



# BLACKBURN CLINIC FAMILY GENERAL PRACTICE

## AUTUMN 2021

An independent association of medical practitioners.

### BLACKBURN CLINIC

5/195 Whitehorse Rd, Blackburn  
[www.blackburnclinic.com.au](http://www.blackburnclinic.com.au)

#### HOURS (open 365 days of the year)

Monday to Thursday 8 am - 7 pm  
 Friday 8 am - 6 pm  
 Sat-Sun 8 am - 12 noon  
 Public Hols 8 am - 12 noon  
 Good Fri, Xmas Day 9 am - 11 am

Dr Suzanne ASHDOWN  
 Dr Grant CONNOLEY  
 Dr Sean DAS  
 Dr Ann DONAGHY  
 Dr Scott GARDINER  
 Dr Melanie HATTOTUWA  
 Dr Janice KRELTSZHEIM  
 Dr Kazunori NAKAJIMA  
 Dr Peter LOVASS  
 Dr Andrew RAWLIN  
 Dr Claire St JOHN  
 Dr Jasdeep SANDHU  
 Dr Adrian TANG  
 Dr Aaron ZHANG



2/195 Whitehorse Rd, Blackburn  
[www.blackburnspecialistcentre.com.au](http://www.blackburnspecialistcentre.com.au)

#### HOURS

Monday to Friday 8 am - 5 pm  
 Hours extend past 5pm some days, dependent on GP availability.  
 Weekend/Pub Hols Closed

Dr Andrew BROAD  
 Dr Peter ELLIOTT  
 Dr Yeganeh KHAVAR  
 Dr Praba RATNARAJAH  
 Dr Terence TING

General enquiries: 9875 1111  
 Appointments: 9875 1123

BOOK ONLINE AT:  
[www.blackburnclinic.com.au](http://www.blackburnclinic.com.au)

## Welcome Dr Karen Du

*Karen completed her medical degree at Monash University and completed a Bachelor of Medical Science at Mount Sinai Hospital in New York. After graduating, she worked at Monash Health for a few years in various medical and surgical fields before undertaking training in Paediatrics at the Royal Children's Hospital. During this time, she completed a Diploma of Child Health and gained some further Paediatrics experience before becoming a General Practitioner.*

### Q. Why did you decide to become a GP?

"I chose to be a GP for many reasons! One of the main reasons was that I wanted to be able to help people optimize their health and general wellbeing. I like that as a GP I have the opportunity to prevent conditions from occurring through practicing preventative medicine. I also enjoy getting to know people, their families, cultures and interests and every day in General Practice is different, which keeps things interesting."



### Q. Before working at Blackburn Clinic, what was the most unusual or interesting job you've ever had?

"Prior to becoming a doctor, I worked as a Teddy Bear maker at Build-A-Bear Workshop. I've always enjoyed working with kids and working at Build-A-Bear allowed me to learn a lot about interacting with children (and running birthday parties!). I can't say I miss dressing up in a bear suit but I definitely enjoyed brightening up people's days."

### Q. Where did you grow up and what was your childhood like?

"I grew up in Melbourne and spent my childhood going to Luna Park, playing with friends and my older brother (or at least convincing him to play), rollerblading and collecting sea shells at the beach."



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REPRINT OF A NATIONAL ARTICLE ABOUT OUR VERY OWN

DR MELANIE HATTOTUWA

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## Recipe

### Honey Chicken & Roast Potatoes

Preparation time: 35 minutes  
Cooking time: 25 minutes  
Serves: 4

#### Ingredients

- Extra-virgin olive oil
- 4 Large potatoes
- 2 Tomatoes
- 3-4 tsp All-purpose spice blend
- 1 Bunch chives
- 1 Bag mixed salad leaves
- 2 Chicken stock cubes
- 2 Cucumbers
- 500g Chicken thighs
- 250g Sour cream
- 4 tbsp Honey
- Drizzle white wine vinegar

#### Instructions

1. Preheat the oven to 240°C/220°C fan forced. Cut the potato (unpeeled) into 2cm chunks. Place on an oven tray, sprinkle over the chicken stock, season with pepper and drizzle with olive oil. Toss to coat, then bake until tender, 20-25 minutes.
2. Roughly chop the tomato and thinly slice the cucumber. Cut the chicken thighs in half. In a medium bowl, combine the spice blend, 2tbs water, and a drizzle of olive oil. Add the chicken thigh and toss to coat.
3. Cook the chicken in a large pan with olive oil, turning occasionally. When browned and cooked through remove from heat and add the honey, turning until well coated.
4. While the chicken is cooking, finely chop the chives and combine with sour cream in a small bowl.
5. In a large bowl, combine a small drizzle of white wine vinegar and olive oil and season with a pinch of salt and pepper. Add the tomato, cucumber and mixed salad leaves to the bowl with the dressing and toss to coat.
6. Divide the chicken, roast potatoes and salad between plates. Spoon over and juices from the pan. Serve with the chive sour cream.

