

# The Cutting Edge

Issue No 24. October 2007



**Royal Australasian College of Surgeons**  
**New Zealand National Board**

## From the Chair

**A**t the recent NZNB meeting we discussed the question of re-entry to the surgical workforce after a period of absence. The problem has achieved prominence at the College office in the past few months, with the Medical Council seeking advice about the suitability of particular RACS fellows for Vocational Registration.

In these situations the fellows in question had not been practicing in the surgical specialty in which they were seeking vocational registration for a period of time, and the Medical Council was rightly seeking clarification and guidance from the College as to whether vocational registration was appropriate.

The College has a policy entitled 'Re-Skilling and Re-Entry Program Guidelines'. This document recommends that 'on returning to active practice or an element of clinical practice following a prolonged absence that contact is made with the EDSA to facilitate the development of a structured re-entry to practice program.' A number of guidelines then follow as to how this program might be developed.

The issue for the National Board has been what constitutes a 'prolonged absence.'? The College guidelines are deliberately vague on this matter, and when it was discussed at the Board meeting there was no clear consensus on the issue. It was generally felt that somewhere between one and three years would define a prolonged absence but this is still a fairly wide period of time.

In addition the reasons for the prolonged absence need to be taken into consideration. The type of events which may lead to a prolonged absence include parental leave, health problems, time taken to complete research and the pursuit of non surgical interests. The duration of absence may range from a few months to a number of years. Clearly it is in the best interests of the surgeon and the public to ensure that those who have any significant time out of active surgical practice are identified and appropriately re-skilled.

There is a lot of difference between a Fellow who has been retired for a number of years (and who may have been 'winding down' in terms of CPD etc before he/she retired) and wishes to recommence an active surgical practice, and someone who has been undertaking training in another specialty for two to three years but wishes to resume active practice in their former specialty.

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Therefore the factors which need to be taken into consideration when discussing this issue include:

- The duration of absence
- The reason for the absence
- Any medical practice undertaken during the period of absence?
- Any surgery practiced during this period?
- The type and range of any surgery undertaken during the period of absence.

### .... From the Chair

*Continued from page 2*

There was also some discussion around the age of a surgeon wishing to resume active practice – is there an accepted time after retirement after which a return to surgery is considered unwise? This is obviously an area that needs to be addressed with some delicacy.

As you can see there are a number of factors to be taken into consideration when this problem is presented. We do not want to create unnecessary bureaucratic hurdles for surgeons, but we must act in the best interests of the

people of New Zealand. We are sure that a similar situation must arise in Australia from time to time.

In addition the National Board feels that the issues are often too complex to be dealt with by the EDSA in isolation. Therefore we have written to the Board of Professional Development and Standards to ask them to discuss these matters at their next meeting, with a view to establishing some more definitive guidelines and a College-wide consensus to deal with these problems.

## Public Recognition of Surgeons

**Most surgeons work very hard and carry a heavy load of responsibility. Many are involved with community activities as well as serving on professional committees, boards and councils. When the time commitment to all these activities is added up, there will be many working upwards of 80 hours per week. This leaves relatively few hours for family, friends and sports and hobbies and raises the question about how those who make the greatest contribution can be recognised by their peers and by the society at large.**

Surgeons are not unique in terms of the above issues but we are an organization of and for surgeons and surely the RACS should have a prominent role in ensuring that those surgeons who make the greatest contribution are recognised in some way. This recognition, broadly speaking can be either by the National Honours system or via the RACS system. Taking first the National Honours system, it is my impression that surgeons in New Zealand get proportionally fewer honours than our friends across the Tasman and certainly fewer than other comparable groups in NZ, particularly the legal world. This sounds like a whinge about poor surgeons not getting a fair deal. Far from that it is about the surgical world in NZ getting together to nominate the leaders of surgery and to ensure that the nomination is made as powerful as it can be. The College is almost always going to be willing to either initiate or support a nomination but we must be asked or told that such an application is in the wind.

