

Branch Surgery

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Main Surgery

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Consultations by Appointment Only

Changes at the Practice: Dr Whiteside is returning to the practice in June following her Maternity Leave.

Cove Gala – 8th June 2013: A team from the practice will be hosting a stand at the Cove gala again this year to highlight what services are available from the practice. Information leaflets and registration forms will be available at the stall so please come along to speak to a member of the team.

DNA Rates: Our latest DNA rates (Did Not Attend) for appointments continue to be a cause for concern. In April 2013, 150 people did not attend for their GP appointment and 150 people did not attend for their nurse appointment. This is part of the reason why there can be a wait for a GP or nurse appointment.

If you no longer need your appointment, PLEASE ring to cancel with as much notice as possible so it can be offered to another patient.

In an attempt to resolve this, the practice have developed the following policy – if you fail to attend for two consecutive appointments without informing us, we will write to you asking if there are any specific problems preventing you from attending or cancelling your appointment. If you fail to attend for a third appointment, you may be removed from the Practice list and will need to register with an alternative GP practice.

Text Message Reminders: The Practice have started sending text reminders to patients who are attending Minor Surgery, Coil, Nexplanon and Community Chaplaincy Listening clinics at the Practice. We are not currently sending reminders for any of our other appointments but we do hope to do this in the future for all appointments. If you wish to sign up to receive text message reminders please complete a form at reception.

Vaccination Changes: The next few months will see the introduction of 2 new vaccination campaigns.

Starting in July, infants will be offered a vaccination against rotavirus. Rotavirus infection causes a nasty form of sickness and diarrhoea which for most is self-limiting but can cause more serious ill health including hospitalisation and a small mortality rate. The vaccination will be given orally at ages 2 and 3 months. Parents will be informed of how this will be organised nearer the time.

At the other end of the age scale, from 1st September, 70 year olds will be offered a vaccination against shingles. There will also be a catch up program for people aged between 70-79 years.

It is likely that it will take a few months to get stocks of vaccine to a robust level - your GP practice will be co-ordinating this and will be getting in touch with patients to

arrange an appointment for this. If you read or hear about a shingles vaccination being available please do not flood your GP practice with requests for this straight away as there will not be enough vaccine to cope. It might be worth enquiring about it when you are in for your flu vaccination.

Other changes to vaccination taking place shortly is the start of a roll out of flu vaccination to children (likely to be via a nasal spray). We await precise details of this but this year it will certainly not be given to all children. It is likely that all 2 and 3 year old children will be offered this via GP surgeries, whilst the school medical service will provide vaccination for a chosen age group of primary school children. As in previous years, ALL children with underlying medical problems will continue to be offered flu vaccination.

Measles: Most will have heard of the serious outbreak of measles in South Wales and some may be worried about the possibility of anything similar locally. It is certainly possible that a measles outbreak could occur although unlikely to be on the scale of South Wales where vaccination levels fell particularly sharply following particularly irresponsible journalism in the wake of fraudulent medical research claims in 1998. This has led to very high levels of teenagers in Wales having no immunity to measles which has largely driven the level of outbreak there. Vaccination rates locally did fall, albeit nowhere near as much as in Wales, but it does leave some local vulnerability. If you opted not to have your child vaccinated against measles (whether in light of previous scare or otherwise), it is not too late. MMR vaccination can still be given to protect against this risk. Please contact your surgery if this affects you and you now wish to re-consider. If in any doubt around your child having had measles vaccination, please check with your GP practice.

On a wider issue this emphasises the need to be wary of what you might read in the popular press (apart from the Cove Chronicle!).

Virtually every day we come across people who have stopped important medications due to an unsubstantiated scare story or who read about a new “blockbuster “drug that has been promoted in the tabloids (story potentially fed to them by drug companies?). There are good sources of reliable information available to help around health and medicines, and sometimes very useful press articles but please be aware of the very significant risks of following all you read in the newspapers - the current measles outbreak is a prime example of how damaging this can be.