



# RDMA's Newsletter

# Newsletter May 2022

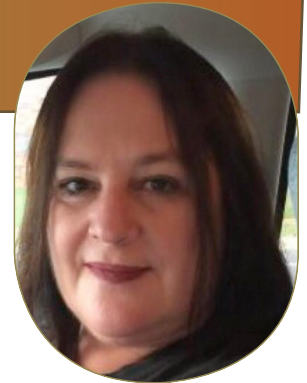
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## RDMA's President Report Dr Kimberley Bondeson



The Redcliffe Peninsular and much of Queensland and the Eastern Coast of Australia is in the middle of a "rain bomb" – constant rain, flash floods and flooding over the last week. A lot of the roads along the Queensland coastal roads are intermittently closed due to flooding.

It has been a number of years since we have seen this sort of wet weather, and whilst it is good for the dams and the farmers, the roads are closed and flooding occurs, and we have to be careful when out driving. Over the last few days, there have been several deaths from drivers been caught in floodwaters in their cars.

We have a federal election coming up shortly, and it is interesting to watch the politicians as they scramble and vie for votes. The labour party has promised to allocate \$135 million over four years to trial 50 urgent care bulk-billing clinics across Australia. They would be open every day between 8 am and 10pm. (2nd May, The Medical Republic). Sound familiar? It is. This is a revamp of the failed Rudd government GP super clinics. As Doctors and practice owners, we know that this format does not work. It is not financially sustainable, and effectively poaches doctors and nurses from established GP practices.

In the Redcliffe Hospital grounds there is a lovely \$11.7 million building called the "Morten Bay Integrated Care Building". Although the actual cost quoted may not be accurate, it is still an expensive building. According to one of the logo designers website (PURO), this building is a 6 story medical and educational GP Super Clinic, built in 2011, located at 102 Anzac Avenue in Redcliffe, just in front of the Redcliffe Hospital. According to PURO's website, "it was part of the Australian Governments GP Super Clinic Program and was developed in conjunction with the owner using the "from concept to reality" capabilities

of the construction group to produce a superb outcome for all parties. The project incorporates an underground carpark.

Its website states it is open 5 days a week, from 8am to 5pm, and lists 4 GP's as working there. It seems that its original plan, did not quite follow through. However, the building does benefit greatly the Redcliffe Hospital, and is used for some of its Out Patients appointments, which is of course, of great benefit to patients.

It is obvious to see that sometimes, great plans do not quite go as planned initially. As the election comes closer, we will see the different politicians and parties put forth their various plans and ideas for health. On a personal note, I do not see that health is of such importance in this election, it seems to be focusing on the economy.

Information and discussion on Covid 19 in the media and from the election campaign seems to be taking a step back, as we are learning to live with this virus in our community. It is with great interest we will watch and see what unfolds in this election, and hopefully our health system will see some significant benefits.

Kimberley Bondeson, RDMA President

**Note: Free RDMA  
Membership For  
Doctors in Training**  
**RDMA Meeting Dates  
Page 2.**

*The Redcliffe & District Local Medical Association sincerely thanks QML Pathology for the distribution of the monthly newsletter.*

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## RDMA 2022 MEETING DATES:

For all queries contact Angela our Meeting

Convener: Phone: (07) 3049 4444

CPD Points Attendance Certificate Available

Venue: Golden Ox Restaurant, Redcliffe

Time: 7.00 pm for 7.30 pm

Next

Tuesday	February	22nd
Wednesday	March	30th
Tuesday	April	26th
Wednesday	May	25th
✓ Tuesday	June	21st
Wednesday	July	27th
ANNUAL GENERAL MEETING AGM		
Tuesday	August	23rd
Wednesday	September	28th
Tuesday	October	25th
NETWORKING MEETING		
Friday	November	18th

Newsletter Editor Dr Wayne Herdy

Newsletter Publisher.

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Advertising & Contribution **15th June 2022**

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- ▶ 10% discount for 3 or more placements
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- ▶ Payments required within 10 working days or discounts will be removed unless a payment plan is outlined at the outset.

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- ▶ No charge to current RDMA members.
- ▶ Non-members \$55.00

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# The team behind your result



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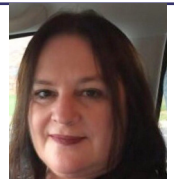
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Email: [qml\\_rdma@qml.com.au](mailto:qml_rdma@qml.com.au)  
Ms Kym James M: 0466480315



# ***RDMA Meeting Pictorial 26th April 2022***

RDMA's April Meeting Chaired by Dr Wayne Herdy who introduced tonight's speakers.