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## Welcome Dr Karen Du — Continued from front page



### Q. What do you like to do on your days off?

"I like to snowboard, travel, cycle and spend time with my loved ones. In 2019 my partner and I spent the year travelling to every continent including Antarctica. One day I'd like to go to the Arctic and see a polar bear! I also enjoy playing the guitar and was briefly in a band called Short Street."

### Q. What would your pet say if we asked for a reference?

"My Labrador Tommy would say 'Karen does a great job looking after me so she'll look after you well too. Can I go eat now?'"

### Q. What is the most important thing you have learned in the last 5 years?

*"To be patient, to smile and to be thankful, especially after 2020!"*

## A GP's life in lockdown

### Dr Melanie Hattotuwa

General practitioner and Avant member, VIC

*The following article was printed in Avant Mutual's biannual member magazine called Connect, issue no. 15 and is reprinted with their kind permission.*

**Melanie is a full-time GP and practice principal at the Blackburn Clinic in Melbourne. Melanie spoke to us about her experience as a doctor and mother of two primary school-aged children during the COVID-19 pandemic and her coping strategies.**

### What drew you to become a GP?

I had always envisioned doing something in the health industry and my parents often said I would role-play a doctor when I was younger. I was drawn to general practice because you can provide generational care and see patients through their life stages.

### What are some of the steps the clinic took at the start of the pandemic?

We were flying by the seat of our pants. It almost felt a bit surreal, but we had to quickly get up to speed on what we needed to do, both individually and as part of a group practice. The first week, the practice principals and I attended nightly meetings focused on implementing processes within the practice. We realised very quickly we couldn't have patients attending the clinic unless we had a clear understanding of their health needs, so we adopted telehealth (telephone only) to triage patients.

### How did the respiratory clinic come about?

One of our most significant challenges was separating the patient population to avoid patients with respiratory symptoms who may have COVID-19, sitting in the waiting room with other patients, so we created the respiratory carpark clinic. It operates every day with GPs and nurses working on a roster system wearing full PPE and patients who need face-to-face consultations are booked in after a telehealth appointment.

### What do you see as the most significant challenge with telehealth?

A big challenge is having patients feel comfortable speaking over the phone about their medical





concerns and for doctors to be able to evaluate the degree of those concerns when there are non-verbal cues with telephone consultations. There is a sense that important medical issues may be missed, or issues may not be communicated as effectively or understood.

#### **Do you believe the Medicare telehealth items should become permanent?**

I think we need to be careful that we don't launch into telehealth, only to find out later that quality of care has been compromised because we are doing consultations over the phone. If evidence shows telehealth is safe and provides gold standard care long term, then I would consider supporting this move.

#### **Ideally, how will the clinic use telehealth in the future?**

At this stage, it's likely our practice will return to providing face-to-face consultations full-time. Whilst telehealth has its pros and is convenient for both doctors and patients, we feel face-to-face consultations are the best measure of quality of care.

#### **The RACGP said GPs will need longer consultations and better MBS rebate options due to the increase in complex physical and mental health conditions. What is your view?**

I think we are all in consensus as GPs that the inevitable rise in complex mental health conditions and cancer diagnoses is a significant issue. I have never dealt with the magnitude of mental health issues that I did during the lockdown. It stands to reason that GPs need to have the time and ability to deal with these increasing conditions coming through. The MBS rebate options have been a longstanding issue for GPs and definitely need to be re-addressed in the COVID-recovery phase.

#### **How did home-schooling your children go?**

Luckily, I have a very supportive husband, but this was one of the biggest challenges for me as they are not independent learners. As parents, we had to learn how to deliver education at home and equally, to two children. Having a parent try and teach their child is not a natural relationship – that's why we outsource it. Ultimately, we began to understand how our children were coping and could play to their strengths.

#### **How have you managed any stress?**

There were occasions when I was stressed and sometimes it would be something as banal as my daughter not having completed her persuasive writing assignment. At the time, you think, "This is the worst thing in the world. Can't we do better?" then in hindsight you think, "Really?" It's essential to regularly take stock and remember what's important. I find regular exercise, reading and a glass of wine at the end of a long day, are great stress busters.

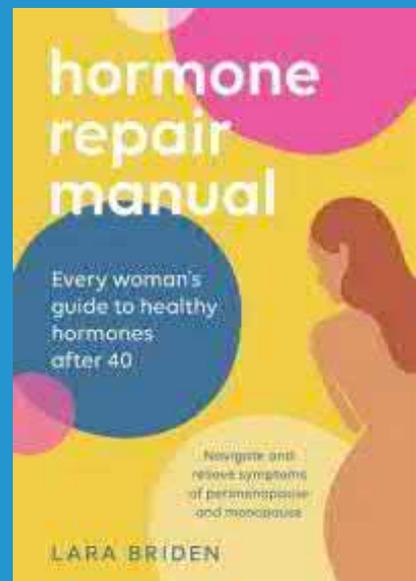
#### **Do you have a message for other doctors coping during this time?**

I don't think any of us envisaged we would be in this situation, but I think it comes down to being mindful of your own self-care, just as you would care for your patients. Sometimes we forget to do that as doctors, to our own detriment and the expense of our patients who rely on us.