Application/nominations are made to the Honours Secretariat in the Prime Minister's Department. A form can be down-loaded from the web and suitable support for the nomination must be sought. I have been told, on good authority, that the standing of the supporters is a crucial aspect of maximizing the chances of success. Governors General, Cabinet Ministers and those who have held high office in the public service, the Medical Council or organizations such as our College together with those who have been honoured themselves are the supporters most likely to carry sway. If an application is unsuccessful it appears well worthwhile to apply again and perhaps again.

The College has its own system of awards, administered by the Awards Committee, chaired by the President. The awards are in several categories: Service to the College, Education/Research/Clinical Performance and Contributions to surgery. There are a number of awards in each category with different criteria for each. Some can be nominated by any fellow of the College others require a set number of Councillors. The College awards that have had most relevance to New Zealanders in recent years are:

- The Colin McRae medal
- The RACS medal.

The McRae medal was instituted to recognise and promote the art and science of surgery and surgical leadership in NZ. The medal is awarded annually where appropriate to those who have made

outstanding contributions in these ways. Nominations are sought by the NZ National Board from NZ fellows. The RACS medal is awarded to those fellows and non-fellows who have made singularly valuable and dedicated contributions to the College. Any fellow can make a nomination but at least 12 members of Council must be in favour of the award.

Other awards of possible relevance to NZers include:

- The Sir Louis Barnett medal for those making outstanding contributions in education, training and advancement to surgery.
- The Rural Surgeons award
- The RACS Surgical Research award
- The Heslop medal
- Awards for Excellence in Surgery
- The RACS International medal
- The ESR Hughes medal
- The Sir Hugh Devine medal (The College's highest honour)
- The Gordon Trinca medal for Trauma Care
- The Prince Henry's medal of the RACS.

The New Zealand office will advise on the process for nominating a fellow for these awards and will indicate which of them require one or more members of Council to make the nomination. NZ fellows are encouraged to consider which of their colleagues would be suitable for one of these awards and to make a nomination in the required manner.

John Simpson, EDSA



# Congratulations

The College would like to warmly congratulate General and Paediatric surgeon Mr James (Rob) Davidson FRACS and Orthopaedic surgeon Professor William (Bill) Gillespie.



Mr Rob Davidson FRACS, ONZM at the Christchurch ASC May 2007.

Mr Davidson was awarded the Officer of the New Zealand Order of Merit (ONZM) in the 2007 Queens Birthday Honours list.

The official citation stated that it was for services to the community but his services to general and paediatric surgery played a significant part in the award. Rob obtained his FRACS in 1962 and was a visiting surgeon to Christchurch Hospital until his retirement. He served on the NZ Committee of

the College and was its chairman from 1980 to 1982.

He was closely involved with the 2007 ASC and had the important but difficult job of organizing the golf tournament.



Prof Bill Gillespie FRACS, OBE

Prof Gillespie was awarded the OBE in the 2007 New Year's Honours List (UK) for services to Medicine. Bill obtained the FRACS in 1977 and worked in Auckland and Wellington before gaining the inaugural Chair of Orthopaedics in Christchurch. He also held the Chair of Orthopaedics in Newcastle NSW. He then became the Dean of the Dunedin School of Medicine before being appointed to the

new Hull/York School of Medicine as Dean.

He has a profound interest in Medical Education and was very involved with the Cochrane Collaboration. He and his wife Lesley have retired back to New Zealand and live in Dunedin.

