

Practice Manager Education Day

23 April 2026

Jane Barbati

Your Clinical Management and Referral Resource



Localised Clinical Pathways

(Evidence-based guidance adapted for Melbourne clinicians)



Referral Information

(Clear referral instructions for local health services and hospitals)



Regular Updates

(Pathways reviewed and updated regularly by Clinical Editors)



CPD Hours

(Track and record CPD activities directly through Pathway page)



Collaborative Development

(Created by GPs, specialists, allied health and other health professionals)



Easy Access

(Web-based platform, mobile-friendly for point-of-care use)



Streamlined Workflow

(Quick navigation with Assessment, Management and Referral sections all in one place)



Free for Clinicians

(No cost access for all health professionals in North Western and Eastern Melbourne PHN catchments)

Use search bar to **quickly locate** clinical pathways and conditions



- Community HealthPathways
- Melbourne
- Older Adults' Health
- Medicines Information and Resources
- Public Health
- Specific Populations
- Surgical
- Women's Health
- Our Health System
- Carer Resources and Support Services
- Community Health Services
- CPD Hours for HealthPathways Use
- Mental Health Stepped Care - Navigation
- MyMedicare
- Department of Veterans' Affairs
- Digital Health
- Forms and Resources
- Hospitals - Public
- MBS Items
- News Archive
- Practice Incentive Programs
- Practice Management Resources
- Primary Health Networks (PHNs)
- Statewide Referral Criteria for Specialist Clinics

Use the left-hand menu to access clinical categories, **quick and easy** to navigate.



Melbourne HEALTHPATHWAYS

Essential quick-access links for latest updates, Pathway updates, clinical resources and MBS items

Latest News

- 2 April
Health.vic
Health alerts and advisories
- 2 April
TGA alerts
TGA alerts:
 - Safety Alerts (for health professionals)
 - Recall Actions (for health professionals)
 - TGA Medicine Shortages (for health professionals)
- 27 March
Increased risk of measles in Victoria
See Health Alert and updated Measles Public Exposure Sites in Victoria.

Pathway Updates

- Updated - 8 April
Acute Asthma in Adults and Adolescents
- Updated - 2 April
Shoulder Pain in Adults
- Updated - 27 March
Non-acute COPD
- Updated - 27 March
Acromioclavicular (AC) Joint Injury in Adults
- Updated - 27 March
Shoulder Instability (Recurrent) in Adults
- [VIEW MORE UPDATES...](#)

- ABOUT HEALTHPATHWAYS
- BETTER HEALTH CHANNEL
- RACGP RED BOOK
- USEFUL WEBSITES & RESOURCES
- MBS ONLINE
- NPS MEDICINEWISE
- PBS
- NHSD



SEND FEEDBACK

- Smoke Inhalation
- Immunisation ▾
- Infection Prevention and Control ▾
- Local Public Health Units (LPHUs)
- Notifiable Conditions in Victoria
- Specific Populations ▾
- Surgical ▾
- Women's Health ▾
- Our Health System ▲
- Carer Resources and Support Services
- Community Health Services
- CPD Hours for HealthPathways Use
- Mental Health Stepped Care - Navigation
- MyMedicare
- Department of Veterans' Affairs
- Digital Health ▾
- Forms and Resources ▾
- Hospitals - Public ▾
- MBS Items ▾
- News Archive
- Practice Incentive Programs ▾
- Practice Management Resources**
- Primary Health Networks (PHNs)



Practice Management Resources

[Aboriginal and Torres Strait Islander health](#) ▾

[After hours services](#) ▾

[Disaster planning and management](#) ▲

- [General Practice Management During a Disaster](#)
- [Preparing a General Practice for a Disaster](#)
- [Preparing Patients for a Disaster](#)

