:*

- Macular Hole
- Epiretinal Membrane
- Retinal Detachment
- Secondary Intraocular Lens

*Cataract Surgery*

*Ocular Trauma*

*Uveitis and Ocular Inflammatory Disease*

## COVER STORY



# BREAST SCREENING AND CARE IS OUR SPECIALITY

## Fast-track breast screening, results and intervention.

Ensuring breast screen patients at St Andrew's War Memorial Hospital have a timely, informed and caring service is a priority and has recently been boosted by the addition of a nurse practitioner to the St Andrew's Breast Care Service.

The role of the hospital's nurse practitioner in breast oncology is to help guide patients every step of the way, in order to minimise the associated anxiety that often accompanies a mammogram, further diagnosis, and treatment should it be required.

Dr Ben Green, St Andrew's Breast and Endocrine Surgeon, said St Andrew's highly skilled Nurse Practitioner in Breast Oncology, Ms Natasha Keir is one of only three qualified in Australia and the first in Queensland.

"Natasha's expert knowledge in the care and management of these patients is second to none," Dr Green said.

*"At St Andrew's, patients not only benefit from the expertise of the radiologists, but also the guidance of the nurse practitioner, and then often same day access to oncologists and surgeons for further investigations if needed."*

"Minimising the time between diagnosis and treatment is imperative for our patients. We do not want to see patients waiting unnecessarily."

Ms Keir said having breast imaging is often a nerve-racking experience, especially if something warrants further investigation.

*"We aim to give patients immediate advice and guidance, so they feel as comfortable as possible with what is happening. Our collaborative team approach then ensures patients receive everything they need," said Ms Keir.*

### Latest in mammography technology

St Andrew's Breast Care Service uses the latest in mammography technology, including the advanced Hologic Mammography Unit with 3D Tomosynthesis. The unit provides the fastest, highest-resolution 3D images possible for radiologists, enhanced workflow for technologists, and a more comfortable mammography experience for patients. It is designed to clearly reveal subtle lesions and fine calcifications to help pinpoint breast cancers early.

The comprehensive mammography screening and diagnostics services include:

- Screening mammography with 3D Tomosynthesis
- Diagnostic mammography with 3D Tomosynthesis
- Stereotactic and Tomosynthesis guided biopsy (including Vacuum Assisted Core Biopsy)
- Breast ultrasound
- Ultrasound guided breast fine needle aspiration and core biopsy
- Pre-operative Tomosynthesis or ultrasound guided hookwire localisation
- 3D breast MRI with computer aided diagnosis.

### Highly skilled patient care

Our new nurse practitioner in breast oncology can assist with:

- Pre-imaging care: comprehensive assessment and clinical breast examination
- Acting as a main point of contact for patients during their care at the hospital
- Being available for GPs should they need it
- Keeping GPs informed about their patient's status
- Acting as a patient advocate to escalate any concerns
- Explaining anything related to the mammogram or if necessary, diagnosis and treatment
- Guiding patients on their day of treatment
- Visiting patients regularly in hospital post-treatment to provide information and resources
- Ongoing care/contact after hospital.

### OUR BREAST CARE SERVICE TEAM Breast and Endocrine Surgeons

- Dr Ben Green, MBBS FRACS
- Dr Daniel de Viana, MBBS FRACS
- Dr Kowsi Murugappan, MBBS FRACS

### Specialist radiologists

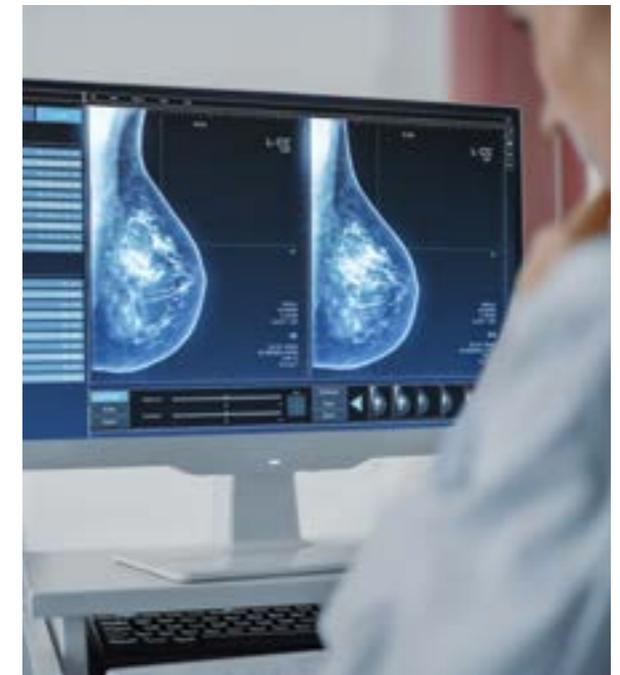
- Dr Darren Ault
- Dr Barbara Laing
- Dr Patty Connor