## Support for Surgeons Group - Contact Details

### Orthopaedic Surgeons

Allan Panting  
Ph: 03 548 3455

Ian Peters  
Ph: 021 989 416  
Email: ipeters@nhl.co.nz

Chris Dawe  
Ph: 07 543 1850  
Email: c-l-dawe@xtra.co.nz

John Dunbar  
Ph: 03 454 3432

John Cullen  
Ph: 09 488 0222

Nigel Willis  
Ph: 04 233 0886  
Email: nigelwillis@xtra.co.nz

### General Surgeons

Murray Pfeifer  
Ph: 03 214 4207  
Mobile: 027 488 0875  
Email: mjpfeifer@xtra.co.nz

Pat Alley  
Mobile: 021 285 2990  
Email: pat.alley@waitematadhb.govt.nz

John Kyngdon  
Mobile: 021 276 5724  
Email: John.Kyngdon@bopdhb.govt.nz

### Otolaryngologist

Cathy Ferguson  
Ph: 04 971 6011  
Mobile: 021 472 772

### EDSA

John Simpson  
Ph: 04 385 8247  
Email: john.simpson@surgeons.org

### Vascular Surgeon

Ross Blair  
Ph: 07 858 0755  
Email: rdblair@wave.co.nz

### Neurosurgeon

Edward Mee  
Ph: 09 520 9672  
Email: edward.mee@xtra.co.nz

### Urologists

David Mason  
Mobile: 027 442 8916  
Email: dfcm.urology@clear.net.nz

### John Cadwallader

Ph: 09 623 0161

### Cardiothoracic

Dick Bunton  
Mobile: 027 221 8468  
Email: dickb@es.co.nz



# Fellowship Examination Congratulations

Congratulations to the following New Zealand Trainees and International Medical Graduate's who recently passed the Fellowship Examination in Christchurch.

## GENERAL SURGERY

Christopher Daynes  
Senarath Edirimanne  
Rhea Liang

## PLASTIC & RECONSTRUCTIVE SURGERY

Walter Flapper  
Agneta Fullarton  
Stanley Loo  
Jonathan Wheeler

## ORTHOPAEDIC SURGERY

Shihab Faraj

## CARDIOTHORACIC SURGERY

Sylvio Provenzano (NZ IMG)

## OTOLARYNGOLOGY – HEAD & NECK SURGERY

Nicola Hill

## UROLOGY

Leanne Shaw

## Presentation of the Successful Candidates

The September Fellowship Examination for Australian and New Zealand candidates was held in Christchurch this year. Examiners from all nine specialties were called upon and there were a total of ninety nine applicants. The Court of Examiners dinner for past and present members was held at the Crowne Plaza Hotel. The presentation of the successful candidates was held in the Hotel Grand Chancellor.



Chair of the Court of the Examiners Rob Black with Court Registrar Gordon Beadel.



HK General Surgery Examiner Francis Mok (centre) with NZ General Surgery candidates Senarath Edirimanne (left) and Rhea Liang (far right).



NZ Otolaryngology Examiner Robert Allison with Otolaryngology candidate Nicola Hill (NZ) and Otolaryngology Observer Julianne Agnew (Aus).



Plastic & Reconstructive Surgery candidate Mansoor Mirkazemi (Aus) with NZ Plastic & Reconstructive Surgery Examiner Sally Langley.



## Court of Examiners – Applications Now Open

The Court is appointed by the Council of the College. Its purpose is to conduct the Fellowship Examination and to assess the knowledge, clinical skills, judgement and decision making, and professional competencies of candidates, in order to ensure that they are safe and competent to practice.

### Appointments to the Court of Examiner

New Zealand Fellows are asked to note the following vacancies on the Court:

General Surgery – New Zealand

Orthopaedic Surgery – New Zealand 1 vacancy

Applications from eligible Fellows willing to serve on the Court should be forwarded to the Department of Examinations of the College by no later than Monday 19 November 2007.

For enquiries regarding applications please contact Carmen Davis on: +61 3 9276 7471 or email [carmen.davis@surgeons.org](mailto:carmen.davis@surgeons.org)

Further information in respect to Appointments to the Court of Examiners can be found on the College website [www.surgeons.org](http://www.surgeons.org).