[Forms templates and useful links](#) ▾

[Health assessments and care plans](#) ▾

[Immunisation and vaccines](#) ▾

[Infection prevention and control](#) ▾

[Legal and ethical](#) ▾

[Managing drugs in general practice](#) ▾

[MBS items](#) ▲

- [Electronic Prescribing](#)
- [Guide to MBS Items](#)
- [Telehealth](#)

[Practice Incentive Programs](#) ▾

- Home
- COVID-19
 - COVID-19 Vaccination
 - COVID-19 Assessment and Management
 - Post-COVID-19
 - Respiratory Infectious Diseases Practice Management
 - Guide to MBS Items
 - Telehealth
- About HealthPathways
- Summary of Referral Pages
- Aboriginal and Torres Strait Islander Health
- Acute Services
- Avoiding Hospital Presentations
- Allied Health and Community Nursing
- Child Health
- Investigations
- Legal and Ethical
- Lifestyle and Preventive Care
- Medical
- Mental Health
- Older Adults' Health
- Medicines Information and Resources
- Public Health
- Specific Populations
- Surgical
- Women's Health
- Our Health System
 - Carer Resources and Support Services
 - Community Health Services
 - CPD Hours for HealthPathways Use
 - Mental Health Stepped Care - Navigation

Home / COVID-19 / Guide to MBS Items

Guide to MBS Items

This page is a quick reference guide to Medicare Benefits Schedule (MBS) as of 1 November 2025. See also:

- Telehealth
- MBS Items
- Practice Incentives Programs

Clinical editor's note

From 1 March 2026, changes to MBS items have occurred. See [March 2026 News](#) and [RAGGP 1 March 2026 MBS Updates](#):

- Item 11707 (12-lead ECG, trace only) will be amended to become a precursor for item 11705. Item 11714 (12-lead ECG, trace, and clinical note) will be made available for GPs to bill on behalf of their patients.
- New MBS items for patient end support (PES) services are being introduced. A PES service is a face to face attendance that supports a multi-disciplinary approach. They are designed for a patient's primary care provider to support them during a video conference consultation with a non-GP specialist or consultant physician.
- Changes have been made to health assessment items for Aboriginal and Torres Strait Islander people including item age delineations and associated age-specific clinical activities. Item descriptors have been revised to include the clinical activities required to bill the items.
- Technical changes to MBS health assessment items to remove references to clinically outdated screening tests and disease-specific vaccinations.
- Stuttering, speech sound disorders (SSD), and cleft lip and/or palate (cleft conditions) will be added to the list of eligible disabilities for MBS item group M10 – complex neurodevelopmental disorder and disability services.

Review eligibility prior to billing.

[Aboriginal and Torres Strait Islander Peoples' Health Assessment and CCM Services Including Telehealth Items](#)

Service	F2F Item No. and Rebate	Video Item No. and Rebate	Telephone Item No. and Rebate	Notes	Frequency
Health Assessment for Aboriginal and Torres Strait Islander People	715	92004	N/A	Aboriginal and Torres Strait Islander patients with Health Assessment can be referred for Medicare-rebated allied health services. ^A	9 monthly

SEND FEEDBACK

- Health
- Acute Services
- Avoiding Hospital Presentations
- Allied Health and Community Nursing
- Child Health
- Investigations
- Legal and Ethical
- Lifestyle and Preventive Care
- Medical
- Mental Health
- Older Adults' Health
- Medicines Information and Resources
- Public Health
 - Disaster Planning and Management
 - General Practice Management During a Disaster
 - Post Natural Disaster Health
 - Preparing a General Practice for a Disaster
 - Preparing Patients for a Disaster
 - Smoke Inhalation
 - Immunisation
 - Infection Prevention and Control
 - Local Public Health Units (LPHUs)
 - Notifiable Conditions in Victoria
 - Specific Populations
 - Surgical
 - Women's Health
 - Our Health System
 - Carer Resources and Support Services
 - Community Health Services
 - CPD Hours for HealthPathways Use
 - Mental Health Stepped Care - Navigation
 - MyMedicare