Sponsor: Monserrate Day Hospital,  
Sponsor's Representative Ms Suzette Fletcher

Tonight's Speaker Dr Chris Jardim  
Topic: Plastic and Reconstructive Surgeon

Photos below clockwise left to the right.

1. Suzette Fletcher, Speaker Dr Chris Jardim and Kym James QML Meeting Convenor.

2. Speaker Dr Bav Mancharana.

3. Drs Maria Bolton and Wayne Herdy,

4. Dr Raviegh Farhat (New Member), Kym James and Dr Alka Kothari

5. Suzette Fletcher & Geoff Talbot

6. Candidates for AMAQ Committee and Branch Council Elections: Maria Bolton, Geoffry Hawson, Bav Mancharan, Alka Kothari and Wayne Herdy.

7. New Member Lachlan Power.



**NEXT MEETING DATE 25TH MAY 2022**

# Monthly Meeting

**Redcliffe & District Medical Association Inc.**

**DATE:** Wednesday 25th May 2022

**TIME:** 7pm for 7:30pm start

**VENUE:** Regency Room – The Ox, 330 Oxley Avenue, Margate

**COST:** Financial members, interns, doctors in training and medical students – FREE. Non-Financial members – \$30 payable at the door (Membership applications available).

<b>AGENDA:</b>	7:00pm	Arrival & Registration
	7:30pm	Be seated – Entrée served Welcome by Dr Kimberley Bondeson – President RDMA Inc Sponsors: The Moreton Eye Group
	7:30pm	Speakers: Dr Gurmit Uppal & Dr Graham Hay-Smith Topic: NEXT GENERATION CATARACT LENSES NEXT GENERATION SURGERY
	8:00pm	Q&A
	8:30pm	General Business - Dessert served Tea & Coffee served

**RSVP:** By Friday 18th February 2022  
(e) [RDMA@qml.com.au](mailto:RDMA@qml.com.au) or 0413 760 961

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## AMA releases its election health report card

The AMA’s [election health report card](#) has been released today, giving Australians an overview of each of the major parties’ health commitments made during the campaign so far.

AMA President Dr Omar Khorshid said healthcare, for good reason, had been one of the major concerns of the public during the election campaign, but despite this neither major party had committed to a public hospital funding model which would help alleviate the enormous stress on the hospital system.

“The AMA’s logjam campaign has called on Government and Opposition to commit to a new hospital funding agreement with State Governments, aimed at addressing the crisis of ambulance ramping, overloaded emergency departments and delayed essential surgery,” he said.

“But the lack of commitment to the necessary \$20.5 billion investment is disappointing as the incoming Prime Minister, whoever it may be, will be forced to negotiate a new agreement with States regardless.

“State and Territory Premiers have called for a better deal, in line with the AMA’s [Clear the hospital logjam](#) campaign, and the next Prime Minister will not be able to avoid a 50/50 funding agreement.

“The Greens did commit to a 50/50 agreement – an important point to note considering the increased role the other parties and independents are likely to play in the next parliament,” he said.

Dr Khorshid said the report card did highlight some significant health investments – including the ALP’s promise of almost a billion-dollar investment into general practice to realise the *10 Year Primary Health Care Plan*, and to provide additional GP infrastructure.

“This funding promise, if implemented, is good news for general practice and all Australians, and something we fought for as part of our [Modernise Medicare](#) campaign. It is a strong down payment which will help realise the recently completed *10 Year Primary Health Care Plan* – a plan which remains unfunded by the Coalition,” Dr Khorshid said.

Dr Khorshid said the AMA report card outlined other notable health investments, including the AMA’s longstanding call for a Centre for Disease Control being committed to by the ALP and the Greens, and \$146 million by the Coalition, then matched by ALP, for rural health.

Dr Khorshid also said that while the Greens had outlined several significant funding commitments, they would be funded by abolishing the private health rebate, a short-sighted proposal that would destroy the successful public/private model of health delivery in Australia.

“It is disappointing that, after two years of a pandemic, that health was not made a more central feature of the two major parties’ platforms.

“While the report card highlights the investments committed across a range of areas, what is clearly missing is the overall vision for Australia’s health – the necessary big picture reform, backed by significant funding to tackle preventative health, public hospitals and the private health system,” Dr Khorshid said.

The AMA election report card is available [here](#). The report card assesses health policy announcements of the Liberal National Coalition, the Australian Labor Party and the Australian Greens against the Five Pillars of the AMA’s [Vision for Australia’s Health](#).