### Nurse Practitioner

- Ms Natasha Keir

### Breast Care Nurse

- Ms Sophie Peckham



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**W** standrewhospital.com.au/breast

# NEWS IN BRIEF

## A TRUE QUEENSLAND GREAT ▶

Congratulations to newly crowned 'Queensland Great' Pixie Annat MBE OAM, who was appointed Matron at St Andrew's War Memorial Hospital in 1965 before becoming Chief Executive Officer in 1978. Pixie fought for recognition of nurses throughout her long and distinguished nursing career, and later campaigned on behalf of the elderly and homeless women.

Pixie grew up in rural Queensland and trained to be a nurse shortly after World War II. Working first at the Royal Brisbane Hospital, she went on to forge an extraordinary career as matron, then CEO, of St Andrew's War Memorial Hospital.

The Queensland Great Awards are a Queensland Government initiative that recognise the efforts and achievements of remarkable Queensland individuals and institutions.



## ◀ FROM ONE WAR MEMORIAL HOSPITAL TO ANOTHER...

Well done to Charlie (Food Services) and Bai (House-keeping) for their stellar efforts in collecting and sending much needed medical supplies and equipment - fit to be re-purposed - from St Andrew's War Memorial Hospital to the Colonial War Memorial Hospital in Suva, Fiji.

Charlie and Bai are both originally from Fiji which meant working on this project that extra bit special for them. Items including hospital beds, wheelchairs, curtains, thermometers, anaesthetic trolleys, a ventilator and disposable syringes were collected, arranged and transported to Fiji in late 2020.

The much needed and timely donation of hospital items was gladly received by the Board at the Colonial Hospital.



## 250 SURGERIES AND COUNTING ▶

Congratulations to our robotic surgical team who recently completed their 250th case, performed by Gynaecologist Dr Caron Forde. The fourth generation da Vinci Xi robot is considered the best in the world for robotic surgery, delivering more surgical precision and patient safety than ever before. Surgery with the robot is benefiting patients undergoing procedures in gynaecology, ENT, colorectal and urology. It also means shorter hospital stays, smaller incisions and a faster recovery.



## ▼ NAIDOC WEEK CELEBRATED

During this year's NAIDOC Week, St Andrew's recognised the traditional owners of this land, the Yugara and Turrbal people by renaming the Boardroom to 'Diddum Yudney' meaning gathering place.

Staff, doctors, patients and visitors voted on this name that was put forward by local elders because of its significance to the traditional owners of this land in Spring Hill.

Thanks to gynaecologist Dr Philip Hall, St Andrew's obtained a significant collection of indigenous artworks from Utopia, these were amongst the earliest of the new wave of Indigenous art that has become so well known internationally. These artworks are now housed in 'Diddum Yudney' and incorporate images of gathering places, people and the paths that we are taking to 'Heal Country'.



## SPOTLIGHT

# SYNCOPE PATHWAY SAVES DAVID'S LIFE AFTER COLLAPSING IN HIS DRIVEWAY

Dr Himabindu Samardhi

### St Andrew's new fast track Syncope Management Pathway is helping to save lives including that of 71-year-old, retired financial planner, David Ward.

In mid 2021, David and his partner Coral had just arrived home and Coral was putting away some shopping in the garage when she heard a loud noise and found David collapsed on their concrete driveway. She responded quickly and called an ambulance.

Soon after, they found themselves at St Andrew's War Memorial Hospital Emergency Centre and progressed through the Syncope Management Pathway – a fast-track evaluation and diagnosis procedure for patients who have experienced an episode(s) of syncope.

Dr Himabindu Samardhi, Clinical Cardiologist and Electrophysiologist at St Andrew's said David had presented at Emergency with a sudden and unheralded

loss of consciousness, he had no recollection of what had happened and sustained a head injury during his fall.

*"His MRI showed a small subdural bleed, which did not require any intervention, and St Andrew's Emergency Department admitted him under the Syncope Pathway," Dr Samardhi said.*

Dr Samardhi said that after further evaluation the patient was found to have mild cognitive impairment as well as conduction system disease on his ECG. Prolonged monitoring during his hospital stay did not show any evidence of long pauses or bradycardic events.

*"One immediate option was a pacemaker, however, the patient and family were unsure if they wanted to go for an invasive option upfront, given the lack of definite evidence thus far," she said.*

Dr Samardhi then suggested an implantable loop recorder to monitor the patient's heart for an extended period.

