

As the end of the year approaches, we'd like to thank you for your support in 2021. It has been another big year for health professionals, with COVID once again presenting challenges.

We are grateful for the care you provide and we look forward to working with you to provide exceptional patient care in 2022. The GP Liaison Unit will be taking a short break from 16 to 22 December – but please continue to refer patients as normal.

You'll find some final updates for the year below, including COVID updates, increasing access to abortion services, expanding cervical screening options, changes to our maternity referral template, delays in some SMCA application processing and upcoming training opportunities.

Wishing you a safe – and relaxing – festive season!



## COVID updates

### Pregnancy Observations Clinic

With COVID circulating in the community, hospital care continues to include a combination of face-to-face and telehealth appointments (where clinically appropriate).

A Pregnancy Observations Clinic has been established on the Ground Floor of our Parkville site to provide blood pressure checks, fundal height measurement and fetal heart

monitoring.

Appointments are made by the treating midwife or obstetrician. It is not a drop-in clinic.

### Reminder

If your patient tests positive to COVID, or is a close or primary contact of a COVID positive person, the Women's will continue to provide care and treatment.

If your patient requires urgent review (e.g. reduced fetal movements, suspected ectopic pregnancy, high blood pressure in pregnancy) care must not be delayed. Please ask your patient to call the Women's ahead of time on 8345 2000 making sure to tell us that she is COVID positive or has been exposed to someone who is. The hospital can then ensure health and safety plans are in place before her arrival.

If your patient does not require urgent review and it is clinically appropriate to do so, the Women's will organise a telehealth appointment.

**Special care for COVID positive pregnant women who are patients of the Women's**

Pregnant patients, and women in the immediate postnatal period, are considered at higher risk of complications from COVID compared with women who are not pregnant.

**Please notify the hospital if a pregnant woman under your care, who is also a patient of the Women's, tests positive to COVID. This can be done by notifying the COVID Liaison Midwife on [0435 234 427](tel:0435234427) during business hours or [by email](#).**

Symptomatic COVID positive pregnant patients of the Women's who require respiratory care, as opposed to maternity and obstetric care only, are jointly managed by the Women's and Royal Melbourne Hospital with regular contact, support and monitoring as required.

COVID positive pregnant patients of the Women's who require obstetric care but are otherwise well, will be isolated at our hospital and cared for at the Women's by maternity staff who have additional COVID training.



## Interested in becoming an EMA provider?

The Women's is committed to increasing access to abortion services by building the clinical capacity and expertise of other hospitals, health services and the primary care sector to provide abortion and contraception services.

Early Medical Abortion (EMA) can be provided in primary care settings, such as GP or community health clinics, with the appropriate support mechanisms in place.

We have recently launched [information on our website](#) for medical practitioners interested in becoming EMA providers, including the guideline: [Abortion Medical Management to 9 weeks of Pregnancy](#).

Feel free to contact the Sexual & Reproductive Health Clinical Champion Network on [\(03\) 8345 2822](tel:0383452822) if you have any queries.



## Greater choice coming for cervical screening

The Federal Government [recently announced](#) that all people eligible for a cervical screening test will be able to collect their own sample from 1 July 2022.

Australia will be one of the first countries in the world to offer the self-collect option, which is expected to improve overall screening participation rates, especially in under-screened populations.

The Women's was involved in trialling the efficacy of self-collection samples, which have proven as accurate as clinician-collected tests.

Expanding this option to all eligible women will be another major step on the path to Australia achieving the World Health Organization's elimination target of less than four cases per 100,000 women per year.

## Maternity referral template

We are pleased to announce that the Fast Fax Referral form for maternity patients has recently been updated and is available [on our website](#).

Templates are available in formats that can be uploaded to Best Practice, Medical Director, Genie and ZMed software, and in Word format.

We ask that all referrers use the templates to reduce the likelihood of referral rejection, inclusive of all initial blood test and imaging results as well as interpreter requests.

Please [email the GP Liaison Unit](#) if you have any difficulty uploading or using the template.