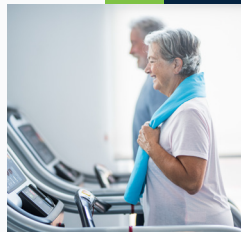
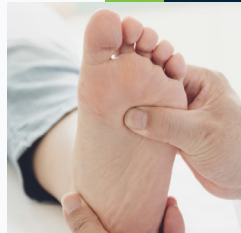
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- Footwear Assessment



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# THE EVOLUTION OF PAIN

### Dr. Paul Frank

Pain Medicine Specialist & Anaesthetist,  
M.B.B.S. FANZCA FFPMANZCA

### Pain Rehab

Dr. Peter Georgius

Pain Medicine Specialist, FFPMANZCA  
Rehabilitation Physician, FAFRM, MBBS,  
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## SAVE THE DATE

20th August 2022

Intended RACGP Category 1 Event

Guest presenters including Pain Specialists,  
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Refreshments - Lunch - Canapes

To secure your seat or for more information email  
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# Clinical TRIALS



## Oncology and Haematology Trials on the Sunshine Coast

The Sunshine Coast Haematology & Oncology Clinic (SCHOC) offers a number of clinical trials to residents of the Sunshine Coast and surrounding areas, in partnership with the University of the Sunshine Coast (USC). SCHOC and USC are involved in a number of clinical trials to treat a range of conditions, including:

- Cold agglutinin disease
- Multiple myeloma
- AML
- Myelofibrosis
- Advanced squamous cell carcinoma (SCC) of the skin
- Melanoma
- Ovarian cancer
- Breast cancer
- Lymphoedema

Clinical trials provide access to new drugs or treatment pathways that would be otherwise unavailable. All costs are covered for eligible patients, regardless of whether they have private health insurance or not. If you would like more information contact the USC Clinical Trials Team on 07 5456 3797.

[usc.edu.au/trials](http://usc.edu.au/trials)



### Sunshine Coast

Level 1/9 Ochre Way  
Sippy Downs QLD 4556  
(07) 5456 3797



### Moreton Bay

Level 1/19-31 Dickson Road  
Morayfield QLD 4506  
(07) 5456 3965



### Brisbane

Building A2, SW1 Complex  
52 Merivale Street  
South Brisbane QLD 4101  
07 5409 8630



### Sunshine Coast Haematology & Oncology Clinic

10 King Street  
Buderim QLD 4556  
(07) 5479 0000



## Dr Bill (S.Y.) Liaw Death Notice

It is with deep sadness we acknowledge the sudden passing of Dr (Bill) S.Y Liaw on the 3rd May 2022.

Dr Liaw a dedicated General Practitioner, practiced medicine at his clinic in 17 Brighton Road, Sandgate. We wish to express our heartfelt sympathy and condolences to Dr Liaw's family and friends, his professional colleagues and his many patients at this difficult time.



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**Australia's GPs recognised on World Family Doctor Day**

The role and contribution of Australia's GPs and family doctors around the world, is being celebrated today on World Family Doctor Day.

AMA President Dr Omar Khorshid said this year's theme for [World Family Doctor Day](#) was *Family Doctors, Always There to Care!* and reflected GPs role as a cornerstone of a person's health from birth to older age.

The celebration is the perfect opportunity to acknowledge the central role of family doctors in the delivery of personal, comprehensive and continuing health care for all patients. It's also a chance to celebrate the progress being made in family medicine and the special contributions of primary care teams globally.

Dr Khorshid said general practitioners were indispensable in our communities and very much valued.

"On World Family Doctor Day the AMA would like to acknowledge the commitment of the over 38,000 GPs across the country.

"GPs are at the heart of our health system, providing all the care needed for 90 percent of all the medical problems they encounter, as well as working with other specialists and health professionals to keep the community well."

Dr Khorshid said the AMA had made general practice a focal point of its election campaign, recognising the growing demand from patients and the need to ensure that high quality GP services remain affordable and accessible across the country.

"International evidence shows patients live longer and healthier lives when they have a long-term relationship with a GP, and we know that Australia's health system is one of the best in the world because of the significant role that GPs play," Dr Khorshid said.

19 05 2022

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Follow the AMA President on Twitter: <http://twitter.com/amapresident>

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## PRESIDENT AND CEO REPORT



Professor Chris Perry OAM and Dr Brett Dale

With floodwaters receding and recovery and rebuilding underway, health has returned to the forefront of public debate. The Omicron outbreak has taken a toll on our health services, with thousands of healthcare workers furloughed with infection or as close contacts, and hundreds of hospital beds taken up with COVID patients.