Loop recorders are implantable devices inserted just underneath the skin for prolonged ambulatory monitoring. They are a useful diagnostic tool – especially when the patient has recurrent episodes of loss of consciousness, and the initial hospital workup has shown no particular cause.

These loop recorders are monitored in Brisbane by a remote services team around the clock and significant alerts are communicated as soon as possible (almost certainly within 24 hours) to the treating cardiologist/electrophysiologist.

Dr Samardhi said they are useful for detecting fast as well as slow heart rhythm problems and providing symptom rhythm correlation to guide further treatment.

David went home after the loop recorder was implanted. He subsequently had two pauses in one day – one eight-second pause and another seven-second pause; both secondary to ventricular standstill in the setting of complete heart block.

"David was luckily lying down when they happened and therefore did not have symptoms at the time; however, the notification was sent from the remote services team to me and I was able to contact him and his partner and notify them that there was evidence of heart block on his cardiac monitoring," Dr Samardhi said.

Following these findings and further discussions, David and Coral were able to make an informed decision to proceed with a pacemaker implantation. Dr Samardhi inserted a dual chamber MRI compatible pacemaker. It has now been six-months since insertion of the pacemaker with no further episodes of loss of consciousness.

Dr Samardhi said the loop recorder gave the patient and family the confidence to have the pacemaker inserted, as they knew exactly what was occurring.

"The family did have some concerns initially about future MRI scans with a pacemaker, however were advised that the dual-chamber pacemaker system David has received, are now fully MRI compatible and the patient can safely have MRI scans," she said.

Most modern pacemakers and defibrillators are now MRI compatible, patients just need to check this with their electrophysiologist prior to MRI imaging. MRIs can then be done safely with the appropriate checks.

Dr Samardhi said this case is just one example of several patients who have benefited from the Syncope Pathway plus or minus prolonged monitoring with a loop recorder.

"It is very reassuring for David and Coral that this abnormality was picked up. The pacemaker may prevent another life-threatening episode and/or head injury," she said.

Dr Samardhi said one of David's favourite sayings is: "Your attitude determines your altitude in life". Similarly, at St Andrew's, by continuing to implement new and effective strategies for patient management like the Syncope Pathway, we can continue to achieve progressively higher standards of care for our patients.



**Dr Himabindu Samardhi**  
Cardiologist  
CardioVascular Clinics

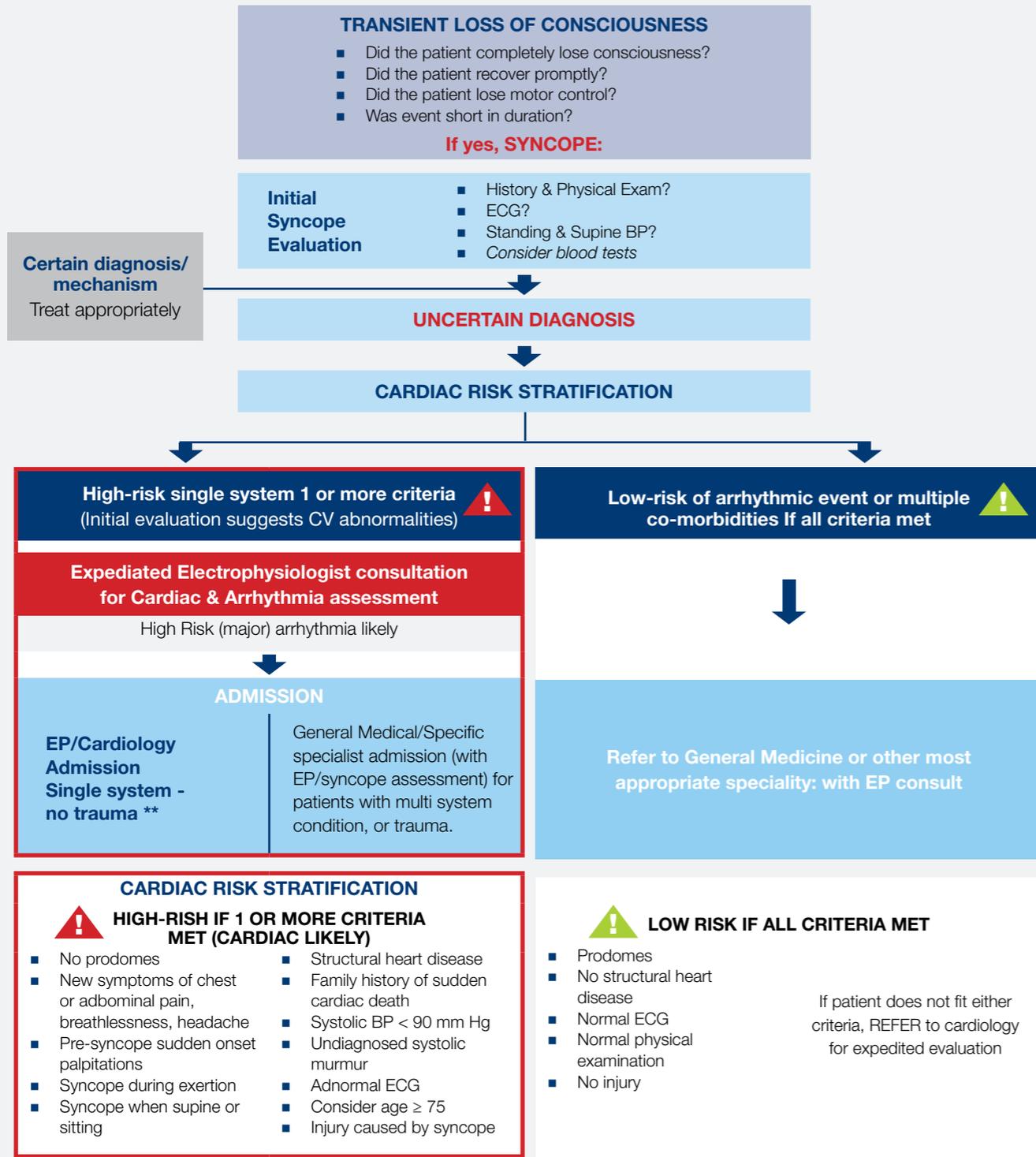
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# SYNCOPE MANAGEMENT PATHWAY



