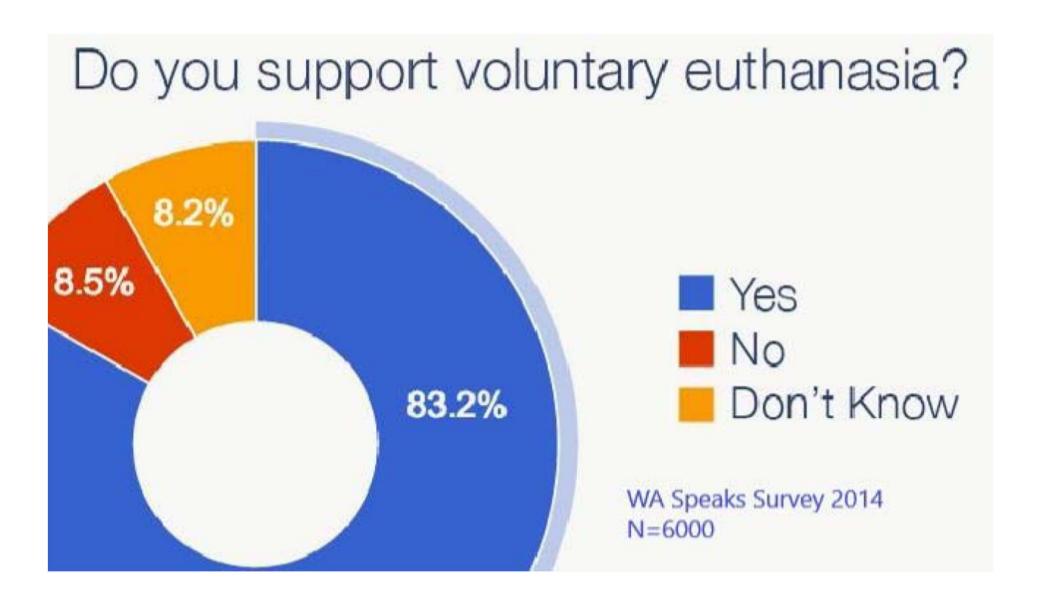


Source: Murray, S.A. et al1



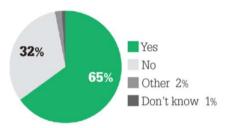
Neuro-degenerative conditions



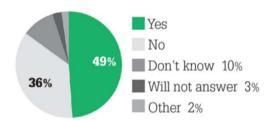
Australian Doctor. 15th October 2016

Survey 366 doctors

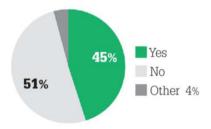
Q. Do you support laws which would allow doctors to end the lives of terminally ill patients, facing intolerable pain/ suffering?



Q. Would you be willing to assist in a patient's suicide if they were terminally ill and facing intolerable pain/suffering?