## Presentation of Successful Candidates



*Cardiothoracic (NZ IMG) Sylvio Provenzano with Cardiothoracic Examiner Mark Edwards (Aus).*



*NZ Urology Examiner Stephen Mark, Urology Candidates Frank Redwig (Aus IMG), Leanne Shaw (NZ), David Dangerfield (Aus) and guest Eva Fong.*



*Plastic & Reconstructive Examiner Dan Kennedy (Aus) and Neurosurgery Examiner Michael Weidmann (Aus) at the Court of Examiners dinner.*



*Past General Surgery Examiner Mr Ted Perry and Chair of the Court of Examiners Rob Black at the Court of Examiners dinner.*

# WYN BEASLEY WRITES...



## ON PUBLISHING RESULTS

We are shortly to visit the Galapagos, and the prospect has set me thinking about Darwin, for it was here that, in 1835 during *Beagle's* call at the islands, he made the observations that played such an important part in his study of the origin of species and all that stemmed from it. He noted that each island in the group seemed to have its own local variety of finch, and that the beaks of these finches varied from one island to another. Moreover, the shape of a finch's beak, on a particular island, correlated well with the form of the vegetation on which it fed.

Now this observation in itself would be compatible with belief in a prudent Creator, providing a thoughtful match of food and creatures to enjoy that food; but to Darwin it came as a further item in the assembly of observations that he had gathered during a voyage that would, at the end, have covered a five-year period. He had seen rocks that must once have been under the sea, now uplifted high in the mountains of South America; he interpreted his observation of finches as evidence that the individuals whose physical characteristics best matched their food source would prosper and procreate ahead of those less well matched, so as to create distinct populations over time.

All this shook the rigid beliefs of the theology in which he had been brought up. Creation, argued orthodox belief, had taken place in 4004BC [Bishop Ussher of Armagh – or perhaps his colleague Lightfoot – studying the scriptural genealogies, had even determined the time and date within that year: 9am on Sunday 26 October!] God had created plants and animals, each variety passing a pre-delivery check and thereafter being stable in perpetuity. And to punish ungodliness, God had sent one 40-day Flood – once. In the surmise that now consumed Darwin, all this had to be doubted. But orthodoxy required that it should not be doubted.

In passing, we may note that in much of the US orthodoxy still requires that the Creation story, as literal, scientific and precise truth, must not be doubted.

Not surprisingly, Darwin spent much time wrestling with the enormity of the conclusion that was being forced upon him. Even John Hunter, who was a Scot with red hair, was driven to an uncommon pusillanimity when it came to publishing his text on geology, for that too demanded an interval of time much greater than the six millennia that Ussher had allowed. In the event Hunter did not publish in his lifetime: it was left to his brother-in-law Everard Home senior to squirrel away the MS of the work, to nephew Everard junior to return it to Lincoln's Inn Fields in 1839, and to Richard Owen to publicise it in 1855.

Darwin was equally reluctant to publish his views, and it was not until 1858 that he was jolted out of his inertia, when a letter reached him from Alfred Russel Wallace, presenting views uncannily like Darwin's own. Wallace asked if Darwin would referee his work, and if he approved it send it on to Lyell the eminent geologist. Darwin did so, lamenting as he did so 'So all my originality will be smashed'. It was not smashed: Darwin and Wallace together spoke before the Linnaean Society, and the following year *On the origin of species by means of natural selection* was published. Another year, and a meeting of the British Association in Oxford became the scene



of bitter debate. Bishop Samuel Wilberforce of Oxford, the egregious 'Soapy Sam', led the criticism [firing shots loaded by Richard Owen, whose understanding of Hunter's views had not led him the rest of the way] while T H Huxley championed Darwin's opinion so vigorously as to earn himself the nickname of 'Darwin's bulldog'.

If Hunter had published his geology MS before his death in 1793; if the English College had published it when Everard Home junior handed it over in 1839, then Hunter would have been recognised as a pioneer of evolution theory. If Wallace had sent his writings to someone other than Darwin, priority in publication might have accrued to Wallace, and Darwin would not have been regarded as a pioneer of evolution theory. Delay in publication carries its own risks.