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- + Wrist surgery (distal radius fractures)
- + Microsurgery
- + Replants / revascularisation
- + Elbow surgery
- + Shoulder surgery
- + Nerve, tendon and soft tissue surgery



## St Andrew's War Memorial Hospital Emergency Centre

Entrance on North Street, Spring Hill

[www.standrewshospital.com.au](http://www.standrewshospital.com.au)



# GETTING PATIENTS BACK ON THEIR 'FEET' FASTER

## Dedicated men's and women's physiotherapy outpatient programs

While many believe rehabilitation is only necessary after surgery or an illness, the truth is rehabilitation is often best started before many surgeries take place.

Ms Monique Luca, Allied Health Manager, St Andrew's War Memorial Hospital, said St Andrew's offers 'pre-habilitation' for many patients to help optimise their post-operative outcomes.

"Pre-habilitation includes establishing goals and a treatment plan early, prescribing pre-surgery exercises and addressing any other issues that may be of concern prior to their surgery," said Ms Luca.

St Andrew's Senior Gender Health Physiotherapist, Ms Emily Edwards, regularly sees patients for both pre-habilitation and rehabilitation services for prostatectomy, breast cancer, gynaecological and colorectal surgery cases.

*"Pre- and post-surgery rehabilitation remains critically important for overall recovery and St Andrew's outpatient rehabilitation can offer this continuity of care," Ms Luca said.*

The service does not require referral, is priced competitively and private health rebates are available.

### Outpatient Rehabilitation Services at St Andrew's:

#### Men's and Women's Health:

- Prostatectomy
- Breast Cancer
- Gynaecological
- Colorectal

#### Chronic Illness

- Parkinson's Disease
- In addition, the service also offers multidisciplinary outpatient appointments for musculoskeletal, neurological and various other chronic conditions and diseases.

#### What is offered:

- Specialised physiotherapists (prostatectomy, gynaecological, breast care, colorectal, pelvic floor)
- Comprehensive pre-operative physiotherapy assessment

- Establishment of goals and treatment plans
- Advice and education
- A pre-habilitation service including exercise plans and advice
- Addressing any pre-existing concerns
- A guided and graduated safe return to activity and exercise and healthy lifestyle
- Appointments ranging from one to two hours.

#### Specialised physiotherapy advice on:

- Pelvic floor dysfunction
- Lymphoedema management including bio-impedance analysis using the SOZO
- Post-prostatectomy incontinence
- Bowel dysfunction
- Pelvic pain
- Urinary incontinence
- Sexual dysfunction.

**For enquiries and bookings, phone 07 3834 4285 or email [sawmh-dayrehab@uhealth.com.au](mailto:sawmh-dayrehab@uhealth.com.au)**



# OUTPATIENT PROGRAMS HELPING PARKINSON'S PATIENTS MANAGE BETTER

For people diagnosed with Parkinson's disease, learning how to manage some of the side effects of their condition to enhance their quality of life is critical to their wellbeing.