Q. Have you had requests from patients to assist in their suicide?



Activity/topic	Frequency	Notes	Reference	Age group								
				15-19 20-24	25-25	10-34 IS-30	6-H 6	48 50-54	95.50	El-54 E	m 19	79
Prevention of chronic disease	N		NI S	named Code	annuit B	Marie Control	distance of the			STREET, SQUARE,		
Smoking	Opportunistically	It would be ideal to offer smoking cessation advice at every visit for those	p 67, Section 7.1									
		at high risk of complications										
Women who are pregnant or planning a pregnancy	Each antenatal visit		p 67, Section 7.1 and p 18, Chapter 1.									
Overweight	Every two years	Every 12 months for Aboriginal and Torres Strait Islander patients, or those with existing diabetes, cardiovascular disease, stroke, gout or liver disease. Every six months for adults who are overweight or obese	p 69 Section 7.2									
Nutrition	Every two years	Every six months for patients who are overweight or obese, or have high cardiovascular absolute risk, a family history cardiovascular disease, type 2 diabetes or high risk of type 2 diabetes.	p 73, Section 7.3									
Alcohol: Early detection of at-risk drinking	Every two to four years for low-risk groups and opportunistically for higher risk groups	All patients 15 years of age and older should be asked about the quantity and frequency of alcohol intake	p 75, Section 7.4									
Women who are pregnant or planning a pregnancy	Each antenatal visit	No drinking is the safest option	p 18, Section 1									
Physical activity	Every two years	Opportunistically for those at higher risk, including teenage girls, older adults, office workers, Aboriginal and Tornes Strait Islander patients, patients with low socioeconomic status and non-English speaking background, or those at high risk of a chronic condition or cancer	p 77, Section 7.5									
Dec passantian auto	Opportunistically	Consider for all women aged 15–49 years	p 18. Chapter 1								_	_
Pre-conception care Sexual health – Chlamydia and other	Opportunistically Opportunistically if indicated	Consider for all women aged 15–49 years All sexually active patients up to 29 years of age. Test every 12 months for	p 18, Chapter 1 p 62, Section 6.2.1			_	1		-			-
sexually transmissible diseases	оррогального и пасава	higher and highest risk groups	p 62, Section 6.2.1									
Prevention of vascular disease	Te	IA CONTRACTOR OF THE CONTRACTO	- 00 C-+ 04		-	-						
Absolute cardiovascular disease risk assessment	Every two years	Aged >35 years for Aboriginal and Torres Strait Islander patients	p 86, Section 8.1									
Blood pressure	Every two years	Every 6–12 months for patients with moderate risk and every 6–12 weeks for patients with high risk.	p 87, Section 8.2									
Cholesterol and other lipids	Every five years	Every two years for those with increased risk, and 12 months with increased cardiovascular risk and existing chronic disease. Aged >35 years for Aboriginal and Torres Strait Islander patients	p 89, Section 8.3									
Type 2 diabetes	Every three years	Every 12 months for those with impaired glucose tolerance or impaired fasting glucose, Aged 18 years and older for Aboriginal and Torres Strait Islander patients	p 92, Section 8.4									
Stroke	Assess patients with high absolute risk every 12 months	Traine travel protects the	p 94, Section 8.5									
Kidney disease	Every one to two years for those at high risk	Aged ≥30 years for Aboriginal and Torres Strait Islander patients	p 96, Section 8.6									
Cancer			V Section 1		1000							
Colorectal cancer	Every two years from 50 years of age	Earlier for those with high risk	p 105, Section 9.2									
Breast cancer	Every two years	Sales of the state	p 109, Section 9.3									
Melanocytic skin cancer	Opportunistically for average and increased risk	Examine every 6-12 months for those at high risk.	p 113, Section 9.4.1									
Non-melanocytic skin cancer	Opportunistically		p 116, Section 9.4.2									
Cervical cancer (to April 2017)	Every two years	or ago, are very as more and registrary page.	p 117, Section 9.5									
	Every five years		p 117, Section 9.5									
Psychosocial		- Lander-	The second of the		-							
Depression	Every encounter for those aged 12–18 years and opportunistically for those aged ≥18 years											
Intimate partner violence	Opportunistically; maintain a high level of clinical awareness for patients at increased risk	Every encounter for adolescent women and screen all pregnant women	p 130, Section 10.3									
Elderly	THE ST ROOF OF PERSON TO SEE STATEMENT THAT	· No.	100	-	1	-		100	-		100	200
Immunisation	Refer to Section 5.1 or the Australian immunisation handbook		p 46, Table 5.1									
Physical activity	Every two years	Advise moderate physical activity	p 46, Section 5.2 and p 78, Table 7.5.1									
Falls risk	Every 12 months	Every six months if the patient has a history of falls or multiple risk factors	p 47, Section 5.3		1 1	_	1		-			
Vision and hearing	Every 12 months Every 12 months	Every aix municipal tries pagent has a majory or lars or multiple has factors	p 41, Section 5.3									
Oral health	At least every 12 months and encouraged to attend annual dental visits	More frequently for those at increased risk	p 134, Chapter 11									
Glaucoma	Frequency of follow-up determined by the patient's eye assessment	Patients at increased risk	p 137, Chapter 12									
Octooporosis	eye assessment											
Osteoporosis Postmenopausal women	Eurou 10 months for augment risk	Increased sink for women agod >50 years with sink factors	p 141, Chapter 14	7	7 7	700	-					
A STATE OF THE STA	Every 12 months for average risk	Increased risk for women aged ≥50 years with risk factors										
Men	Every 12 months for average risk First visit to a practice and then at least every three years	Increased risk for women aged ≥50 years with risk factors	p 141, Chapter 14 p 24, Chapter 2									
Family history screening questionnaire												