In a letter to the *Journal of the Royal Society of Medicine* in 1996, J H Baron defined science thus: Construct refutable hypothesis : test : publish. It is a triad to which every researcher should pay homage, because publication delayed or omitted means that the research concerned might as well not have been undertaken.

In the context of what might have been an unseemly debate on priority between Darwin and Wallace, it is pleasant to be able to record that, when Darwin died in 1882 and was buried in Westminster Abbey, Wallace was among his pallbearers, together with Joseph Hooker [who travelled with Sir James Clark Ross's Antarctic expedition as surgeon-naturalist in *Erebus* and whose name appears often on the map of this country] and of course Darwin's own 'bulldog', T H Huxley.

*This model of the Beagle is now on display at Down House, where the Darwins lived after their marriage. The house was presented to the British Association for the Advancement of Science by Sir George Buckston Browne, and opened to the public in 1929. The Royal College of Surgeons of England had a surgical research facility on the adjacent land, and took over responsibility for the house as well, until 1996 when English Heritage bought the property.*



## Obituaries

### GEORGE RICHARD (DICK) LAURENSEN FRCS FRACS 1929 -2007

**“A life of achievement, duty and service.  
A man of humanity and vision.”**

These words penned by his wife Bronwen admirably describe Orthopaedic surgeon Dick Laurenson who passed away after a long illness on August 28th 2007.

Born on the West Coast, the son of an engineer, the family moved to Wellington when he was a baby, as his father had been appointed Commissioner of Transport. He attended Kelburn School, and then Wellington College. After leaving school he joined the Public Works as a cadet draughtsman. Dick planned a career as an engineer, however possibly inspired by his medical uncle he changed to medicine. After an intermediate year at Victoria he went to Dunedin and graduated MBChB, in 1954.

He returned to Wellington Hospital for his resident training. Three years later he started a general practice in Epuni to raise funds to train overseas. Over the next five years this practice, including obstetrics and anaesthetics, became very busy.

In 1965 he sailed to Britain with his wife Sue and five children. Registrar posts at The West Middlesex and The Royal National Orthopaedic Hospitals led to achieving FRCS, (London) in 1964. Returning to New Zealand, now with six children, he worked at Wellington Hospital before being asked to establish the Hutt Orthopaedic Unit, with Graeme Smaill in 1967. He sat and passed the FRACS, in 1970.

Dick was a people person, very compassionate and always ready to listen to a patient. His explanations of prognosis and treatments were clear and concise. He was a staunch ally, but if he disagreed he was a formidable foe. He was passionate in his beliefs. Patients were often surprised when they opened their back door, to see their surgeon Dick Laurenson campaigning for the Labour Party.

Dick supported and helped institute podiatry training in New Zealand. He was instrumental in gaining acceptance for podiatrists to use local anaesthetic

for minor procedures. He served terms on various New Zealand Orthopaedic Association committees including the executive, the Accident Compensation Subcommittee and was also a delegate to the Chiroprodists Board.

In 1980 he returned to Wellington Hospital, accepting the post of Director of Medical Services. After several administration restructurings he took early retirement in 1992, to become involved and work on the family orchard and farm in Otaki.

Dick was farewelled by his friends at Old St. Paul's on Saturday 1, September. He is survived by his second wife Bronwen and his six children and their families.

*Our thanks to Mr Chris Bossley FRACS for this obituary which we have abridged for publication.*

### JOHN MB (SANDY) SMITH – 1938 - 2007

Sandy Smith died suddenly and unexpectedly in Dunedin on August 18 2007 at the age of 69 years. A professor of microbiology and a former head of the Department of Microbiology in the University of Otago Medical School, Sandy was appointed to the Board of Examiners for Part 1 FRACS in 1987. He was a member of the pathology committee for 18 years, during which time he wrote a great deal of what became the syllabus on microbiology and antibiotics for the RACS basic

medical sciences exam, culminating in *The Surgeon's Guide to Antimicrobial Chemotherapy* with co-authors John Payne and Thomas Berne in 2000 (Arnold, London). He was a popular teacher of surgical trainees in Dunedin, in appreciation of which the Dunedin Basic Medical Sciences Course Trust recently named a scholarship for him. This will provide travel grants to research students in medical microbiology.