St Andrew's specialises in working with Parkinson's patients and offers a variety of programs to empower them with the knowledge and know-how to suit each person's individual needs.

Ms Karen Armstrong, Rehabilitation Lead, St Andrew's War Memorial Hospital, said the programs vary from light to intensive depending on the patient's needs.

"Activities range from voice therapy to exercise therapy and education and are run by accredited speech pathologists, physiotherapists and occupational therapists," Ms Armstrong said.

Ms Lillian Olszewski, is a patient of 'PD Hour of Power' Parkinson's classes at St Andrew's and said they have been instrumental in keeping her Parkinson's disease manageable.

*"The exercises are based on the PD Warrior philosophy, and just one session per week has enabled me to walk taller, balance more effectively and generally move much more freely," Lillian said.*

Apart from exercises, she said the team provide tips and strategies for managing the disease on a daily basis. In this casual environment, we have a few laughs as we exercise and join in games that challenge our abilities.

"Many of the exercises can be done at home in between sessions but staff encouragement and support ensures I keep coming back for my weekly dose of 'PD Hour of Power'," Lillian said.

#### St Andrew's tailored Parkinson's outpatient programs include:

- **Same-Day Rehabilitation Program:** Each session consists of therapy with two health professionals. Depending on individual goals, patients may see a physiotherapist, occupational therapist, speech pathologist, dietitian, psychologist, exercise physiologist or gender health physiotherapist. A GP (or specialist) referral is required, and private health rebates may be available. Sessions are 1.5 to 3 hours, generally twice a week for 4-6 weeks.

- **Intensive Parkinson's Disease Program:** An intensive program based upon the Lee Silverman Voice Treatment (LSVT®) program - an innovative and clinically proven method for improving voice and speech in individuals with Parkinson's disease. Each session involves: one hour of speech pathology for LSVT Loud; an exercise session with either the physiotherapist or occupational therapist; and an education session with the multidisciplinary team including dietetics, gender health physiotherapy, psychology and pharmacy. A specialist referral is required along with an ENT review. Sessions are 3 hours, 4 days-a-week for 4 weeks.
- **Individual Appointments:** Suitable for those wanting a one-on-one appointment with just one specific health professional. These individual one-on-one outpatient appointments don't require a referral and private health rebates may be available.
- **PD Hour of Power:** A group exercise circuit class based on high amplitude, high intensity exercises aimed at increasing endurance, balance and functionality of everyday movements. A physiotherapy review is required prior to commencing. The class is \$25 per one-hour session or 5 for \$100. Bookings are essential as maximum numbers apply.



For enquiries and bookings, phone 07 3834 4285 or email [sawmh-dayrehab@uhealth.com.au](mailto:sawmh-dayrehab@uhealth.com.au)

## VMP ADVICE

# THE CHANGING PRESENTATION OF OROPHARYNGEAL HEAD AND NECK CANCER



Dr Thomas Slaughter

### Increasing the awareness of HPV related oropharyngeal cancer.

**With the decline in smoking, and the steadily increasing incidence of HPV related oropharyngeal SCC, there is a changing presentation of the oropharyngeal head and neck cancer patient. Increased awareness is necessary to facilitate early detection and improved management of these malignancies.**

The incidence of oropharyngeal SCC continues to rise with an associated reduced incidence of other types of head and neck cancers. This has been attributed to the Human Papilloma Virus (HPV) infection with the majority of newly diagnosed oropharyngeal cancers being HPV positive (>70%).

These patients are quite different to the traditional head and neck cancer sufferers. They are generally non-smokers, a younger age, of higher socioeconomic background and can have an increased number of sexual partners.

Overall HPV positive disease leads to improved survival outcomes and early detection is key to improving the long-term sequela of their treatment. Non-HPV oropharyngeal SCC will often present at an advanced stage, with significant oropharyngeal symptoms. HPV related oropharyngeal SCC will more commonly present with a neck mass, with little or no oropharyngeal symptoms. This change in presentation may not be recognized by medical practitioners and lead to delayed diagnosis.

The majority of oropharyngeal SCC are treated with radiation therapy and chemotherapy, and this continues to be the mainstay of treatment. With the younger patient cohort, the long-term side effects of radiation are becoming more apparent, including dry mouth (xerostomia), dental issues, osteoradionecrosis of the mandible, fibrosis of the neck and radiation induced malignancy.

