

Redevelopment Update

St Andrew's redevelopment project is swiftly progressing. October saw the final centre concrete pour on level 5 of our tower block; we now have a completed concrete slab to our executive offices and training room.

Further progression will see the completion of columns that will connect to the structural steel roof and formwork of our level 6 plant deck.

Once completed, the new development will see the addition of 81 new private patient accommodation rooms; increasing total bed capacity to 178 beds. A new 3 level multi-deck car park will assist to provide plenty of on-campus parking for patients, visitors and hospital guests; ensuring convenient access to services and our hospital.



St Andrew's Welcomes New Visiting Medical Officers



St Andrew's new Maternity and Paediatric Wards are expected to be operational by April/May 2018 with our new Emergency Department predicted to open by September; following the completion of our new Intensive Care Unit.





Dr K. Sivanesan Gynaecologist

No-Gap

Lower Cameron House Sessional Rooms 12 Roderick Street Ipswich QLD P: 07 3816 9189 F: 07 3816 9188 SI: All general gynaecology, female bladd

SI: All general gynaecology, female bladder problems (urinary incontinence, bladder/ pelvic pain), prolapse, urogynaecology



Dr Angus MoxonOrthopaedic Surgeon

Lower Cameron House Sessional Rooms 12 Roderick Street Ipswich QLD P: 07 3816 9189 F: 07 3816 9188

Known Gap does not exceed \$200.00

SI: Knee, foot and ankle Surgery



Dr Andy ChenCardiologist

Bulk Billing

Lower Cameron House Sessional Rooms 12 Roderick Street Ipswich QLD P: 07 4634 8880 F: 07 4641 7861

SI: Chest pain, heart failure, valvular heart disease, arrhythmias, stress echocardiography, CT coronary angiography





St Andrew's Ipswich Private Hospital Welcomes new Obstetrics and Gynaecology Services

Obstetric Services:

Pre-pregnancy counselling Management of early pregnancy complications Antenatal care Management of high-risk pregnancies and pregnancy complications Normal and caesarean delivery Postnatal care

Gynaecology Services:

Menopause

Prolapse and incontinence

Menstrual abnormalities Early pregnancy complications - ectopic pregnancy and miscarriage Recurrent pregnancy loss Infertility Pelvic pain, pelvic inflammatory disease, endometriosis and ovarian cysts Pap smear abnormalities Contraception

Paediatric and Adolescent Gynaecology Services:

Menstrual abnormalities Menstrual suppression (e.g. for young patients with intellectual or physical disabilities) Pelvic pain and PCOS Anatomical abnormalities - congenital anomalies (e.g. bicornuate uterus, vaginal septum) Contraception counselling (including contraception for young women with medical problems) Primary or secondary amenorrhea

Welcoming the opening of our new Obstetrics and Women's Ward in early 2018

St Andrew's Ipswich delightfully welcomed Dr Sarika Bhadange, Obstetrician and Gynaecologist, to the team in September. Excited to provide services to women of the Ipswich and West Moreton Region, Dr Bhadange recently opened her new full time clinic **'Excel Womancare'**; providing quality and affordable Obstetrics and Gynaecology services. Dr Bhadange welcomes new patient referrals and participates in nogap schemes with major health funds.



Dr Sarika Bhadange MBBS FRANZOG

Suite 5, 16 Limestone Street Ipswich QLD 4305 P: 07 3444 4870 F: 07 3444 4869











Dr Maged Aziz FRACS Vascular and Endovascular Surgeon P: 1300 482 728 F: 1300 082 728

Vascular Case Study, Peripheral Vascular Disease Dr Maged Aziz, Vascular Surgeon

Presentation

The patient is a 62 year old male complaining of left thigh and calf short distance claudication < 50 meters over the past 2 months.

Background and comorbidities

Hypertension, Hypercholesterolaemia and current smoking.

Medications

Antihypertensive and Statin.

Examination

Normal pulse and equal blood pressure on both arms. Normal peripheral lower limb pulse examination on the right side and absent left femoral and distal pulses. ABI (Ankle Brachial Index) of 0.5 on the left.

Medical management

Advice regarding smoking cessation, Initiation of antiplatelet (Aspirin) therapy and review in 2 months to assess response to medical management.

Imaging

Ultrasound suggested left External Iliac Stenosis, however to plan further treatment options, a CT Angiogram was requested after ensuring a normal renal function.

Follow up

Patient symptoms have not improved. The CT Angiogram confirmed near occlusion of the left Common Iliac artery. Discussion with the patient regarding intervention with endovascular approach. A patient information document was printed from my website for the patient to read and understand the risks and complications.

Endovascular Intervention

Careful planning to attempt recanalization of the occluded left Common Iliac artery (CIA) via a bilateral retrograde femoral access with the intent to insert a covered stent.

The procedure was performed at **St Andrew's Ipswich Private Hospital** with successful recanalization and stent insertion into the left CIA as planned.

The patient was admitted for overnight observation and was discharged next day with no complications.

Services

Varicose Vein Clinic: Varicose veins, radiofrequency ablation/LASER, VenaSeal, ClariVein, injection sclerotherapy, varicose vein surgery Endovascular Surgery: Angiogram stent, aortic aneurysm repair Open (Major Surgery): Carotid surgery, aortic aneurysm surgery, arterial bypass surgery, dialysis access.

Diagnostic Imaging: Vein diagnostic imaging, ultrasound imaging, ankle/brachial index, treadmill ABI, Toe pressure.