This was highlighted on an extraordinary Monday in April when dozens of ambulances were ramped outside major hospitals, the fourth highest number of 000 calls on record were received, and Code 1 ambulance calls increased by 40 per cent .

The AMA Public Hospital Report Card released a few weeks earlier had already shown the pressures our system is under, and health quickly became a key battleground when the federal election was called.

### FEDERAL ELECTION – PROMISES STARTING TO MOUNT UP

AMA Queensland has been working with our federal colleagues to put health front and centre as a campaign issue. We are calling for a better system of public hospital funding and real resourcing for primary care.

At the time of writing, the ALP had responded to our *Modernising Medicare* campaign by pledging \$750 million if elected to support implementation of the Primary Care Plan, plus \$220 million in GP infrastructure grants. We have been working on this arrangement for some time, and work is in train for the Coalition to match the pledge if re-elected.

The Coalition has promised up to \$375 million to establish a Landmark Comprehensive Cancer Centre in Queensland to provide world-class cancer care, similar to the Peter MacCallum Cancer Centre in Melbourne and Chris O'Brien Lifehouse in Sydney.

We welcome the commitment by both sides to a \$146 million investment to target regional, rural and remote communities with immediate health workforce needs, and support the proposals to expand both the John Flynn Prevocational Doctor Program and the single employer model trial for GP registrars. These are practical policies that will help support the rural workforce.

We need to see more detail about Labor's proposal for GP-led urgent care clinics – how they would be funded and staffed, and where they would be located.

Neither side had committed to our call for the federal government to increase public hospital funding from 45 to 50 per cent alongside state funding for our public hospitals. That extra 5 per cent from the Commonwealth would inject an extra \$1.5 billion a year, enough to pay for the 1,500 extra beds we need.

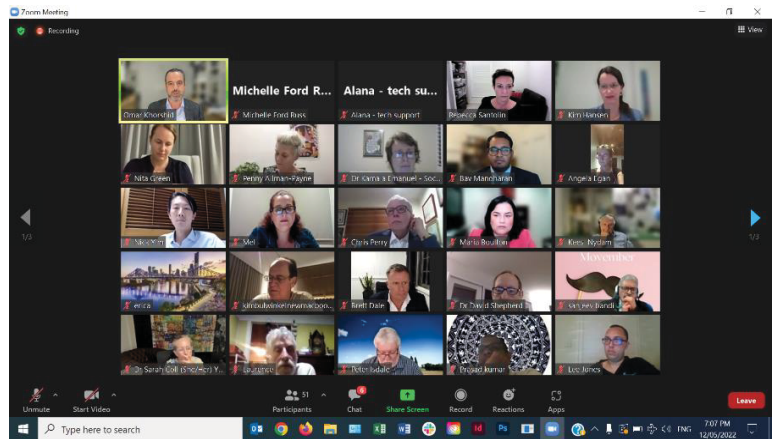
We have joined with Queensland-based clinician, community and consumer groups to issue a joint open statement to all federal candidates. You can read more at <https://qld.ama.com.au/latest-news/Joint-letter-QLD-health-stakeholders>



## FEDERAL CAMPAIGN VIRTUAL TOWN HALL

As part of the AMA *Clear the Hospital Logjam* and *Modernise Medicare* campaigns, AMA Queensland held a virtual town hall meeting on Thursday 12 May for doctors and patients to share their experiences of the Queensland health system.

We invited a range of political candidates and representatives to hear stories and explain their party's policies. Labor Senator Nita Green, Greens Senate candidate Penny Allman-Payne, Socialist Alliance Senate candidate Dr Kamala Emanuel and Independent candidate for Herbert, Dr Angela Egan (an AMA Queensland member) took part. The federal LNP was unable to supply a candidate.



The town hall was open to the public and the media. You can watch it at [youtube.com/watch?v=bNkridwfj7o](https://youtube.com/watch?v=bNkridwfj7o)



## OPPOSITION TO NQ PHARMACY TRIAL CONTINUES

Doctors have reported treating hundreds of patients who needed further treatment after taking part in the Queensland Government trial allowing pharmacists to diagnose and sell prescriptions for urinary tract infections (UTIs).

More than 1,300 doctors responded to our survey in March, reporting at least 240 cases of complications, ranging from misdiagnosed sexually transmitted infections, but also cancerous conditions and pregnancies.