The traditional surgical approaches have been quite morbid and destructive. The advent of the da Vinci robot has led to a newer, less morbid approach to surgery with improved functional outcomes and can possibly avoid radiation treatment all together. Early tonsil and tongue base malignancies can now be removed with Trans-Oral Robotic Surgery with excellent results and curative outcomes. Robotic surgery allows access to the oropharynx without needing large surgical cuts, including jaw mobilization or division. This has led to much improved functional surgical outcomes with little or no physical deformity to the patient.

With the recent procurement of a da Vinci robotic system at St Andrew's Hospital, this service is now provided by myself and Dr Ryan Sommerville.

It is important to continue to be alert to the ever-changing nature of head and neck cancer presentations and continue to provide up to date management to improve patient survival and importantly long-term morbidity.

All head and neck malignancy should be presented to a multi-disciplinary team for group management decisions to allow best patient outcomes. The recent development of the Queensland Private Head and Neck Clinic (chaired by Dr Maurice Stevens) has provided a great avenue for the private management of head and neck cancers.

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## IN FOCUS

# ST ANDREW'S SURGEONS LEAD THE WAY IN STEREOTACTIC NAVIGATED ORBITAL SURGERY

Over the past two years, St Andrew's oculoplastic and orbital surgeons, Professor Timothy Sullivan and Dr Matthew Cranstoun have been involved in pioneering the use in Queensland of stereotactic navigation in orbital surgery, for the management of orbital conditions including thyroid eye disease and orbital tumours.

Orbital disease is defined as pathology that affects the bony cavity in the skull that houses the eye, the muscles that move the eye, lacrimal gland and the blood vessels and nerves that supply these important structures.

Dr Cranstoun said while the stereotactic technique is commonplace in neurosurgical and ENT surgery, its use in orbital surgery is relatively new.

*"By utilising this method for orbital surgery, it is improving patient outcomes and reducing operating time for these complex cases," Dr Cranstoun said.*

Stereotactic navigation is a technique of using individualised computed tomography (CT) and/or magnetic resonance imaging (MRI) guidance during surgery to assist in defining the precise intraoperative anatomy, and it shows exactly where surgical instruments are positioned during an operation. The surgeon can plan their surgical approach in a three-dimensional virtual environment and then execute it with real-time guidance allowing for more precision.

As the orbit contains the eye as well as several other important neurovascular and soft tissue structures, the use of intraoperative image guidance has been shown to decrease potential intra- and post-operative complications which may affect sight.

*"Tumours in the orbit can be difficult to accurately define and dissect due to the confined space within the eye socket and proximity of important neurovascular and soft tissue structures. By using stereotactic navigation, tumours can often be more readily identified and the surrounding healthy tissue preserved," said Dr Cranstoun.*

Atypical lesions may also be biopsied more directly and can minimise the need for larger incisions.

Dr Cranstoun said for patients with thyroid-related eye disease (Graves' disease), orbital decompression surgery involves removing parts of the lateral, medial and sometimes inferior orbital walls which assists in reducing the bulging forwards of the eye or eyes (sometimes called exophthalmos), and in some patients with severe thyroid eye disease, relieves pressure on the optic nerve that can cause reduced vision or blindness.

"The use of intraoperative stereotactic navigation allows the surgeon to be confident that a maximal bony decompression has taken place, while minimising the likelihood of skull-base or sinonasal complications, such as exposure of the dura and CSF leak and vision impairment," he said.



Dr Matthew Cranstoun

Professor Timothy Sullivan  
Dr Matthew Cranstoun

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## SPOTLIGHT

# SPOTLIGHT ON OUR WORKCOVER INJURY SERVICE IN OUR EMERGENCY CENTRE

### St Andrew's War Memorial Hospital has an Emergency Centre like no other – workers won't wait.

No wait times can result in quicker recovery from work-related injuries, so staff can be on the mend and back on the job sooner.

But this is just one reason why the hospital, centrally located in Brisbane's Spring Hill, is a popular choice among employers looking for high-quality care for workplace injuries.

St Andrew's Hospital has meticulously crafted a WorkCover service, designed to ease administrative headaches for time-poor businesses, while offering no out-of-pocket expenses for patients.

When employees present with job-related injuries, hospital staff immediately take care of the paperwork and directly bill WorkCover.

Dr Kim Hansen, Director of Emergency Medicine, says employers can be assured their staff are getting the best medical care available, all without getting buried in paperwork.

"It means the employer doesn't have to worry about the paperwork from the emergency point-of-view," Dr Hansen says.

*"We are set up for WorkCover, we aim to make it as smooth as possible, get patients seen straight away and all in a great central location."*

Proving to be a reputable choice across a raft of industries, 10 per cent of admissions at St Andrew's War Memorial Hospital Emergency Centre are WorkCover patients.

