



### OSC Staff Changes

It is with regret that we have accepted the resignation of GP Director Dr Gail Laas. Gail has been a valuable member of the OSC program since its inception in 2002. She brought a greatly valued commitment, enthusiasm and sense of humour to the committee. We would like to formally acknowledge and thank Gail for the valuable contribution she has made to the Obstetric Shared Care Program over the years and wish her all the best for the future. Dr Jenni Gould will be acting GP Director until the position has been finalised.

It is also with regret that we say goodbye to our Program Coordinator, Kate Leeder. Kate has been with the program since February 2006 and in that time the OSC program has greatly benefited from her exceptional coordination skills as well as her friendly and helpful personality. Kate leaves us to take on an exciting new position at the Department of Health and Ageing in Canberra. Good luck Kate!

Dragica Sosa of Adelaide Northern Division of General Practice has also announced her resignation from the OSC program. Dragica has always been a valued and committed member of the OSC team and we wish her all the best for the future!

Welcome to Emma Hellams who has taken over the position of Program Coordinator of the OSC program. Emma has a strong background in administration management and we welcome her to the team! Emma can be contacted at SADI on Monday, Tuesday, Thursday and Friday or emailed at [Emma.Hellams@sadi.org.au](mailto:Emma.Hellams@sadi.org.au).

### Protocols

We wish to remind GP's of a few issues that have come to our attention regarding the management of Shared Care Obstetric patients:

1) Timely referral for First Antenatal Visit

As per the Guidelines, and to comply with Medical Indemnity, all patients involved in shared care need to be referred to a Public Hospital, Obstetrician or GP Obstetrician at or before 20 WEEKS gestation. As there is often a several week delay before an appointment can be obtained, please make the booking appointment as soon as the pregnant woman consults you.

2) Routine Antenatal Investigations

Blood Group and Antibodies - When ordering Blood Group and antibodies, please SPECIFICALLY REQUEST ANTIBODIES. If this is not included on the request form the pathology laboratory is unable to do the antibodies as per Medicare guidelines. Please request full CBP at 28 weeks, not just Hb.

3) Nuchal Translucency

When requesting a Nuchal Translucency measurement (11- 13 wks 6d), please ensure that you indicate the reason that this is being requested (eg maternal age, high risk pregnancy). For further indications please consult Medicare guidelines. If there is not a specific indication the Ultrasound cost will not be covered by Medicare. If using private radiology firm, please indicate on the form that it is shared care so the woman will be bulk billed.

4) Anti D

When ordering Anti D for non immunized Rh negative patients at 28 and 34 weeks gestation, the referring GP should contact either the Booking Hospital Transfusion Laboratory or the Midwife Coordinator of that Hospital. GPs who are sending patients to Modbury for delivery can access 2 doses of AntiD for 28 and 34 week prophylaxis by ringing the Australian Red Cross Blood Transfusion Service (ARCBTS). If they ask to speak to the duty Medical Officer it will be arranged that the 2 doses will be couriered out to their surgery (no charge to them or the patient).

### Flinders Medical Centre - Outpatient Ultrasound

Flinders Medical Centre is temporarily unable to offer Obstetric Outpatients an Obstetric Ultrasound service. Ultrasounds will now be outsourced to private radiology firms. All referring GPs can refer Shared Care patients directly to Private Radiology Departments. Please include on the Request form that the Patient is Shared Care as this will ensure that the patient is Bulk Billed. Those referred to FMC will be outsourced from there to a location which may not be convenient for the patient.