The UTI pharmacy prescribing trial began in 2020 and was extended this year after the Government hailed it as a 'success' based on the number of women who had accessed the service but without any details about their health outcomes.

The Government is now planning to extend the trial next month to allow pharmacists in North Queensland to

diagnose and sell prescription medications for 23 serious conditions without any medical oversight, in breach of Commonwealth legislation.

AMA Queensland has met with the Queensland University of Technology, who oversaw Queensland Health's evaluation report of the UTI pilot, and with the Minister for Health to discuss our concerns with the UTI pilot and the proposed North Queensland pharmacy trial.

Read our survey report and our media statement here [qld.ama.com.au/Stop-NQ-Pharmacy-Trial](https://qld.ama.com.au/Stop-NQ-Pharmacy-Trial)

## FLU SEASON SHAPING AS WORST IN YEARS

After two years of influenza dormancy due to COVID lockdowns and border closures, 2022 is on a frightening trajectory towards a significant and early flu season.

We had 1,000 confirmed cases in the first two weeks of May. Last year there were only 598 cases across Australia, and we have not seen 1,000 cases in Queensland in May for eight years. This suggests that we will see a significant and early flu season.

Now that we are seeing combined flu and COVID cases, the pressures on our health system will only escalate.

We encourage all Queenslanders to make an appointment to see their family doctor, who has full medical records and will ensure the right vaccination is delivered.

Flu jabs can be given at the same time as COVID vaccinations.



## WORKPLACE RELATIONS SUPPORT

Are you interested in brushing up on your workplace relations knowledge from the comfort of your desk? The 2022 AMA Queensland Workplace Relations Webinar Series allows you to enhance your knowledge of topical issues by logging into the live webinars or listening to a recording in your own time. Read more at [gld.ama.com.au/events/WR-webinar-series](http://gld.ama.com.au/events/WR-webinar-series).

We are also running a *Private Practice Seminar Series* covering Risky Business topics – payroll tax, service agreements and much more. We are working with our corporate partners and LMAs all over Queensland to present the best speakers and panellists to address your local issues. Read more at [gld.ama.com.au/events/private-practice-seminar-series](http://gld.ama.com.au/events/private-practice-seminar-series)

Contact our Workplace Relations team at [workplacelrelations@amaq.com.au](mailto:workplacelrelations@amaq.com.au) or on 07 3872 2211 for any inquiries.

## AMA QUEENSLAND FOUNDATION FLOOD GRANTS

AMA Queensland Foundation is continuing to help patients, doctors and medical practices get back on their feet after experiencing hardship due to the floods, issuing more than 20 Flood Assistance Grants.



We know these grants are a drop in the ocean compared to the magnitude of devastation experienced by so many Queenslanders. We thank all members who generously donated to the Flood Assistance appeal.

You can read the story of Dr Bee Kho, whose Rocklea practice was destroyed, at [gld.ama.com.au/latest-news/flood-affected-practice](http://gld.ama.com.au/latest-news/flood-affected-practice)

## JOIN AMA QUEENSLAND

We are proud to lead Queensland doctors and create better health outcomes for our community. Join AMA Queensland and receive a \$50 Prezzy gift card. Scan this QR code to join now and enjoy the myriad of member benefits. Be sure to email us at [membership@amaq.com.au](mailto:membership@amaq.com.au) with the subject Prezzy to claim your voucher.



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**ALP GENERAL PRACTICE COMMITMENT WELCOMED**

*Investment would help Modernise Medicare and reform general practice*

The AMA welcomes the ALP’s announcement today that, if they are elected, would see nearly one billion dollars invested in the nation’s GPs.

“The announcement today of immediate infrastructure funding for our GPs, and a new fund allowing for primary care reform including voluntary patient enrolment (VPE) implementation is warmly welcomed and puts general practice on a pathway to a more sustainable future,” AMA President, Dr Omar Khorshid said.

“VPE builds on the established concept of the usual GP and brings with it the promise of better and more accessible care for patients, coordinated by their nominated GP.”

Throughout the election, the AMA has been running a campaign, [Modernise Medicare](#), outlining the direct benefit to patients of investing in general practice to introduce a medical home, and under it, a range of specific and targeted programs.

“The primary care fund announced today by the ALP, if implemented, is a strong down payment that will help realise the recently completed *10 Year Primary Health Care Plan* – a plan which has remained completely unfunded by the Government.

