

Submission
No 314

**INQUIRY INTO HEALTH OUTCOMES AND ACCESS TO
HEALTH AND HOSPITAL SERVICES IN RURAL,
REGIONAL AND REMOTE NEW SOUTH WALES**

Name: Name suppressed
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Partially
Confidential

I returned back to Mudgee after lower back surgeries when working as a nurse. As required family supports as well as reduce costs of living etc

I had to have two further surgeries when living in Mudgee I chose a neurosurgeon that visited locally in Orange 2.5 hrs drive which was a lot better option then Sydney being up to 4 hrs drive and over blue mountains where the bends caused additional pain.

I could get X-rays and CT locally but need to travel 1.5hrs to Dubbo for MRI spect CT

This distance for MRIs difficult due to pain many ti ex needing escorts to drive, community transport available but there small low cars I could get into are rougher travel but then can get out due to my height and back problems

I found that at times to get more urgent appointments the clinic in Orange NSW was booked for months then need to go to Sydney the only time that iptaas approved flight travel was once post surgery

There was no option to video conference or even ph consult. Conferencing with GPS. Often unsuccessful. As GP a d surgeon never run on time ,

Video appointments more common with services now with COVID but I notice more are opting out (as financially get less)

My continued care need of AFOs Calipers etc I continued to need to travel to Orange or Wollongong (5hrs) pain management ct guided injections Dubbo pain specialist Orange radio frequency day stay in Orange but then hard to get escort family working community care driver can't take responsibility when post sedation or anaesthetic

Several times I or my mother for her staff have left Mudgee at 6am to get to appointments to find error in there booking and Apt not there and getting called at 9am when near Sydney to find appointments cancelled as dr called into surgery. Why they have been rostered on when booked in clinic I don't understand. Ex nurse I understand emergencies but they should cover on there clinic days

whilst Mudgee hospital was planned and built and the main issue that come up on FB community pages at that time a d still do was why a new hospital and barely a d new beds but most of all why non MRI

I was told by a radiology clinic that government doesn't allow an MRI fir so many kms under Medicare. I think that should be based in needs and town size.

A private clinic also wouldn't come to Mudgee as majority of clients use Medicare

Why couldn't private company be encouraged to set up in new hospital they pay fir there MRI free room but bulk bill

Understandably not everything can be at every town or hospital but diagnostic imaging to limit travel iptaas travel claims required fir accidents maybe prevent call out of emergency helicopters and enhance people's quality of life time

I know for me the need of MRI will continue if could have them locally reduce pain then follow up with video conference (majority of times there's no physical exam)