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To: [medboardconsultation](#)
Subject: Comment
Date: Tuesday, 14 February 2023 6:45:37 PM

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"Prescribing or providing healthcare for a patient with whom you have never consulted, whether face-to-face, via video or telephone is not good practice and is not supported by the Board".

My practice involves the subspecialty of arthroscopic hip surgery. Many of my patients are referred from distant rural Victoria, Interstate , and Overseas.

Telehealth allows us to meet initially online, and review the history and imaging, and in a limited way perform part of an examination.

This consultation provides an adequate opportunity to determine whether the patient should then go to the trouble and considerable expense of coming to Melbourne for a face to face consultation and operative treatment of their hip condition. Alternatively, they may be recommended conservative, or other forms of treatment, and avoid the need to come for a face to face consultation.

If the quotation above is incorporated in the final guidelines, then there seems to be an implication that all patients will need to travel to Melbourne for an initial assessment, and many will waste significant time and money in doing so.

I do not know if this is the intention of the Board. The below statement received from [REDACTED] Hospital suggests that it is.

The Draft Guidelines include some statements that may impact service delivery, [REDACTED] have shared an [article](#) they have prepared. The Draft Guidelines explicitly state that it is not 'good practice' for medical practitioners to prescribe, or provide telehealth services, to patients whom they have never consulted.

I believe that my current practice is safe and justifiable, as well as providing patient convenience and significant cost savings, and should be specifically allowed in the Guidelines.

Kind regards,

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