“The ALP’s primary care fund pledge will allow investment in programs that will improve access to services for patients including GP after hours services and the Workforce Incentive Program. We welcome the ALP commitment to work with the AMA on the implementation of primary care reform.

“The AMA’s [Modernise Medicare](#) campaign outlines a program of three themes of ‘more care’, ‘more time’ and ‘more health’. Investing in a medical home model could also enable more types of care to be delivered more of the time, under the roof of a patient’s usual GP practice,” Dr Omar Khorshid said.

“For many patients who currently see multiple healthcare professionals, across multiple appointments, and in multiple locations, this policy could save them a lot of coordination, time, and money.

“The way health care is delivered in primary care is changing and funding arrangements need to be modernised to reflect this. Today’s announcement by the ALP should allow general practice to start to do that, should they be elected on 21 May,” Dr Khorshid said.

The AMA has a longstanding history of supporting general practice infrastructure grants, including in our [2022 election statement](#). These are critical to improving access to care for patients, providing the opportunity for GPs to invest in infrastructure and space that supports more teaching and training in general practice and access to a broader range of services for patients, such as nursing and allied health services.

“Grant funding has been shown to deliver results with the Australian National Audit Office confirming that infrastructure grants are effective and a good value-for-money investment,” Dr Khorshid said.

“These grants will be welcomed by the nation’s GPs, who have done the heavy lifting over the last two years during COVID, including through their pivot role in vaccinating the nation.”

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**AMA**

*Continued from Page 14*

## **ALP GENERAL PRACTICE COMMITMENT WELCOMED**

*Investment would help Modernise Medicare and reform general practice*

“But sadly, we are yet to hear anything from the Coalition on what they will do to support general practice. After working enormously hard for over two years to tackle COVID-19, and after years of a Medicare freeze and substandard indexation, the nation’s GPs deserve to hear more than silence from the Coalition.

“We know a well-funded and resourced general practice sector is pivotal to improving the health outcomes of individuals and communities, and can create significant savings through better care, greater efficiency, and reducing the burden on other more expensive parts of the health system,” Dr Khorshid said.

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13 May 2022

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# **Answers to Questions in Quora (Internet)- 4**

## **By Dr Mal Mohanlal**

### **Why is the human brain not equal to others?**

How can we possibly compare the human brain that can land a man on the moon with others? Simply no comparison.

### **If knowledge is not power, what is the closest thing to power?**

Knowledge is power if you know how to use it.

### **How can I develop my thoughts to produce results?**

It helps to acquire self-knowledge, that is, how your ego operates in your mind. When you think you use words, that is, you verbalize. If you have the habit of saying many negative words, it will set you back. Try replacing those negative words with positive words. You do not have to mean what you say, but say positive things about everything and see what happens. You will positively stimulate your subconscious mind this way, which will enable you to get positive results. Please read my articles on the ego and the mind on the Internet if you want to acquire self-knowledge.

### **What does neuroscience tell us about consciousness? Is it a physical part of the brain or something separate from the body that we tune into?**

As I see it, consciousness is a property of the mind. It is not separate from the mind. But the mind needs an intact brain to express consciousness. Hence the ego in the conscious mind cannot function without a healthy brain. If a neuroscientist does not acquire this self-knowledge before researching, it may well lead to a delusion. Consciousness thus is separate from the body but not separate from the mind.

### **Why are most people so uneducated and unintelligent?**

Most people are not uneducated and unintelligent. When one is confused and stressed, one may appear that way. They suffer from distorted perceptions and very little self-knowledge. Clear up those perceptions and give them self-knowledge, and you will find most people are pretty intelligent.

### **What is the scientific explanation to future events, dreams, and actual realities?**

In science, we observe reality and interpret it scientifically. But if the observer is biased and accepts what suits him as acceptable and rejects what doesn't, we have a disorder of perception. So if the observer (the ego) does not know that you are a product of self-hypnosis, all you will do is create a world of delusion. You see, in reality, there is no such thing as time. The future is what you create by the actions you take in the present. If no action is taken, your present becomes your future. If you want to understand time, please read my recent articles on the Internet about the ego.

### **How do I overcome my past? Can I really move on from my past life?**

Yes, you can. You have to acquire some self-knowledge. The past is there to teach you a lesson in life. If you have become bitter, disappointed, regretful etc., because of your experiences, you have not learnt anything. You should read my answers in Quora on how to leave the past behind.

### **Does forgiveness destroy the memory of what was done to us?**

No. Forgiveness is a mental property where you change your perceptions. Memory is the property of a healthy brain that will not be able to recall anything if damaged. So when one forgives, one has to change the way one looks at the past.



