

1. Antenatal HIV Screening Referrer Survey Results

Dr Graham Mills, infectious diseases specialist, and Caroline Wharry HIV clinical nurse specialist, would like to thank everyone who contributed to a survey sent out last November to all Waikato DHB region midwives and GPs as part of the continuous quality improvement plan for the programme. The aim was to ascertain the level of information referrers were providing to pregnant women when requesting antenatal blood tests.

A 41% response rate was achieved. Of the respondents, 92% of midwives and 72% of GPs stated they had received specific antenatal HIV education. The most pleasing aspect of the survey was that those who had received education had a >95% rate of discussing HIV prior to ordering the antenatal blood test. 89% of midwives provided written information to woman regarding antenatal blood tests compared to 58% of GPs. 12% of the GPs who responded did not discuss any of the antenatal blood tests with woman prior to the ordering of the antenatal tests. This was far more likely to occur in those who had not undertaken any form of specific antenatal HIV education.

They would like to remind all health care professionals that Rights 4 to 7 of the New Zealand Health and Disability Code require:

- the right to services of an appropriate standard
- the right to effective communication
- the right to be fully informed
- the right to make an informed choice and give informed consent

This survey shows aspects of management that would be found in breach of the code. To assist you to help your patients make an informed choice, the patient information pamphlet "Your Pregnancy: Blood tests to help protect you, your baby and your whanau" can be downloaded from

<http://www.waikatodhb.govt.nz/wdwb/default.asp?content=1128> or fax 07 858 0922 to order free copies (form G1693HWF and quote RC1219). Also available from the same source is "HIV Screening in pregnancy: Information for Health Professionals". The full report or further information is available from Dr Graham Mills, infectious diseases physician, Waikato Hospital or Caroline Wharry, HIV clinical nurse specialist, 07 839 8899 ext 23040, wharryc@waikatodhb.govt.nz

2. Electronic Discharge Summary Progress

Since 2006 some departments at Waikato Hospital have been generating discharge summaries electronically.

The decision has now been made to move fully to electronic **generation** of discharge summaries and to phase out the hand written form, with a target date of March this year for all inpatient discharge summaries to be produced electronically.

This will contribute to the development of an electronic patient record and improve access to a summary of the patient admission for future reference within Health Waikato.

A legible discharge summary and printed name of the doctor who wrote it will be the advantage for GPs. It is also a step in preparation for electronic **transmission** of discharge summaries. The potential benefits of transmitting discharge summaries electronically is clearly recognised although a timeframe is not yet confirmed.

3. Update on construction work at Waikato and Thames Hospitals

Waikato Hospital

The new parking building, Transit Lounge and entry building

are now open. Later in February, this will become the new main entrance to the hospital buildings when the old main entrance at the top of the hill (off Pembroke Street) closes to allow for more construction work. The new buildings all have direct lift access to the main hospital ("red") corridor on Level 1.

Refurbishment of the delivery suite has begun and the Women's Assessment Unit (WAU) has been temporarily established across the foyer to take some pressure off the delivery suite until refurbishment is complete. It caters for any pregnant woman not in active labour. When the refurbishment is complete, the WAU will occupy half of the delivery suite.

Thames Hospital

The new kitchen and dining room are now open and the old kitchen block has been demolished. The Thames Clinical Centre's roof is currently being worked on and the first section of the Inpatient Centre's framing is up. Work on the whanau facility is finished and the bund wall almost complete.

For more information about the project and for regular updates visit www.waikatodhb.govt.nz

4. Welcome to...

Julie-Anne Bell, haematologist with special interest in thrombosis and haemostasis, qualified and trained in haematology in London, and in particular in the Haemophilia Centre at St Thomas' Hospital. She especially welcomes enquiries and referrals for patients with a suspected bleeding disorder, and also those with venous thrombotic problems.

Jane Creighton, locum general and breast surgeon, joining us until August 2008.

