## Senior Active Doctors: Retirement and Medical Registration

I concur with, and support, the submissions by The Australian Doctors' Fund, and by Prof P Morris.

In particular, I agree with Dr Bruce Shepherd's New Definition of Medical Practice (Point 3, Australian Doctors' Fund Response): "Medical practice means any role in which qualified medical practitioners use their professional discretion within the limits of their knowledge, training, and skill as medical practitioners for the direct or indirect benefit of patients."

With respect to Prof Morris' Point 5: 'medical check by a general practitioner for registrants over the age of 80 years', I suggest that consideration might be given to a lower age limit (eg 70 years, as occurs in South Australia, with annual assessment of Fitness to hold a Driving Licence from 70 years of age).

I agree with Prof Morris that to deny senior active doctors the exercise of discretion, and use of limited prescribing and referral, is suggestive of age discrimination. It is at odds with the current government policy of retention of older workers in the workforce. Doctors exercise discretion at all times during their medical careers, as it is always of critical importance to understand professional limitations. Naturally this would be expected to continue into the phase of senior active registration.

The loss of a reserve of senior active doctors carries with it the potential loss to the community of a valuable resource and waste of medical skill. These assets have formerly been used in ways outlined by Prof Morris (Point 3). Such a register of senior active practitioners would also be invaluable at a time of national emergency.

I have personal knowledge of a number of medical colleagues who have retired fully (with the establishment of AHPRA), no longer able to continue to contribute, as a result of the unintended consequences of AHPRA's imposed uniform definition of practice. In the event of the adoption of a new definition of medical practice, it is to be hoped that such practitioners may be able to be restored to a register of senior active doctors, provided they are able to meet requirements, given the short period of time unregistered.

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