The RACS can be grateful to Sandy Smith for taking a small and inadequate section

from a textbook of the 1970s, and turning it into a microbiology syllabus appropriate to today's surgical practice. Many of those who worked with him in Melbourne will share fond memories of Sandy with his New Zealand friends. He is survived by his wife Patricia (Trish), three daughters and a son.

*Our thanks to Mr John Heslop CBE, FRACS for this obituary which we have abridged for publication.*

## Notice

It is with sadness that we note the passing of Mr Ray Chapman in August of this year. Mr Chapman was Secretary of the College from 1962 -1989. A full obituary will feature in 'The Surgical News'.



## Travel Bookings

A reminder to those Fellows and Course Faculty who are required to travel on College business (be it international or domestic). If you are making your own bookings could you please advise Luanda at the NZ Office of the dates and purpose of your travel either by telephone NZ free phone 0800 787 469 / 04 385 8247 or email [College.NZ@surgeons.org](mailto:College.NZ@surgeons.org)

Alternatively you may contact Luanda direct and she will arrange the travel for you.

## Replenish your Library

The NZ Office is pleased to advise that they have a limited number of the following books available - gratis.

'The Mantle of Surgery' by Mr A W Beasley, CNZM, OBE, ED, FRACS

'Surgeon Scientist – Adventures in Surgical Research' by Prof. Graham L Hill, MD, FRACS.

If you would like a copy of either of these books, please contact the NZ Office either by telephone NZ free phone 0800 787 469 / 04 385 8247 or email [College.NZ@surgeons.org](mailto:College.NZ@surgeons.org) with your details.

Books will be distributed on a first come first served basis.

## 'NZASM 2008 - CHANGE OF DATES'

Please note that due to a change in venues,  
the dates for the NZASM

*(previously advertised as mid-September)*

will now be held on:

**Wednesday 27 August through to  
Friday 29 August 2008.**

## Tyco Healthcare rebrands to Covidien



In July 2007 Tyco Healthcare rebranded to Covidien. In a press release, the Managing Director for Australia/New Zealand, Conrad Crighton, advised that it would be 'business as usual'. He added that there will be a full migration to the new Covidien logo over the next twelve months. Should you require any further information then please do so through your local sales representative.





## Up-Coming Events

**60th Annual General and Scientific Meeting of the New Zealand Society of Otolaryngology - Head & Neck Surgery**  
**Rydgges Lakeland Resort, Queenstown, New Zealand**  
**Tuesday 13th to Saturday 17th November 2007**

Online Information: [www.orl.org.nz/conference2007/](http://www.orl.org.nz/conference2007/)

Convenor: Patrick Dawes (President)

Organising Committee: John Gilbert, Martyn Fields, Dean Ruske, Jamie Ryan

Conference Managers: Medical Industry Association of New Zealand

Phone: +64 9 917 3645

Email: [admin@mianz.co.nz](mailto:admin@mianz.co.nz)

Website: [www.mianz.co.nz](http://www.mianz.co.nz)

**New Zealand Association of General Surgeons Annual Meeting**  
**"Recognising the Rubicon"**  
**Copthorne Hotel & Resort, Bay of Islands, New Zealand**  
**Friday 4th to Sunday 6th April 2008**

Online Information: [www.mianz.co.nz](http://www.mianz.co.nz)  
(conference calendar)

Convener: Peter Milsom

Conference Managers: Medical Industry Association of New Zealand

Phone: +64 9 917 3645

Email: [admin@mianz.co.nz](mailto:admin@mianz.co.nz)

