

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

14 December 1973.

CLINICAL SERVICES LETTER NO. 131
TO MEDICAL PRACTITIONERS
(Copy to Retail Pharmacists)

Dear Doctor,

**"CHILDPROOF" CONTAINERS AND HOARDING OF
SURPLUS DRUGS**

Although the use of "childproof" containers and closures must be encouraged, they are not suitable in all circumstances. Some doctors appear to be ordering them as a routine.

The Curly Locks type of closure is unsuitable for liquid preparations containing powders in suspension, and those containing syrups. The Palm-N-Turn vial is not intended for liquids. Some patients, particularly the elderly, cannot operate either of the available safety devices.

Individual circumstances should therefore be considered when ordering this type of container.

It remains true that the major factors in avoiding accidents are care on the part of patients in keeping medicines out of the reach of children, and the destruction of surplus drugs once a course of treatment has been completed.

Patients should be encouraged to dispose of unused medicines by flushing down the toilet, or by burning.

MEDICAL TREATMENT OF MERCHANT SEAMEN

The Department of Health has established a prototype seamen's health centre on the Auckland Waterfront, as part of a pilot study being undertaken for the World Health Organization. It is run in conjunction with the occupational health centre there.

The other prototype has been set up at Gdynia in Poland.

Dr James Frew, port health officer and director of the centre, has pointed out that there is a great need for some form of medical documentation for merchant seamen.

A start has been made at the Auckland Seamen's Centre by supplying each merchant seaman attending with a 20 cm × 13 cm card with envelope. On this card are written the bare details of his complaint, the treatment given, and any prescriptions issued. The seaman is told that this card is his own personal

property and that he should take it with him whenever he attends a doctor. It is hoped that each medical practitioner attended will make his own notes on this card and return it to the seaman.

It is fully appreciated that this system is imperfect; carelessness and forgetfulness on the seamen's part, and language difficulties for both seamen and doctors, will tend to reduce its effectiveness. There is, however, a degree of "international language" in medical terms, and this should provide a simple basis on which easier diagnoses and better treatment of merchant seamen can be developed. This will depend to a great extent on the co-operation and tolerance of the medical profession, and your personal help in this matter is earnestly requested.

MEDICAL SERVICES TO WAR PENSIONERS

Medical practitioners who treat war pensioners for a pensionable disability are entitled to a fee from the War Pensions Branch, Department of Social Welfare *in full settlement*. The fee is specified in the War Pensions Regulations and is negotiated by the Medical Association of New Zealand with Government.

War pensioners have been issued with a treatment card giving details of the pensionable disability to facilitate this arrangement.

If a war pensioner seeks treatment for other than his stated war disability medical practitioners are not entitled to payment under the War Pensions Regulations but may claim general medical services benefit and charge the appropriate private fee to the patient.

LIST OF SPECIALISTS IN ANAESTHESIA FOR PURPOSES OF PART II, SOCIAL SECURITY ACT 1964

It is desired to remind all concerned that the One Part Diploma in Anaesthetics no longer qualifies applicants for recognition as specialist anaesthetists for the purpose of claiming benefits under the above Act.

It appears that recently there has been some misunderstanding concerning the status of this qualification.

SPECIALIST RECOGNITION: HEALTH BENEFITS UNDER SOCIAL SECURITY ACT

There has been a change in the arrangements for the recognition of specialists for purposes of the specialist consultation benefit and maternity benefits under sections 97 and 113 of the Social Security Act.

The Department of Health's "green list" of specialists recognised for this purpose has been closed. Future recognition will be in accordance with section 39, Medical Practitioners Act 1968, i.e., the Medical Council's Register of Specialists.

The necessary legislative changes have been made in the Social Security Amendment Bill 1973, and it is expected the amendment will be law by the time this letter is issued. All specialists who have already been recognised in the department's List of Recognised Specialists (the "green list") will be safeguarded. No further action is required on their part.

Specialists whose names have not already been included in the department's list, and are not in the Medical Council's Register of Specialists, who wish their services to qualify for health benefits, should apply to the Medical Council of New Zealand for recognition.

The purpose of this change is to unify the system of statutory recognition of medical specialists under the Medical Practitioners Act. This was not possible when the specialist consultation benefit was introduced in 1969, as at that time the Medical Council had not established its Register of Specialists. Interim arrangements were therefore necessary.

Yours faithfully,



(A. W. S. Thompson)
Director,



(A. H. Paul)
Deputy Director,

Division of Clinical Services.

**"WHERE SHOULD I PRACTISE?"
1973 EDITION**

Corrections to Errors

Page 34—The Queen Mary Hospital, **Hanmer**, has 118 beds, and is for the treatment of alcoholism.

Pages 45, 46—**Tokoroa**: No whole-time physicians; two general surgeons. Population 17,800, est. general practice population 23,000. One G.P. required by Easter 1974.

Page 49—**Lumsden**: Est. practice population exceeds 4,000.

Page 51—**Napier**: Public hospital beds: General 310, maternity 25.

Page 61—**Otaki**: Est. practice population 6,000.

Page 62—**Palmerston North**: Contact: Dr W. C. Duncan, 24 Manapouri Crescent, Palmerston North.

Page 72—**Hunterville**: Maternity Hospital, 8 beds.

(Regrettably, many of the figures for *Whole-time Hospital Specialists* quoted in this edition are incorrect.)

GENERAL PRACTICE VACANCY

A general practitioner is required at Wainuiomata, 10 miles from Lower Hutt.

Practice population is in excess of 18,000. There are at present three other doctors in Wainuiomata and plans for a health centre have been approved. Assistance could be available to purchase own home.

Wainuiomata is a rapidly-expanding county borough. The majority of residents own their own homes. About 70 acres have been set aside for light industry, and the county borough is served by 13 schools and most attractive sporting and recreational amenities.

Details from: Mr H. Slingsby,
Secretary to the Wainuiomata County Borough Council,
P.O. Box 43-017,
Wainuiomata.