

# Bridge Medical Centre Newsletter Autumn 2014



## Time to hang up his stethoscope

Dr Alun Cooper will retire from being the Senior Partner at Bridge Medical Centre after 30 years at Bridge. His last day will be Tuesday 30<sup>th</sup> September, having started at 194 Three Bridges Road on 1<sup>st</sup> August 1984. Dr Nigel Mohabir will take over as the Senior Partner.

"I will not be giving up completely", says Dr Cooper, "I will be returning at the end of November doing 4 surgeries a week and continuing my interest in osteoporosis. We will continue the DXA Scanning Service and the Fracture Liaison Service. During my 30 years I have seen many changes and one thing I am certain of is that there will be many more. We now have very effective treatments that we didn't have 30 years ago, but it's still amazing how some treatments are just the same. What is more worrying is the increasing demand put upon General Practice and I sometimes fear for its future. I am sure, however, whatever comes at General Practice the doctors, nurses and staff are more than capable of coping. I will still be around for a while watching with interest".

## Staff News!

Congratulations to Dr Mohabir who take over as Senior Partner in the Autumn.

Our Phlebotomist Wendy has decided to retire and Dr Raina has moved on. We wish them well in the future.

We welcome Dr Laura Fraser & Dr Loshanan Mohanarajah our GP Registrars, who are fully qualified doctors who wish to become GP's and are fully supervised by Dr Fegan & Dr Hyder whilst training at the practice. After qualifying as a doctor, it takes three years to train to be a GP.

You may have a longer consultation if you see a Registrar. Like medical students, they may ask to video a consultation, and you can also choose not to see them. They may be in the Practice from 4 months to a year- many patients enjoy seeing them.

## ANNUAL SEASONAL FLU CLINICS

**Walk in Clinics: Saturdays 4 & 18 October 9-11am**

**No need to book an appointment, just turn up if you are eligible**



It is recommended that people in the following categories should be immunised: Aged 65 or over; Reduced Immunity; Chronic Lung Disease (asthma/COPD); Chronic Kidney Disease; Chronic Heart Disease & Diabetes



### Home visits

We do our home visits around lunch time. This is because we have surgeries booked morning and afternoon when we see patients here at the surgery. When requesting a visit we would appreciate it if the visit could be requested by half eleven of that day. We know the phones are busy first thing, but usually they are much quieter a little later on, at ten. Unfortunately we cannot guarantee a Doctor of your choice; this is because although they may be here at the surgery that day, they may not be participating in visits as they have another commitment, for example a meeting, to go to.

Of course we realise that sometimes patients fall ill later in the day; when requesting a "late" home visit, the receptionist will usually advise you that the duty doctor will ring first. You may also not be visited till much later on, for example, at six o'clock. This is because we have fully booked surgeries in the afternoons. If we feel your visit is so urgent that it cannot be delayed till then, we would advise you to call for an ambulance (for example if you have symptoms of a stroke or heart attack). If we feel the visit is more routine then we would visit the next day. We prefer to do the visits at lunch time rather than the evening, so we can see "extras" at the end of the day.

## Named GP for all patients aged 75 or over.

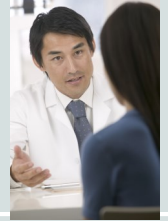
You may be aware that since April this year, all practices are required to provide all their patients aged 75 and over with a named GP who will have overall responsibility for the care and support that our surgery provides to them.

As a practice we have now allocated patients to a named GP . At present all patients are registered with the practice of Bridge Medical Centre . This is still the case and you can still see any of the doctors at the practice.

If you have forgotten who your named GP is you can easily be informed by asking your GP or Nurse or the reception team. As patients turn 75 or register at the practice, they will be informed of their named GP.

You do not need to take any further action.

If you require any further information about surgery opening times or any of our services, please refer to our Practice Leaflet or the dedicated area on the website



## Autumn 2014 immunisation Campaigns at Bridge



**Shingles vaccine** is on offer again from September Eligibility is determined by your age on September 1<sup>st</sup> 2014 This year the Shingles vaccine will be offered to those aged 70, 78 and 79 years on Sept 1<sup>st</sup> 2014. This cohort of people will be receiving an invitation by letter to make an appointment with the Practice Nurse. Dedicated clinics are being set up in the month of September

As usual **Influenza vaccine** will be offered from October to all patients 65 or over and those in the at risk categories. Please look out for posters and leaflets within the Surgery Chemists and local Supermarkets for further details.

**NEW THIS YEAR** Flu vaccine will be offered to all children aged 2-4 years old. A letter of invitation will be sent in September to the parents of children eligible for this vaccine to make an appointment.

**Meningitis C vaccine** is available for students 17 years and over and attending University or higher education

**MMR** Catch up is available for children and adults up to the age of 30 years who have not completed the normal childhood vaccination programme.

**Pneumonia** Vaccine is on offer to anyone 65 years old or over. If you have already received this vaccine in the past you DO NOT need a booster.

Please contact the surgery if you have any queries about any of the above .

## Blood Tests

When you have a blood test, the results come back to the doctor who ordered them. The doctor must then deal with the tests, by ticking several boxes- "normal", or "abnormal"- and then marking further action to be taken- for instance "make appointment to see Dr" or "make telephone appointment to see doctor". When a patient rings for results, the administration team, who are non clinical, then can simply read out what the doctor has advised. They cannot advise further on the blood tests. We often send out letters asking patients to ring for an appointment as we find that we cannot get hold of patients by telephone on the day. Unfortunately we know patients can be very worried if they hear their results are "abnormal", leading them to ask for an immediate call back or appointment. Very often results come back "abnormal" for a very minor thing; for example, being mildly anaemic or having a high cholesterol . We would much prefer for the follow up appointment, be it telephone or face to face, be with the appropriate Doctor who ordered them, ensuring continuity of care. That doctor may not be available that particular day. Of course, if your results were very abnormal and needing immediate action, the doctor would ring you.