## Delays in SMCA processing

We have had strong interest from GPs wishing to become Shared Maternity Care Affiliates (SMCAs).

Due to COVID restrictions, we are currently unable provide time in our antenatal clinics for SMCA applicants who are assessed as requiring further practical maternity care experience. We thank applicants for their patience and look forward to welcoming them into the hospital as soon as restrictions ease.

SMCA applicants who are not assessed as requiring time in clinics continue to processed as normal.



## Service spotlight

### Women's Health Physiotherapy

The Women's Health Physiotherapy team treat a range of symptoms related to pelvic floor dysfunction and pregnancy-related musculoskeletal conditions.

This includes, but is not limited to:

- Pregnancy related pelvic girdle pain (usually at the pubic symphysis or sacroiliac joints)
- Pregnancy-related (or pre-existing) cervical/thoracic/lumbar/coccygeal pain
- Carpal tunnel syndrome or De Quervain's tenosynovitis (hand/wrist/thumb pain)
- Rectus abdominis diastasis/DRAM
- Pelvic floor dysfunction including bladder and/or bowel incontinence, pelvic organ prolapse, vaginismus, sexual dysfunction
- Patients who have previously experienced significant birth trauma (e.g. obstetric anal sphincter injury)
- Significant vulval varicosities
- Patients diagnosed with gestational diabetes
- Advice and education about exercise and expected bodily changes
- Any patient with impaired mobility who may benefit from antepartum assessment with a view to enhancing early postpartum function

Physiotherapy referrals are welcome from GPs and SMCAs once the maternity referral for the patient has been accepted for the hospital.

All women referred to physiotherapy during the antenatal period will initially be seen via telehealth, generally within two weeks of referral, with individual, face-to-face follow up arranged as required.

Referral is only for women who have been accepted for care by the Women's and can be done by [emailing the Shared Care office](#) or fax [\(03\) 8345 2130](#).

We encourage our patients to seek assistance with any concerns during pregnancy, particularly when it comes to changes affecting daily function. Whilst symptoms such as pelvic girdle pain or incontinence are certainly very common in pregnancy, they are not a normal part of the pregnancy journey, and should be treated promptly if there are any concerns.

## NBO training workshops 2022 dates open

Bookings are now open for Newborn Behavioural Observations (NBO) online training in March.

[View dates and details.](#)

## Simulation-based IUD insertion training

The Women's is hosting a simulation-based IUD insertion training session to give GPs an opportunity to learn and practice IUD.

[View details.](#)

## Recent news from the Women's

- [Evidence supports a new screening tool for family violence during pregnancy.](#)
- ["I can't stress enough the importance of mammograms."](#)
- [Australia on track to eradicate cervical cancer](#)
- ["I only wish I had got the vaccine earlier."](#)
- [Fertility experts reassure women on vaccine safety.](#)
- [Progress made but more to be done to tackle family violence in health services](#)
- [How researchers are helping tiny babies thrive: 'Cool Topics' 2021](#)
- [COVID miracle mum's Christmas wish](#)
- [Inclusive, empowering, respectful - the Women's mission to improve care and employment for people with disability](#)
- [How volunteering at the Women's inspired Kate to become a Midwife](#)
- [Therapy tool helps premature babies fight chronic lung disease](#)

### Contact us

#### GP Liaison Unit

P: (03) 8345 2064 / 8345 3070

E: [gp.liaison@thewomens.org.au](mailto:gp.liaison@thewomens.org.au)

#### Fast Fax Referral

F: (03) 8345 3036

#### GP Quick Access Number

P: (03) 8345 2058

**Shared Maternity Care Coordinator**

P:(03) 8345 2129

E: [shared.care@thewomens.org.au](mailto:shared.care@thewomens.org.au)

**The Women's Switchboard**

P: (03) 8345 2000

**The Women's Abortion & Contraception Service**

P: [\(03\) 8345 3061](tel:(03)83453061) (professional line only – not for use by women needing the service)



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*The Royal Women's Hospital acknowledges and pays respect to the peoples of the Kulin Nations, the Traditional Custodians of the Country on which our sites at Parkville and Sandringham stand.*

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