

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

19 July 1974.

CLINICAL SERVICES LETTER NO. 139

TO MEDICAL PRACTITIONERS AND DENTISTS

(Copy to Proprietors of Retail Pharmacies)

Dear Sir/Madam,

SUPPLIES OF CONTRACEPTIVES ON MEDICAL GROUNDS

If the prevention of pregnancy is necessary on medical grounds, and the patient could not reasonably be expected to meet the cost of contraceptive drugs, appliances, or materials, these may be supplied free of charge.

Applications should be addressed to the Director of Clinical Services.

Each application is considered on its merits, and doctors are asked not to submit cases which cannot be adequately supported. Applications should be short and to the point, but in addition to supplying details of the proposed method of contraception, the following must be included:

- (a) Brief clinical particulars.
- (b) Reasons why the prevention of pregnancy is considered to be necessary on medical grounds.
- (c) A statement that in the doctor's opinion it would be unreasonable to expect the patient to bear the cost.

SPECIALIST CONSULTATION BENEFIT: SELF-REFERRAL BY DOCTORS

The question has arisen whether the specialist consultation benefit is payable where a medical practitioner writes his own referral note, when he wishes to consult a specialist about his own health.

One of the conditions of the Specialist Consultation Benefit is that the patient must be referred to a recognised specialist by another doctor. This was intended to prevent a specialist from referring patients to himself. It does not exclude referral to a specialist by another doctor who is himself the patient.

Medical Officers of Health have been advised of this ruling.

DRUGS AVAILABLE UNDER THE DRUG TARIFF FROM HOSPITAL PHARMACIES ONLY

From time to time patients complain that they have not been advised by their practitioner that a prescription written for them can only be dispensed free of charge at a public hospital dispensary. It is not until the prescription is presented at a retail pharmacy that they are made aware of the situation.

Practitioners are requested to inform their patients whenever they prescribe drugs which are restricted in this way. These drugs are listed periodically in Clinical Services Letters. The most recent list appears in Clinical Services Letter No. 138, dated 19 July 1974.

PHARMACEUTICAL BENEFITS: SPECIAL APPROVALS

When applying for a special supply at the cost of public funds of a drug which is not normally chargeable, practitioners sometimes ask for the endorsed prescription to be sent direct to the patient. This can lead to difficulties.

The name of the patient, or his address, may be difficult to decipher, and some of these approvals have gone astray.

We find it is safer to post the approval to the practitioner whose name and address is usually printed on the application, or can be verified from the Registers.

Please note that when requesting a special supply the following information is required:

1. Brief clinical details.
2. Practitioner to indicate that in his opinion it would be unreasonable for the patient to have to pay for the drug in question.

Practitioners frequently object to this requirement. The fact is, however, that the whole principle of approving a special supply, at the cost of public funds, of a drug the cost of which patients normally have to meet themselves, turns on this question.

As most of these drugs are expensive, and many are eventually included in the Drug Tariff, the practitioner should have little difficulty in deciding whether or not it would be reasonable to expect the patient to pay for his supply.

3. Signature of practitioner, together with printed name and address.

Some applications are received which do not show the practitioner's address, or are written from a public hospital. If in addition the practitioner's signature is illegible, we are in trouble.

TEMPORARY PERMITS: VISITORS FROM PACIFIC AREA

The Department of Labour is concerned at the number of requests for extensions to temporary entry permits on medical grounds, which are being received from persons visiting this country from Tonga, Western Samoa, and other Pacific territories.

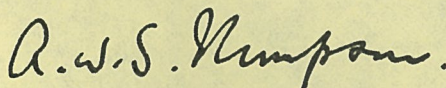
For many years the Department of Labour has made the procedure for visits to New Zealand from the Pacific area a relatively simple and straightforward process. In general, any national of Tonga, Western Samoa, or Fiji may visit New Zealand for a maximum period of 3 months, provided return tickets are produced and the applicant has sufficient funds to maintain himself in this country.

It is not intended that this system should be used for the purpose of obtaining medical treatment. There is an established procedure whereby persons requiring to enter New Zealand for medical treatment may make prior application to do so, with the support of the medical authorities of their own country.

The Department of Labour is finding that many persons, particularly Tongans and Western Samoans in the Auckland and Wellington areas, are travelling to New Zealand as visitors, and are then seeking to extend their stay by obtaining medical certificates shortly before the expiry date of their temporary permits.

While it is recognised that there will always be genuine cases where visitors become ill or suffer accident while here, many of the medical certificates submitted to the Department of Labour describe conditions which are common in the Pacific area, and for which treatment is readily available in their home countries. For this reason doctors are advised to view requests from such visitors for medical certificates with some circumspection.

Yours faithfully,



(A. W. S. Thompson)
Director,



(A. H. Paul)
Deputy Director,

Division of Clinical Services.

MONOCOMPONENT INSULINS AND HYPOGLYCAEMIA

It is understood that doctors have been advised on two occasions by the distributors of these new insulin preparations of the need to adjust the dosage of patients changing from regular insulins to the monocomponent form, in order to avoid hypoglycaemic reactions in certain cases.

This is again drawn to your attention, as the Department has been advised that there have been some mild cases of hypoglycaemia following what appears to have been inadequate dosage adjustment.

GENERAL PRACTICE VACANCY, TE KARAKA

16 miles from Gisborne. Qualifies as a rural area. Suitable residence and attached surgery available at reasonable rental. This practice would suit a semi-retired doctor.

Inquiries: Medical Officer of Health, P.O. Box 548, Gisborne.

Yours faithfully,



(A. R. Shearer)
Deputy Director