## **Answers to Questions in Quora (Internet)- 4**

*Continued from page16*

**By Dr Mal Mohanlal**

### **Is the human brain really controlling our reality as humans?**

We use our brains to perceive reality. When we create reality for ourselves, we dream first and then take steps to turn that dream into reality. So the brain does have control over what we do. But the world we create is mainly a world of delusions. The actual reality is the world without words which is looking at you right in the present.

### **When one faces difficult situations in life and about to despair but there are these thoughts within herself "you will make it", "don't allow yourself to die", "even this situation will pass away".How can one make them real?**

You make them real by keep repeating them. Our subconscious mind responds to words, not their meaning. So long as you keep saying these positive words, you will create positive chemicals in your system, which will lift you. Positive words produce positive chemicals; negative words produce negative chemicals. It is a hypnotic affect. Please read my articles on the Internet about Hypnosis and the mind to help you understand your mind.

### **The three stages of Vedantic sadhana (spiritual practice) are sravana (hearing of the scriptures), manana (reflection on the eternal verities), and nididhyasana (rational meditation). Could all of this be nothing more than a form of self-hypnosis?**

A short answer is yes. We live in a world of delusions created by an ego for whom death is anathema. When we meditate, it is the mode in which we meditate that results in enlightenment or the creation of a delusion. When we meditate in the thinker and thought mode, it results in a delusion. We find enlightenment when we meditate in the observer and the observed mode. Please read my recent articles on the Internet to discover the secrets of the mind.

### **What is something about life after death that seems scientifically impossible but is completely true?**

This, indeed, is a question framed by an ego for whom death is anathema and for whom it is very comforting to think that life exists after death. The self-centered world we see today is a world of delusion we have created. We live in a hypnotic world, and if you want to wake up from your self-hypnosis, please read my recent articles on the Internet.

### **How does the human body die?**

The way I look at it, I see the human body has an energy source like electricity that keeps it alive. That energy source lies in the mind. The conscious mind, where our ego operates, is not separate from the rest of the mind. However, without it, our subconscious mind can still keep us alive. Therefore, when the subconscious mind leaves the body, it dies. Please read my article on the brain, the ego and the mind on the Internet. See if it makes sense.

If you want to know how your mind works and acquire some self-knowledge, please read "The Enchanted Time Traveller- A Book of Self-Knowledge and the Subconscious Mind".

Website: [HTTPS:// theenchantedtimetraveller.com.au](https://theenchantedtimetraveller.com.au). EBook is also available at Amazon.com.



## NO AUSTRALIAN STATE OR TERRITORY MEETING RAMPING TARGETS, AMA REPORT FINDS

A new Report Card from the Australian Medical Association (AMA) has found every state and territory is failing to meet its performance targets for the time it takes to transfer patients from an ambulance into the care of the Emergency Department (ED). In the last two years there have been increased reports of ambulance ramping outside hospitals, people needing to be driven to the ED due to no available ambulances, and people dying waiting for an ambulance. The AMA's Ambulance Ramping Report Card echoes these reports, with data from all states and territories revealing that ambulance ramping has been steadily increasing year on year.

This report card is the first time a national snapshot of ambulance ramping has been published by the AMA, and despite the different reporting mechanisms and targets in each jurisdiction, it paints a terrifying picture for all Australians. "The Report card does not deliver good news - with no jurisdiction able to meet its own targets of getting patients out of ambulances and into the care of ED staff in time," AMA President, Dr Omar Khorshid said. "Ambulance ramping outside hospitals – sometimes for hours – means not only are patients not receiving timely care, but paramedics can't respond to new emergencies. This is what we see when our public hospitals are in logjam. "No matter who we are, or where we live, when it's an emergency we all call for an ambulance to take us to our public hospital. But increasingly they can't come and are instead waiting outside an overloaded hospital," Dr Khorshid said.

The report showed South Australia has a target of 90 per cent of patients being transferred to the ED within 30 minutes, but in 2020-21 only 54.1 per cent of patients were transferred within the target timeframe. Other states with the same target include Western Australia where 62.7 per cent of patients were transferred within 30 minutes in the December 2020 reporting period. Significantly, ambulances spent more than double the number of hours ramped outside WA hospitals in 2021 than in 2020 (52,439.9 hours in 2021 compared to 25,902.1 hours in 2020). The number of ramped hours has also been increasing there since 2017, with a five-fold increase in ramped hours from 2017 (9,819.1) compared to 2020.