Dr Hansen said Emergency Centre staff treat patients in the construction and supermarket industries, train drivers,

police officers, firefighters, staff from other health facilities, and many more.

The team is experienced in treating every type of workplace injury – both minor and major – including broken bones, cuts and lacerations, back and leg injuries, concussion, chemical eye burns, invasion of foreign objects, industrial deafness and much more.

"WorkCover does cover everything: radiology, pathology, physio, all in-hospital care.

*"And, it will also cover post-hospital care, such as physio or if crutches are required," Dr Hansen says.*

The hospital also has upper limb surgeons on a 24/7 roster, so workers presenting with hand lacerations or breaks have access to theatre at any time of the day.

Dr Hansen said the hospital – which has 250 beds – offers every medical speciality on site, meaning patients don't have to be transferred to another hospital.

This also saves time.

The quicker patients are treated, the sooner they can heal and be on their way back to work.

"A lot of workplaces are set up now for light duties or restricted duties, and they want their employees back on site, even if they aren't able to do their usual job.

*"That is better for everyone – it is better for the wellbeing of the patient, as well as for the employer...to having everybody on site, turning up every day, and keeping in touch with the workplace while recovering."*

## MEDICAL ROOMS FOR LEASE

Level 1, St Andrew's Place,  
Suite 297, 33 North Street, Spring Hill



- High quality fit out
- St Andrew's Place, Spring Hill
- Suites available on 2 levels
- Connecting walkway to St Andrew's Hospital
- Available now
- 172 sq or 40 sq

**FOR FURTHER INFORMATION**  
contact Michelle Durrant  
on **0487 796 246**  
or email [m.durrant@nswd.com.au](mailto:m.durrant@nswd.com.au)



# NEW DAY PROGRAMS AVAILABLE FOR MENTAL HEALTH AND SUBSTANCE DEPENDENCY TREATMENT

**St Andrew’s War Memorial Hospital is proud to be the private hospital partner of the Banyans Healthcare Group. The Group has responded to surging demand for mental health and substance dependency treatment services with the opening of The Banyans Health Plus Day Programs in Bowen Hills.**

The Banyans Health Plus offer three multidisciplinary Integrated Day Programs – Mental Health, Substance Dependency, and Dual Diagnosis – in a one-on-one treatment model that also includes time to attend to work matters in between sessions and with meals provided by The Banyans’ own nutritionist-run café, Wholesome & Bean.

Leading The Banyans Health Plus is consultant psychiatrist Dr Nathan Mueller and clinical director Peter Hayton. Its programs include access to general practitioners, psychologists, addiction medicine

specialists, nutritionists, exercise physiologists, and mindfulness and yoga therapists.

The Banyans Healthcare Group Chief Executive Officer Ruth Limkin said the day programs were developed to provide a revolutionary, one-on-one model of care that provided patients with convenience, comfort, and confidentiality.

“There is no group therapy at The Banyans Health Plus,” Ms Limkin said. “This makes us unique when compared with other community day programs and we believe it yields the best patient outcomes with our patients more inclined to speak freely to the members of their treating team.”

Launched in September, The Banyans Health Plus is located alongside the The Banyans Specialist Clinics, The Banyans Medical Centre, and Wholesome & Bean at 16 Thompson Street, Bowen Hills.

The Banyans Specialist Clinic include the services of Addiction Sciences Qld and its doctors, Dr Christian Rowan and Dr James Finn. It also includes highly experienced

psychologist Peter Hayton and clinical nutritionist Lisa Cutforth, who has worked closely on exposing the link between mental health and substance dependency conditions and nutrition. All practitioners are currently taking referrals.

Established in 2015, The Banyans Healthcare Group began its operations with a private residential treatment centre, The Banyans Health and Wellness, on Brisbane’s northside.

The businesses expanded vision is to provide premium medical care at all stages of the mental health and substance dependency recovery journey, in addition to adding general practitioner treatment to its services.

*“The Banyans was founded on the underlying philosophy that multidisciplinary, integrated care provides the best possible outcomes for our patients. Our approach to our patients’ health is thorough and holistic and incorporates the best evidence-based treatment available,”* Ms Limkin said.

While cafes have long provided an essential refuge in hospitals, The Banyans’ café, Wholesome & Bean, sets a whole new, wholesome standard when it comes to patient care.

Operated by Ms Cutforth, it is believed to be the first café in Australia to be operated in a medical centre by its own practising nutritionist.

The café was a very deliberate inclusion in this medical precinct.

“The importance of good nutrition when it comes to achieving and maintaining good physical health is widely accepted, but there is now increasing evidence that it is also key to mental wellbeing as well as recovery from substance dependency,” Ms Cutforth said.

