

# **BESTER McKAY FAMILY DOCTORS LTD**

106 DON ST, INVERCARGILL, 9810

TEL 03-218 6325

FAX 03 218 9384

NEWSLETTER - JULY 2019

## **FLU VACCINATION**

We still have a small number of the 2019 flu vaccination for people at high risk of the flu. This includes :

- pregnant women,
- children under 4 with serious respiratory disease,
- people with severe asthma, heart disease, diabetes and other serious health problems making them more susceptible to influenza,
- those aged over 65 yrs of age.

Please phone our nurses to see if you are eligible.

## **MEASLES**

Due to ongoing measles cases in NZ and overseas, the Ministry of Health recommends measles vaccination for all those who are not sure if they have had 2 doses of measles immunisation.

Anyone born before 1 Jan 1969 is likely to be immune.

People born after 1 January 1969 require 2 measles vaccinations to be fully immunised. MMR vaccinations are scheduled at 15 months and 4 years. The vaccinations are free for New Zealand residents and contacts of cases. Vaccination is particularly important for those planning to travel overseas - to protect them and prevent outbreaks in New Zealand.

## **STAFF CHANGES:**

Dr McKay remains on leave. He is grateful for all your good wishes for his recovery. The practice appreciates the support from two people who have previously worked in the practice, and whom many of you will have met. We welcome back:

- Dr Ross Fieldes (GP locum)
- Anna Davidson (Nurse practitioner)

We are grateful for the extra work being done by the rest of the team. We understand that you may not always get to see the person you prefer to see, or may need to wait longer for appointments, and assure you we are working hard to ensure that you are still able to receive quality medical care.

## **WHAT IS A NURSE PRACTITIONER?**

A Nurse Practitioner (NP) is a highly skilled health practitioner who has advanced education, clinical training and has demonstrated competency. They practice beyond the level of a registered nurse and are able to consult independently. This includes requesting investigations, prescribing medicines, lodging ACC claims, completing WINZ forms and referring to specialists. Just like doctors and nurses, they know the limit of their skills and when to seek support. Due to a shortage of doctors,

NP's are increasingly being used in General Practice / Primary Healthcare.

### **PRACTICE BAD DEBT**

We are grateful to those who pay at the time of consultation, when collecting prescriptions, or by automatic payments. Due to the increasing number of debtors, and bad debtors, and following professional advice, we now expect people to pay at the time of a consultation, or when collecting a prescription. If you already have an outstanding debt, you will be required to pay before being seen or collecting a prescription.

### **PRESCRIPTION REQUESTS**

For patients with several medical problems and/or medications, we recommend that you see the doctor every 3 months. If the doctor considers your health to be stable, the doctor may suggest 6 monthly reviews and a prescription renewal inbetween. If you request prescriptions instead of seeing the doctor as has been recommended, the prescription will be for only a limited time period and will still incur a cost.

Phone prescription requests require 2 working days before being collected. Please have a list of the medications you require when requesting a prescription in person or by phone. Prescriptions need to be paid for either when requested or when collected.

### **NON-ATTENDANCE**

We appreciate people who cancel their appointments in a timely manner to allow other people to make use of the appointment. People who do not attend, or cancel less than an hour from their appointment time, are charged a non-attendance fee. This also applies to children aged under 14yrs.

### **PARKRUN INVERCARGILL**

Parkrun is a fun event where approximately 100 people walk or run a 5 km course through Queens Park, every Saturday, starting outside the Cricket Association at 9am in Winter and 8am in Summer. It is a great way to get fit or keep fit, meet people of all ages, and above all, it is FREE! You need to register on-line before attending. On the website you can also see pictures of many of the practice team who have become regular participants.  
<https://www.parkrun.co.nz/invercargill/>

### **GOOD SOURCES OF INFORMATION**

Some patients ask for information on their condition, or like to research it themselves. Apparently 89% of New Zealanders are active internet users. However, if you are not, we can print information for you.

Health Navigator is an excellent NZ website. It includes links to useful NZ based organisations, and other NZ apps.  
<https://www.healthnavigator.org.nz/>

Patient is a respected British website with clear, accurate, and up to date, quality advice from health professionals

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It is comprehensive, and covers a huge number of topics.

Moisturisers work by softening the skin, absorbing water, and preventing water evaporation from the skin. They make the skin less prone to irritation, and promote the skin's own properties to repair and heal. The benefit does not last long, which is why they have to be applied often, and used long term. The choice depends on how dry the skin is, and personal preference.

Common skin irritants include dry environments (heating, air conditioning, dehumidifiers, dry climates); regular water contact (bathing, swimming); chemicals (soaps, detergents, cosmetics); and repeated injury (rubbing, chaffing, physical work). Medical conditions like underactive thyroid, kidney failure, psoriasis and eczema/dermatitis make the skin more prone to drying and irritation.

In eczema/dermatitis frequent use of moisturisers reduces itching and stinging; makes eczema less severe; lowers the risk of eczema becoming infected; and results in less steroid cream being needed to control the eczema.

Moisturisers are available as creams, ointments, lotions, oils and gels. Creams (emulsion of oil and water) are softer

<https://www.healthnavigator.org.nz/>

<https://patient.info/>

and soak in easily but need to be applied more often. Ointments (formulations of soft, liquid and hard paraffin) are more effective at relieving dryness and less likely to sting than creams but are more greasy and messy. Lotions contain more water, soak in the fastest, need to be applied more often, and are not good for very dry skin. Gels are used on the face and scalp, and are unsuitable for very dry skin.

Commonly used creams (funded on prescription):

- Aqueous cream (without lauryl sulphate),
- Sorbolene cream with 10% glycerol
- Cetomacrogol cream
- Fatty cream (oil in water emulsion)
- Urea cream (e.g. 10% Urea) is good for scaly or very dry skin such as hand dermatitis and dry legs, but may sting if the skin is broken.

Barrier creams include Dimethicone which acts as a water repellent and helps protect hands from water and irritants, to prevent nappy rash, protect the skin around stomas and on pressure areas as long as the skin is not broken. Other barrier creams include zinc, or zinc and castor oil.

Moisturisers can also be used as soap substitutes, such as Aqueous cream (without lauryl sulphate), Emulsifying ointment and Pinetarsol. They can make surfaces and babies slippery, requiring caution in use.