Alison Stearn, mental health for older persons, was born, bred and trained in the UK and arrived in New Zealand with just a backpack in November 2005. She worked as consultant psychiatrist for older people in Rotorua for 12 months, then spent two months travelling from Cape Reinga to Invercargill, and pretty much everywhere in between. The experience of NZ countryside, lifestyle and the flat white has drawn her to stay here. After 10 months with the Crisis Team and in-patient unit in Dunedin she has joined the Older Person's Mental Health team based in Hamilton. Her professional interests are older person's mental health, psychological aspects of Huntington's disease, medical education and cultural aspects of health. She says she is always looking for outlets to teach (...and learn), so is keen to meet with groups of GPs. Other interests are environmental issues, discovering new things and being creative with clay.

Ziad Thotithil, radiation oncology, trained in oncology in India and Kuwait and is a Fellow of the Royal College of Radiologists in clinical oncology. He has been in Hamilton since 2005, initially as medical oncology registrar then as a specialist radiation oncologist from September 2007. His special interest is in combined chemo-radiotherapy for malignant tumours. He is married with two kids, a football (soccer) fan and still trying to understand why kiwis refer to rugby as "football"!!

Annette van Zeist-Jongman, forensic psychiatry, arrived from the Netherlands just two months ago having worked there for 10 years as a psychiatrist in forensic psychiatry. She works at the Henry Bennett Centre, ward 31, with rehabilitation and forensic patients. She says her family (husband and nine year old son) are all very happy to live in this beautiful country!

Clinic	Category	Waiting Time
Audiology	Children 9-32 mths	2 months
	Under 17 years	2-3 months
	Children's hearing aids	4 weeks
	Adult diagnostic tests	3 months
	Adult hearing aids	3 months
	Central auditory processing test	6 months
Breast Care	Urgent	3 weeks
	Semi-urgent	3 months
	*BCC Imaging Urgent only	2 weeks
Cardiac Surgery	Urgent	1-3 weeks
	Semi-urgent	3-6 weeks
Cardiology	Urgent	1-2 months
	Semi-urgent	2-6 months
	Routine	6 months
Colposcopy	Invasive	Within 7 days
	High grade	4 weeks
	Low grade	26 weeks
	Non cervical	26 weeks
Dental	Urgent	24 hours
	Semi-urgent	3 weeks
	Routine	3 months
Dermatology (1) Fax urgent referrals to 07 839 8670	Urgent	5 days
	Semi-urgent	3 months
	Routine	6 months
Paediatric Dermatology		5 months
Dermatology Lesion Clinic	Urgent	7 days
	Semi-urgent	4 weeks
	Routine	6 months
Diabetes Consultant (2)	Urgent	Within 2 weeks
	Semi-urgent	Within 1 month
	Routine	Within 6 months
Diabetes Nurse Educator	Urgent	Within 7 days
	Semi-urgent	Within 6 weeks
Endocrinology	Urgent	6 weeks
	Semi-urgent	5 months
	Routine	Within 6 months
Endoscopy/Colonoscopy Medical	Urgent	4-6 weeks
	Semi-Urgent	4-6 weeks
Surgical	Urgent	4-6 weeks
	Semi-urgent	12-18 months
ENT	Urgent	1-6 weeks
	Semi-urgent (children)	4-5 months
	Semi-urgent (adults)	6 months
Gastro-enterology	Urgent	2-4 weeks
	Semi-urgent	2-6 weeks
General Medicine	Urgent	1-2 weeks
	Semi-urgent	2-4 weeks
	Routine	2-3 months
General Surgery	Urgent	1-4 weeks
	Semi urgent	2-6 months
Gynaecology	Urgent	2 weeks
	Semi-urgent	3 months
	Routine	6 months
Haematology	Urgent	2-8 weeks
	Semi-urgent	6-4 weeks
	Routine	4-10 months
	DVT	4 months
Maxillo-facial	Urgent	Within 24 hours
	Semi-urgent	Within 3 weeks
	Routine	3 months
Neurology	Urgent	1-3 months
	Semi-urgent	3-10 months
	EMG urgent	1-4 months
	Routine	4-6 months
	EEG urgent	2-8 weeks
	routine	2-6 months
Neurosurgery	Urgent	Within 1 month
	Semi-urgent	Within 6 months
	Routine	
Oncology and Medical	Priority 1	1-2 days
	Priority 2	5-10 working days
	Priority 3	35-40 working days
Radiation	Priority 1	1-2 days
	Priority 2	5-10 working days
	Priority 3	30-35 working days