The café focuses on providing wholesome and delicious meals and snacks that cater for all dietary requirements as well as great coffee. Corporate catering is also available.

**The Banyans Health Plus**

T 1300 226 926  
E [wellness@thebanyans.com.au](mailto:wellness@thebanyans.com.au)  
W [www.thebanyans.com.au](http://www.thebanyans.com.au)

**The Banyans Specialist Clinics | Medical Centre**

16 Thompson St,  
Bowen Hills QLD 4006  
T 3155 3848  
F 3155 3849  
E [reception.bowenhills@thebanyans.com.au](mailto:reception.bowenhills@thebanyans.com.au)  
W [www.thebanyansmedicalcentre.com.au](http://www.thebanyansmedicalcentre.com.au)

**Wholesome & Bean**

T [cafe@wholesomeandbean.com.au](mailto:cafe@wholesomeandbean.com.au)  
W [www.wholesomeandbean.com.au](http://www.wholesomeandbean.com.au)

MONEY MATTERS

# NEW SUPER CHOICE RULES FOR EMPLOYERS FROM 1 NOVEMBER

Employers must be prepared for 1 November 2021 when super fund choice rules change to comply with the Government’s new “super stapling” requirements.

**What is ‘super stapling’?**

Currently, employers must offer eligible new employees a choice of fund when making super guarantee contributions. In the event that a fund is not chosen, employers must pay this super into a default fund.

Many employees fail to nominate a fund and incur unnecessary costs in setting up and maintaining multiple default accounts. To avoid this, the Government is introducing measures that will require an employer to

pay super into an existing account held by the employee, known as a ‘stapled super fund’.

**From 1 November 2021**, for new eligible employees that do not make a choice, employers will need to check whether these employees have stapled super funds.

**What’s required from 1 November?**

To ensure you are paying super into the correct fund for your new employee, there are a number of steps to take.

In summary, options for the employer to take are as follows:

1. Continue offering new employees a choice of super fund via a Super Standard Choice form. If the employee chooses a super fund, pay into the account advised on the form;
  2. If the employee does not choose a super fund, request stapled super fund details using the ATO’s online services either directly or via the employer’s tax agent. If the employee has a stapled super fund, pay into this account;
  3. If the employee does not have a stapled super fund, then pay into a newly created default fund account.
- The choice of super fund and stapled super fund

obligations will need to be met by the quarterly due dates or penalties may apply.

**Super payments and payroll**

There are currently no changes you need to make in your payroll system for the introduction of the new super choice rules. Simply enter the super fund details for the new employee into your payroll system based on the super fund identified by following the above steps.

**Learn more**

To learn more about the super choice rule changes and how they may impact your business, please contact Kristy Baxter or Angela Stavropoulos from Pilot Partners, via [taxmed@pilotpartners.com.au](mailto:taxmed@pilotpartners.com.au) or 07 3023 1300.



<b>Emergency Centre</b>	<b>07 3834 4455</b>
<b>GP Hotline</b>	<b>07 3834 4490</b>
<b>Rehabilitation</b>	
<b>Inpatient Services</b>	<b>07 3834 4391</b>
<b>Day Patient Services</b>	<b>07 3834 4285</b>
<b>Rural Health Connect</b>	<b>07 3834 4499</b>
<b>Day Infusion Centre</b>	<b>07 3834 4493</b>
<b>Business Development/GP Enquiries</b>	<b>07 3834 4371</b>



Quality in Health ISO 9001+ Core Stds



St Andrew’s War Memorial Hospital’s quality management system has received ISO 9001 certification ensuring the hospital’s safety and quality system meets the highest international and national standards.

St Andrew’s earned ISO 9001:2008 and Core Standards for Safety and Quality in Health Care certification in October 2012 after a very successful audit.

St Andrew’s War Memorial Hospital’s certification is aligned with international best practice and complies with the 10 standards set by the Australian Commission on Safety and Quality in Health Care.



## BOWEL CANCER SCREENING

**For both men and women, bowel cancer is the second most common cancer in Australia. When detected early, bowel cancer is readily treatable with excellent outcomes.**

### **Why choose St Andrew's?**

- + High quality, patient-focused service
- + Conveniently located in Spring Hill (2km from Brisbane CBD)
- + Early access to Gastroenterology services

Should your GP consider it appropriate, direct access colonoscopy without needing a consultation with a Gastroenterologist may be appropriate. Speak to your GP today if you have any concerns. ***GP referrals are required.***

**St Andrew's War Memorial Hospital**

 457 Wickham Tce, Spring Hill

[standrewhospital.com.au](http://standrewhospital.com.au)

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