



**New Zealand Orthopaedic Association**

Level 12, Ranchhod Tower | 39 The Terrace, Wellington 6011

PO Box 5545, Wellington 6140

**Phone:** 04 913 9891 | **Fax:** 04 913 9890

[www.nzoa.org.nz](http://www.nzoa.org.nz)

7 July 2022

Dr Curtis Walker  
Chair  
Medical Council of New Zealand  
P O Box 10509  
The Terrace  
WELLINGTON 6143  
[chair@mcnz.org.nz](mailto:chair@mcnz.org.nz)

Joan Simeon  
Chief Executive  
Medical Council of New Zealand  
P O Box 10509  
The Terrace  
WELLINGTON 6143  
[jsimeon@mcnz.org.nz](mailto:jsimeon@mcnz.org.nz)

Dear Curtis and Joan

**Notification of New Zealand Institute of Independent Radiologists (NZIIR) Concerns**

We refer to our email of 5 November 2021, where we provided you with our response to the Ethical Referrals in Clinical Radiology Consultation Draft 2021 (attached).

We now write to express concerns about current corporate financial manoeuvrings by New Zealand Institute of Independent Radiologists (NZIIR) parading as complaints of unethical and unprofessional behaviour by identified orthopaedic surgeons.

There are a number of orthopaedic surgeons who have passive shareholdings in companies or joint ventures with radiologists to provide high tech imaging (principally MRI scanning). Many of these surgeons have received notifications of NZIIR concerns from MCNZ, and are requested to formally respond.

Since a number of private radiology providers have been purchased by Infratil, the radiologists have had very large payouts for their shareholdings, but these are contingent on the maintenance of service volumes.

Our understanding is that all the radiology ventures that involve surgeons do not involve any incentive or kick back on the basis of numbers of referrals. In our view, these complaints are commercial manoeuvres to try and protect historical monopolistic practices dressed up as professional malpractice.

While we acknowledge you probably need to follow “due process” when you receive complaints; it is utterly unacceptable for doctors who have no valid complaint against them to have limitations placed on their practice while you investigate the complaint (such as the supervision of Interns and SIMGs).

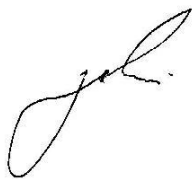
We emphasise the comments made in our response to The Royal Australian New Zealand College of Radiologists (RANZCR); that to cease all forms of self-referrals in medical practice is impossible as numerous specialities use radiological based investigations and treatment where they self-refer. This includes but is not limited to:

1. Cardiologists – ECHO and Cardiac Angiography.
2. Dentist and Maxillofacial surgeons with X-ray and coned beam CT scan.
3. O & G – using ultrasound for assessment and procedures including Fertility treatment and neonatal diagnosis, Amniocentesis etc.
4. Vascular surgery – Ultrasound monitoring and Ultrasound guided vein surgery.
5. Sports Physician, Musculoskeletal Physician, Rheumatologist, Pain Management and Orthopaedic use of ultrasound guided injections.
6. Ultrasound is also a modality that is now frequently used by multiple specialties in the public sector and is often a requirement for some non-radiological intervention and Specialty training – especially Vascular and General surgery.
7. Use of X-rays by Chiropractors.

Radiologists also frequently self-refer – many radiology reports recommend further imaging. This often results in additional imaging that is not necessary or onward referrals; further delaying patient management, time and costs when in many cases further imaging is not clinically required.

In our opinion, the Medical Council is at risk of having its processes manipulated for commercial gain by a group motivated by personal financial self interest and corporate greed. We would appreciate a prompt reply to this letter so that Council can be conversant with your views.

Yours sincerely

A handwritten signature in black ink, appearing to read 'John McKie', with a large loop at the end.

John McKie  
**President**

Cc: NZOA Presidential Line  
Andrea Pettett  
Peter Robertson