Clinic	Category	Waiting Time
Ophthalmology	Urgent	within 1 month
	Urgent laser	1-3 weeks
	Semi-urgent – Children	within 6 months
	Semi-urgent – Adults	6 months
	Semi-urgent (diabetic)	1 month
	Minor Operation Clinic	within 6 months
Orthopaedic	General – Urgent	1-8 weeks
	Semi-urgent	Up to 3 months
	Routine	Up to 6 months
	Paediatrics – Urgent	1-6 weeks
	Semi-urgent	Up to 4 months
	Routine	Up to 6 months
	Paediatric Gait Clinic	NB: referrals may be initially seen by a Generalist Orthopaedic Surgeon
	CDH/DDH Assess	Within 3 months
		1-6 weeks
Paediatric Medicine	Urgent	1-2 months
	Semi-urgent	3 months
	Routine	3-6 months
Paediatric Surgical	Urgent	2-4 weeks
	Semi-urgent	4-6 weeks
	Routine	8-12 weeks
Pain clinic	Urgent	Up to 1 month
	Semi-urgent	Up to 3 months
	Routine	6 months
Physiotherapy	General musculoskeletal	5 days (urgent) 6-8 weeks (routine)
	Respiratory	5 days (urgent) 4 weeks (semiurgent)
	Rheumatology	4 weeks
	Women's Health	5 days (urgent) 3-4 weeks (routine)
	Continance	5 days (urgent) 4 weeks (semiurgent) 6 months (non-urgent)
Plastics (1) Fax immediate / acute referrals to 07 839 8670	Urgent	2 weeks
	Semi-urgent	3 months
	Routine	5 months
Plastics Lesion clinic	Urgent	2 weeks
	Semi-urgent	2 months
	Routine	4 months
Rehabilitation	Day Clinic (Physio Only)	1-3 weeks
	Day Clinic (OT)	1-3 weeks
	Rehab Clinic (Physio)	1-3 weeks
	Rehab Clinic (OT)	1-3 weeks
	Rehab Clinic (Neuropsychologist)	
	Urgent	1-3 weeks
	Semi-urgent	1-6 months
	Routine	2 years
Renal	Urgent	1-4 weeks
	Semi-urgent	2-4 months
	Routine	4-6 months
Respiratory	Urgent	1-4 weeks
	Semi-urgent	1-2 months
	Routine	4-6 months
Rheumatology (3)	Urgent	1-4 weeks
	Semi-urgent	1-2 months
	Routine	2-4 months
Thyroid	Urgent	5 weeks
	Semi-urgent	5 months
	Routine	4-6 months
Ultrasound	Very Urgent	1 week
	Urgent	2 weeks
	Priority	4 weeks
	Routine	3 months
	Non-urgent	6 months
Urology		Within 2 months
Vascular	Urgent	1-4 weeks
	Semi-urgent	2-4 months
	Routine	4-6 months
Vascular Surgery	Urgent	1-4 weeks
	Semi-urgent	2-4 months
	Routine	4-6 months
Adult Mental Health Waiting Times		
Triage (face to face or phone triage)	Crisis referrals Non-crisis/routine	Within 24 hours Within 2 weeks

1. Immediate & urgent dermatology/plastics cases must be discussed with the specialist or registrar to allow appropriate prioritisation.

2. All urgent diabetes referrals can be seen on the same day.

3. All urgent rheumatology cases should be discussed with the rheumatologist.