

DEPARTMENT OF HEALTH,
P.O. BOX 5013,
WELLINGTON.

31 August 1971.

CLINICAL SERVICES' LETTER NO. 109

TO MEDICAL PRACTITIONERS

Dear Doctor,

DISPOSAL OF DISPOSABLE SYRINGES

Recent suggestions in the press and elsewhere that the availability of syringes should be restricted emphasise the need for appropriate action with these items after use, so that they cannot be employed for illicit purposes.

Destruction of the syringe itself could present considerable difficulty, but the needle, which is the crucial part of the instrument, is readily rendered useless by bending and breaking the shaft.

Your co-operation is sought to ensure that all needles are rendered useless in this way, prior to disposal.

DISPOSABLE SYRINGES: DANGERS OF REUSE

The Medical Journal of Australia of 30 May 1970 (p. 1126) contained a review* of the methods which might be employed to resterilise disposable plastic hypodermic syringes. The conclusion was reached that only heat (autoclave) and gamma irradiation could be regarded as reliable sterilising agents. "Since the former will soften and distort the plastics used in syringes, this leaves only the latter method as a possibility. This is beyond the scope of most hospitals, but in addition, the cumulative radiation dose may seriously damage the material."

The safest attitude to adopt is that disposables are disposables; they should invariably be treated as such. Attempts to reuse them could have serious consequences.

TREATMENT OF SCOLIOSIS

Important advances in the care of patients with scoliosis have led to the development of special facilities within the orthopaedic departments of Auckland and Dunedin Hospitals. Provision has been made for the transport of patients from other hospital areas to these centres. It is important however that arrangements are made through the local hospital board office before transfer takes place.

It is recommended that patients be referred in the first instance to the local board's orthopaedic surgeon. This will ensure a board to board transfer, with the available financial assistance.

*By G. W. Hastings, Department of Polymer Science, University of New South Wales, and B. Bloch, Sydney Hospital.

SOUNDPROOFING OF CONSULTING ROOMS

A visiting practitioner reports that many doctors do not appear to be aware that their consulting rooms are not soundproof. Sometimes a whisper can be heard in the waiting room through the closed door. Some doctors overcome this difficulty by installing a radio in the waiting room.

Yours faithfully,



(A. W. S. Thompon)
Director,



(A. H. Paul)
Deputy Director,

Division of Clinical Services

1971 ANNUAL REPORT OF THE DEPARTMENT OF HEALTH

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