Queensland only managed to transfer 65.2 per cent of patients within 30 minutes in 2020-21, and the target has not been met in seven years. While 84.8 per cent of patients in NSW were

transferred within 30 minutes in 2020-21, NSW performance has been gradually deteriorating each year. "Behind the statistics are heart-breaking stories. People in Bundaberg, Queensland are waiting seven hours to transfer from an ambulance to a hospital bed, and in WA, St John's ambulance has warned of delays for 000 callers with a quarter of their ambulances ramped outside hospitals, while being inundated with 40 calls for help an hour, Dr Khorshid said.

The report showed Victoria transferred 72.7 per cent of patients within 40 minutes, falling short of its 90 per cent target, and the ACT with the same performance target only transferred 62.3 per cent. Tasmania has a target to deliver 100 per cent of patients in 30 minutes, and it reported only 79.6 per cent were transferred in this timeframe in 2020-21. The NT reports average transfer times, rather than a per cent transferred within a target timeframe, aiming to transfer all patients within 25 minutes. In 2020-21 the average transfer time was 30.6 minutes for all NT hospitals, and 35.2 minutes for the Royal Darwin Hospital, which is responsible for nearly half of all ambulance transfers in the NT.

Dr Khorshid said the report provided further evidence of the public hospital crisis being a national issue, requiring a national response. "I want to be clear, we're not saying ambulance ramping is the fault of our incredible paramedics and ambulance staff or our overstretched Emergency Department workers. This is a hospital logjam issue pure and simple, caused by a lack of public hospital capacity.

"To build capacity, we need funding. To do that, the next Prime Minister will need to show leadership and commit to a new 50-50 funding agreement that scraps the 6.5 per cent cap, which we are calling for as part of the AMA's Clear the Hospital Logjam campaign. "Our paramedics and ambulance staff deserve better than spending hours ramped outside hospitals, as do their patients – it's time the major parties use the last week of the campaign to commit to lifting our hospitals out of crisis," Dr Khorshid said.

See statistics on the AMA Ramping Report Card main findings:  
<https://www.ama.com.au/clear-the-hospital-logjam>

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# Where We Work and Live

*Vietnam War 1962–75 | Australian War Memorial (awm.gov.au)*

## Vietnam War 1962–75

The arrival of the Australian Army Training Team Vietnam (AATTV) in South Vietnam during July and August 1962 was the beginning of Australia's involvement in the Vietnam War.

Australia's participation in the war was formally declared at an end when the Governor-General issued a proclamation on 11 January 1973. The only combat troops remaining in Vietnam were a platoon guarding the Australian embassy in Saigon, which was withdrawn in June 1973.

The Australian commitment consisted predominantly of army personnel, but significant numbers of air force and navy personnel and some civilians also took part.

### Overview

From the time of the arrival of the first members of the Team in 1962 almost 60,000 Australians, including ground troops and air force and navy personnel, served in Vietnam; 521 died as a result of the war and over 3,000 were wounded.

The war was the cause of the greatest social and political dissent in Australia since the conscription referendums of the First World War. Many draft resisters, conscientious objectors, and protesters were fined or jailed, while soldiers met a hostile reception on their return home.

Australian support for South Vietnam in the early 1960s was in keeping with the policies of other nations, particularly the United States, to stem the spread of communism in Europe and Asia.

In 1961 and 1962 Ngo Dinh Diem, leader of the government in South Vietnam, repeatedly requested security assistance from the US and its allies. Australia eventually responded with 30 military advisers, dispatched as the Australian Army Training Team Vietnam (AATTV), also known as "the Team".



IAN WAR MEMORIAL

EKN/67/

**Accession Number: P01951.007**  
**Vung Tau, Vietnam: door-gunner from No. 9 Squadron, RAAF, using twin-mounted M60 machine-guns.**

Their arrival in South Vietnam during July and August 1962 was the beginning of Australia's involvement in the Vietnam War.

In August 1964 the Royal Australian Air Force (RAAF) also sent a flight of Caribou transports to the port of Vung Tau.

By early 1965, when it had become clear that South Vietnam could not stave off the communist insurgents and their North Vietnamese comrades for more than a few months, the US commenced a major escalation of the war.

By the end of the year it had committed 200,000 troops to the conflict.

As part of the build-up, the US government requested further support from friendly countries in the region, including Australia.

The Australian government dispatched the 1st Battalion, Royal Australian Regiment (1RAR), in June 1965 to serve alongside the US 173d Airborne Brigade in Bien Hoa province.

*Continued next month.*

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