Website: [www.mianz.co.nz](http://www.mianz.co.nz)

**CASC 2008 Hong Kong Conjoint Annual Scientific Congress**  
**'Achievement Through Collaboration'**  
**Royal Australasian College of Surgeons and The College of Surgeons of Hong Kong**  
**Hong Kong Convention and Exhibition Centre**  
**Hong Kong, China**  
**12 - 16 May 2008**

Online Information: [www.surgeons.org/casc2008](http://www.surgeons.org/casc2008)

Email: [college.asc@surgeons.org](mailto:college.asc@surgeons.org)

Telephone: +61 3 9276 7420

Fax: +61 3 9276 7431

**World Society of Cardio – Thoracic Surgeons**  
**18th WSCTS 2008 World Congress**  
**Kos Island – Greece.**  
**April 30 – May 3 2008**

Cut off date for electronic abstracts: 30 November 2007.

All abstracts will be reviewed and authors will be notified about acceptance of their paper by 15th January 2008.

Online Information: [www.wscts2008.com](http://www.wscts2008.com)

Email: [secretariat@wscts2008.com](mailto:secretariat@wscts2008.com)

Telephone: +30 2107799261

Fax: +30 2107711768

WSCTS 2008 Secretariat: Vougas Associates Ltd.,  
29, Sinopis Street I GR-11527 Athens, Greece.

## Contributions Welcome

If you have news or views of interest to other surgeons or trainees, The Cutting Edge is keen to hear from you. We want to learn about up-coming events, awards and other news of significance in your specialty.

Any stories received will be checked back with the author before they are published.

Please contact RACS Media Advisor Pamela Fleming at 04 9058198 or email your copy to: [pam\\_alemap@yahoo.co.nz](mailto:pam_alemap@yahoo.co.nz)

Our deadline for Issue No. 25 is 26 November 2007

## ROYAL AUSTRALASIAN COLLEGE OF SURGEONS

### NZ NATIONAL BOARD

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### OFFICE OF THE NZ NATIONAL BOARD

Elliott House  
43 Kent Terrace  
Wellington South 6011  
New Zealand

**Tollfree (NZ only) 0800 787 469 / 0800 SURGNZ**

Phone: +64 (4) 385 8247

Fax: +64 (4) 385 8873

Email: [College.NZ@surgeons.org](mailto:College.NZ@surgeons.org)

### MEDIA LIAISON

Pamela Fleming  
[Pam\\_alemap@yahoo.co.nz](mailto:Pam_alemap@yahoo.co.nz)

### NZ SECRETARIAT

**NZ Manager**  
Justine Peterson  
[Justine.Peterson@surgeons.org](mailto:Justine.Peterson@surgeons.org)

**Executive Director of Surgical Affairs - NZ**  
John Simpson  
[John.Simpson@surgeons.org](mailto:John.Simpson@surgeons.org)

**Basic Surgical Training**  
Dawn Sutton  
[Dawn.Sutton@surgeons.org](mailto:Dawn.Sutton@surgeons.org)

**Specialist Surgical Training**  
Trish McLean  
[Trish.McLean@surgeons.org](mailto:Trish.McLean@surgeons.org)

**Accounts**  
Raji Divekar  
[Raji.Divekar@surgeons.org](mailto:Raji.Divekar@surgeons.org)

**Projects and Executive Support**  
Hilda Fryer  
[Hilda.Fryer@surgeons.org](mailto:Hilda.Fryer@surgeons.org)

**General Administration/Reception**  
Luanda Douglas  
[College.NZ@surgeons.org](mailto:College.NZ@surgeons.org)



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**VIEWES EXPRESSED BY CONTRIBUTORS ARE NOT NECESSARILY THOSE OF THE COLLEGE**



## Royal Australasian College of Surgeons

NZ National Board, Elliott House, 43 Kent Terrace  
PO Box 7451, Wellington South 6242, New Zealand

New Zealand  
Permit No. 164567

