

CMO Positions Vacant

Orange Base Hospital

Emergency Department

The Emergency Department at Orange Base Hospital is seeking to increase the seniority and permanency of its medical staffing. To this end we are looking to recruit Career Medical Officers with a minimum of three to four years postgraduate experience and an established interest and experience in Emergency Medicine.

The successful CMO should be able to function as in-charge-of-shift of the medical staff on the floor and sustain a day-to-day administrative role, take admitting calls and liaise with both registrars and consultants and local and regional GPs, stay in contact with the bed state, redispense medical resources according to need, and provide close supervision and support to junior staff.

Familiarity with all aspects of the ED's function is assumed. Teaching and education will be given a high priority and opportunities exist within hospital and regional educational services, such as ELS and EMST placements for committed applicants. It is anticipated that the CMO will also take part in all aspects of the regional road retrieval service and in-house additional training will be offered if necessary.

The Emergency Department at OBH is a busy and growing service, and we are looking for medical officers willing and able to take an active part in realising its potential.

Please contact Dr Karen Mahlo on 02 6362 1411 for details.

Credits

Editor:

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Flying Colours Printing
(02) 9829-1514

WANTED!

ED CMOs - GOULBURN BASE HOSPITAL

EXCELLENT REMUNERATION - NEGOTIABLE HOURS

"CMO-FRIENDLY" FACEM DIRECTOR & WONDERFUL ED NURSING STAFF.

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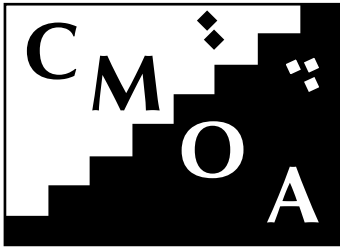
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Disclaimer

Important: Read This

The views expressed within this publication are those of the authors, who enjoy freedom of speech and use it regularly. They are therefore occasionally neither wise nor politically correct. Neither do they necessarily represent the view of the CMOA.



CMO Bulletin

Newsletter of the Career Medical Officers Association Inc

December 1997

Volume 1 No 4

President's Address

Happy Birthday!

This edition of the *CMO Bulletin* marks our 1st Anniversary as an association and it's a good time to reflect on our progress to date:

1. We exist as a legitimate special interest group in the medical field and now have over 100 members—a large increase over the 28 doctors who attended the inaugural meeting on 13 November, 1996.

2. We have an energetic committee who work hard for the membership bringing CMO issues to the fore in publications such as this, and representing you at meetings, conferences etc relevant to CMOs. Two people I would like to point out for special mention are Mary Webber—Editor of this publication, Secretary of the CMOA and full-time director of the Orange Base Hospital Emergency Dept—she does a power of work (Super CMO!!), and Stephen Delprado—Education Officer of the Association and one of the new breed of private hospital based CMOs, who is constantly looking for ways to bring quality education for CMOs onto the agenda and into the mainstream of CMO practice.

3. We have a quarterly bulletin, newsletters and a Website on the internet.

4. We have had official and unofficial representation on various committees, conferences and medical groups that may impact on CMO practice, including; Medical Training Review Panel (HMO subcommittee), AMA - Medical Careers 2000 Workshop & Doctors in Training Organisations Caucus, Australian Salaried Medical Officers Federation, Australasian Society for Emergency Medicine, and 2nd Forum on the Integration of General Practice and NSW Health.

A pleasing aspect of this high profile is the invitations we are now getting as an organisation to attend and voice our concerns at these meetings.

5. We have commenced detailed discussions both within the Association and with outside institutions concerning the provision of quality education to CMOs.

As impressive as this list is for a “neonatal” group, there is no cause for complacency and Warwick Barnes has brought up some important issues in the last edition of the *Bulletin* (in “*The Future for CMOs*”). Have we arrived too late, emerging from the “primordial swamp only to be greeted by the Medicare Ice Age?” Will many of our positions evaporate when staff specialists (such as FACEMs in EDs) come on board in increasing numbers?

There are no easy answers to these questions and much depends on medical manpower numbers and deployment factors decided in the main by Governments (especially Federal) with issues sometimes political rather than health-related involved in the equations. What does seem to be apparent is that there is no chance of controlling our own working environment without organisation, and I believe for us that means the CMOA.

I feel that it is highly unlikely that FACEMs will ever displace all or even most of the CMOs that now work in EDs (how often are you asked to do more shifts than you want?) and there are increasing requirements for CMOs in private hospitals (in ED and general ward work). There is also the possibility of CMOs setting up their own

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