**Dr.LoL:)**



## COMPETITION



**Win a copy of *THE HORMONE REPAIR MANUAL* courtesy of Pan Macmillan.**

*Hormone Repair Manual* is a practical guide to feeling better in your 40s, 50s, and beyond. It explains how to navigate the change of perimenopause and relieve symptoms with natural treatments such as diet, nutritional supplements, and bioidentical (body-identical) hormone therapy.

**To enter visit us online at [win.yourhealth.net.au](http://win.yourhealth.net.au)**

Competition opens 1st March 2021. The winning entry will be selected on 1st June 2021 and notified by email.

# A guide to: Cervical cancer screening

Cervical cancer is largely preventable. Early detection and appropriate treatment can significantly improve cervical cancer survival.

[Cervical cancer](#) incidence and mortality rates have halved in Australia since the introduction in 1991 of the [National Cervical Screening Program](#), which the Australian Government has renewed and updated.

Changes have included the introduction in 2007 of a vaccine against specific strains of the [human papillomavirus \(HPV\)](#), which causes almost all cases of cervical cancer. The [new screening program](#) is designed to work together with the HPV vaccination program, to help reduce the incidence of cervical cancer. **Whether you have been vaccinated or not, it's important to have regular cervical screening tests from the ages of 25 to 74.**

- The cervical screening test has replaced the Pap test.
- The new cervical screening test now looks for HPV (which causes almost all cervical cancers), not just abnormal cells (like the Pap test did).
- The new cervical screening test was introduced on 1 December 2017, so if you haven't had a test since then, you're now overdue.
- If you have previously had a Pap test, you should have your first HPV cervical screening test two years after your last Pap test.
- You are eligible for cervical screening if you are 25 to 74 years old, have a cervix and have ever been sexually active.

A better test means you will only need to screen **every five (5) years after your first HPV cervical screening test.**

Cervical cancer screening saves lives and is one of the most effective ways to prevent cervical cancer, or detect it earlier. But with COVID-19 to worry about, cervical screening has fallen off many of our to-do-lists. If you have received a reminder about cervical screening and don't know when you are due for screening, talk to your doctor. We have measures in place to keep the clinic COVID-free. There are also a few things you can do to help keep yourself and others safe such as:

- attend your appointment alone & arrive no more than 5 minutes early
- practice good hygiene, including hand washing
- keeping a distance of 1.5 metres from others
- stay home if unwell. You can reschedule your appointment.

**We don't want to miss the chance to prevent cervical cancer.**

**For more information:** TALK TO YOUR DOCTOR, phone the Cancer Council on 13 11 20 or visit [www.cancer.org.au](http://www.cancer.org.au)

Resources in other languages about cervical screening are available here: <https://www.cancer.org.au/cancer-information/causes-and-prevention/early-detection-and-screening/cervical-cancer-screening>

Information above sourced from <https://www.cancer.org.au/>



## WHEN WE ARE CLOSED

Phone the clinic after hours on 9875 1111 and your call will automatically be transferred to the Blackburn Clinic After Hours Service (up to 11:00pm Mon-Fri, staffed by the Principal Doctors of Blackburn Clinic) and to our Home Doctor Service (Ph 13 74 25) at all other times. There is a fee for the Blackburn Clinic After Hours Service, details available to all callers. Box Hill, Maroondah and Knox Private Hospitals all have emergency departments.

## APPOINTMENTS

Appointments should be made to see the doctor of your choice. Urgent problems are always seen quickly – please notify the receptionist. Book online at: [www.blackburnclinic.com.au](http://www.blackburnclinic.com.au)

## BILLING POLICY

We are a private billing clinic. Fees are payable at the time of consultation and full payment on the day will attract a discount. Fees are subject to regular review. Current fees and changes to fees are displayed in the waiting room and our website. Veterans Affairs gold card holders will be bulk-billed. If you have difficulty paying our fees at any time, please discuss this with your doctor.

## DIABETES CLINIC

Education and information about use of devices, healthy eating, and strategies to help manage your condition to avoid complications. Our Diabetes Clinic will keep you up to date with the latest approaches. Ask your doctor for a referral.

## SKIN CANCER CHECKS

Most patients should have a skin cancer check once per year. Please ask your doctor for a specific appointment for this, and to send you a reminder when your next SKIN CHECK is due

## IRON INFUSIONS

We can treat iron deficiency anaemia on-site, where medically appropriate, at considerable savings compared to the traditional day-surgery model. Please see your doctor for advice.

## HOME VISITS

On weekdays we do home visits for our patients in the local area if necessary. Where possible we ask that you ring before 10:00am to arrange this. Sometimes demand for this service will exceed our ability to respond and a locum visit may need to be arranged. Fees will apply for all home visits.

## MELBOURNE PATHOLOGY

Blackburn Clinic patients are able to access Melbourne Pathology services within Blackburn Clinic, from 8.00am - 1.00pm, Mon - Fri. Please take a number at reception and wait in our reception waiting area to be called.