### Intra- Uterine Growth Restriction

It has been drawn to our attention by several of the Consultant Obstetricians that OSC GPs are not diagnosing suspected IUGR. The Obstetricians are seeing patients at 36 weeks with fetuses clinically <10%ile. The failure to diagnose IUGR can have very serious outcomes for the neonate and therefore it is vital that it is not missed. To ensure you do not miss IUGR you must measure the Symphysio-fundal height (SFH) in cms at EVERY visit from 20 weeks and

### **Intra- Uterine Growth Restriction (cont...)**

record the measurement in the SA Pregnancy Record and on the Symphysio-fundal Graph in the SAPR. If SFH <10% on the graph, ensure dates are correct and if so refer patient for a growth ultrasound stating "suspected IUGR" and requesting "Foetal biometry, Umbilical Dopplers, AFI".

The foetal parameters should then be recorded on the Graph in the SAPR. If any of the foetal parameters are <10% or Dopplers or AFI are abnormal refer the woman to ANC within a few days. If foetal parameters are <3% or you are uncertain of the significance of the ultrasound report discuss with the Obstetric Registrar/Consultant for further advice. Record the advice in the SAPR and act on it! The graphs in the SAPR are included to assist your antenatal management and assessment of your pregnant patient. Please use them correctly, don't just guess! We want all our OSC patients to have good outcomes as clinic patients - healthy, well-grown babies!

### **CPD – Online GP Learning**

Online CPD for Obstetric Shared Cared is now available for rural GPs through RACGP GPeLearning. GPs who are members of RACGP automatically have access to this learning material as part of their membership. Rural Shared Care GPs who are not members of RACGP should contact [Emma.Hellams@sadi.org.au](mailto:Emma.Hellams@sadi.org.au) to obtain a password allowing them access through the OSC program, the funding of which will be paid for by Country Health SA. There are currently 2 relevant CPD activities available: Antenatal screening and Post Natal Depression.

### **Feedback from Rural Accreditation Seminar**

The Rural Accreditation seminar was held in conjunction with Adelaide Hills Division of General Practice on November 18, 2006. The day was a great success with 50 GPs attending the seminar at the picturesque Auchendarroch House in Mount Barker. Accreditation certificates and presentations will be forwarded to participating GPs in the coming weeks. We would like to thank the Adelaide Hills Division of General Practice for organising such a successful seminar.

### **Field testing of Pregnancy Lifescripts Resources**

SADI is in the process of recruiting Obstetric Shared Care GPs to field test prototype Pregnancy Lifescripts resources as part of our role as a partner with the project to develop 'Pregnancy Lifescripts' resources. The aim of the Pregnancy Lifescripts Initiative is to build on the existing Lifescripts resources that have been designed to support general practice to assist patients to make lifestyle risk factors behaviour change. Pregnancy Lifescripts will target lifestyle issues that have a profound effect on the health of mother and baby.

As GPs interested in antenatal care, we need your experience and expertise to field test and review prototype Pregnancy Lifescripts resources with your patients. Feedback on the use of the prototype resources will be sought via an evaluation survey and an evaluative focus group at the end of the field testing period. We are looking for a range of representation from both rural and urban GPs. GPs will be provided with an honorarium payment to help cover costs associated with field testing the resources. Rural GPs will be reimbursed for travel expenses to attend the evaluative focus group. Please see attached flier for further information or contact Lifescripts Coordinator on 8271 8988.

CPD 2007			
March 24	ACEDGP/WCH	Accreditation	Seminar - ALM
April 4	AWGPN/TQEH	Diabetes	
May	SDGP/FMC	Depression	
May	ANDGP/LMHS	Infectious Diseases in Pregnancy	
August 8	AWGPN/TQEH	Management of Pre and Early pregnancy	
September	ANEDGP/MPH	Common Problems in Pregnancy	
September 5	ACEDGP/WCH	Neonatal issues	
October	SDGP/FMC	Drug Addiction	
November	ANDGP/LMHS	Thrombophilia & Medical Conditions	



As the year draws to a close we wish to thank you all for your continued support. On behalf of the Shared Care Committee I would particularly like to thank Jenni Goold who has acted in the role of GP Director since Gail's resignation in September. We wish you all a Very Merry Christmas and a safe and happy new year.

