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Sent: Monday, 8 June 2015 8:26 AM

To: medboardconsultation

Subject: Consultation – Registered medical practitioners who provide cosmetic medical and surgical procedures

1.1 Should a medical practitioner be expected to have a face-to-face consultation (in person, not by video conference or similar) with a patient before prescribing schedule 4 prescription only cosmetic injectables?

If not, why?

I am a cosmetic surgeon working in Queensland. I have been in the industry for over 15 years and have witnessed many medical systems where doctors and nurses work side-by-side ensuring the best care for their patients.

However in the last few years there has been a general deterioration of systems that allow shopping mall franchise model clinics to offer discounted injectable therapy undertaken by nursing staff acting in isolation without the face-to-face consultation with a medical doctor. These clinics rely on videoconferencing facilities on an annual basis to get around the current legal requirements.

Unfortunately complications do occur although they are uncommon.

Unlike other forms of telemedicine where there is usually a referring doctor who continues to take ongoing responsibility for the patient's continuous care, these clinics rely on doctors who are unable to treat complications.

While I can understand the need for videoconferencing facilities is my belief that patients should have a face-to-face consultation with doctors who are prescribing schedule 4.

Moreover that Dr should be intimately involved with the audit of nursing injectable procedures as well is been immediately available to review any complications.

Dr Matthew Allen