Home / Public Health / Disaster Planning and Management / Preparing a General Practice for a Disaster

Preparing a General Practice for a Disaster

See also:

- [Preparing Patients for a Disaster](#)
- [General Practice Management During a Disaster](#)
- [Post Natural Disaster Health](#)

Background

[About preparing a general practice for a disaster](#)

Management

Prepare before a disaster occurs

Review resources to assist with disaster preparation:

- [RAGGP's Managing Emergencies and Disasters in General Practice](#) resource
- [Emergency Response Planning Tool \(ERPT\)](#)

Prepare before a disaster:

1. Establishment of the disaster coordinator and chain of command
2. Modes of communication
3. Contact and health information
4. A practice emergency kit
5. The disaster response plan:
 - Conduct research into previous disasters in the area, taking into account practice location and vulnerabilities e.g., previous flood heights and height of building, more bushfire prone areas and likely access and exit routes.
 - Consider these important factors relating to facilities, equipment, staff, and finances.
 - Include all these details in the plan.
 - Have a clear trigger for activation of the plan and immediate steps to take.
 - Consider how your general practice may respond to increased, decreased, or altered health care needs during a disaster.

Plan regular training and review

- Practise using the plan to run through how to respond to a disaster.
 - Consider which disaster scenarios are most likely in your region e.g., flood, fire, storm, mass casualty, or infectious outbreaks (see scenarios below). Consider the practice location and history of disasters in the area.
 - Practise response procedures for these scenarios. Include the activation of the disaster coordinator, use of the communication tree to all staff and notification to relevant authorities.
 - Hold annual training days for staff to become familiar with the Disaster Response Plan and relevant procedures.

SEND FEEDBACK



Case Study



CASE STUDY 20:

Exploring the Australian Government's new National Lung Cancer Screening program using three case studies

Case 1: A 48-year-old patient has heard about the new lung cancer screening program. He has been a heavy cigarette smoker for most of his life, and has quit in the past year with the help of his regular GP. He would like to get screened for lung cancer.

The GP reviews his history and congratulates him on his smoking cessation. He calculates that the patient has an over-30 pack-year smoking history, and has no symptoms suggestive for lung cancer.


However, the patient is not eligible for the current screening program because it is for people aged between 50 and 70. The GP explains this, and at the same time ensures that the patient is up to date with his bowel cancer screening, which commences at age 45. The patient is up to date with his other health checks. He adds a recall in the practice software for this patient when they turn 50.

melbourne.healthpathways.org.au | July 2025




Real clinical scenarios for everyday GP practice

Monthly Bulletin



HealthPathways
Melbourne

Putting knowledge into practice

melbourne.healthpathways.org.au

Want access to HealthPathways Melbourne? [Register here](#) for your HealthPathways account for up to date guidance on clinical and referral pathways for a range of conditions.

What you'll find in this edition

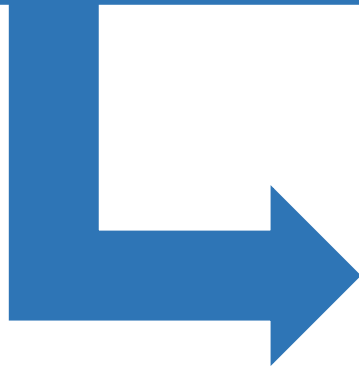
- HealthPathways Melbourne GP Mental Health Treatment Plan updates
- Statewide referral criteria news 1: dermatology
- Statewide referral criteria news 2: children's surgery and ophthalmology conditions
- Insight: HealthPathways Melbourne and Mercy Health
- Case study: Healthy travel preparation
- Case study: Assessing suspected melanoma

Monthly updates straight to your inbox

Contact us: info@healthpathwaysmelbourne.org.au

Thank you!

Scan to Register for Access
and/or Subscribe to the
Bulletin



info@healthpathwaysmelbourne.org.au



melbourne.healthpathways.org.au