

Royal Flying Doctor Service The furthest corner. The finest care.

AirDoctor

THE OFFICIAL MAGAZINE OF THE ROYAL FLYING DOCTOR SERVICE



SOUTH AUSTRALIA & NORTHERN TERRITORY | ISSUE 279 | JANUARY 2025

From the Chair & Chief Executive >



Chair Chief Executive
FROM emergency retrievals to essential

FROM emergency retrievals to essential primary health care, the RFDS remains committed to supporting healthier and happier Australians, no matter where they live, work or play.

Over the last 12 months, we delivered more than 47,000 episodes of care to patients in South Australia and the Northern Territory – someone every 10 minutes.

Our aeromedical teams had their busiest year in recent times, airlifting more than 10,500 patients to safety.

In this edition, we're privileged to share stories from patients on the receiving end of this care – including a young Adelaide pilot who had a life-threatening anaphylaxis episode in the desert (page 4) and a father who faced a race against time from the Top End to reach life-saving surgery in Adelaide (page 8).

Working closely with our government and service delivery partners in South Australia and the Northern Territory, we continue to drive our health services into the future.

The RFDS has commenced 2025 under a new partnership with SA Health, significantly boosting inter-hospital transfer services and frontline staff.

The 10-year funding agreement bolsters our operational capacity, increasing RFDS operations

Cover: A remote NT airstrip prepared for an RFDS night landing (story page 12).

to four aircraft during the day and three overnight at our Adelaide Base, which will benefit regional patients airlifted between country and city hospitals in South Australia.

Accompanying our care in the air, we have hit the road in 2025 with a new all-terrain ambulance, designed to provide faster, more efficient care in hard-to-reach areas of the outback (page 6).

The vehicle will be stationed in the outback town of Andamooka, one of four permanent RFDS community health clinics in South Australia that continue to be a lifeline to local communities, surrounding pastoral stations and travellers.

With a proud 85-year history serving the Territory, we continue to search for new ways to increase our footprint from the Top End down, partnering with NT Health and in particular the Medical Retrieval and Consultation Centre (MRaCC) in Alice Springs, to ensure remote communities have access to high-quality health care.

Our new Low-Acuity Medical Retrieval Service in Darwin, continues to support the NT health system by airlifting remote patients between home and hospital, aiming to alleviate pressure on emergency services and hospital capacities.

We also recently appointed Vicki O'Halloran AO CVO, to Deputy Chair of our Board – a former Administrator of the NT and a proud Territorian who is passionate about the Flying Doctor and building upon the organisation's health service delivery.

As we carry out our work throughout the nation's central corridor, we continue to rely on generous ongoing support from our loyal corporate and community partners, bequestors, donors and supporters.

Over the last financial year, our community dug deeper than ever to raise a record \$18 million to help finance replacement aircraft, medical equipment and other major capital initiatives. One such fundraising activity was our national fitness and fundraising challenge, Oceans to Outback, which saw more than 2,500 participants in South Australia and the Northern Territory get active in October to generate more than \$660,000.

We couldn't do what we do without you – the individuals and groups – who continue to propel our life-saving service into the future.

Thank you. We look forward to flying further together in 2025.

Pet al Com Tong Vage

PETER DE CURE AM Chair

TONY VAUGHAN ASM Chief Executive

AirDoctor is the official magazine of the Royal Flying Doctor Service South Australia & Northern Territory.

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The RFDS acknowledges the Traditional Owners of Country throughout Australia and recognises their continuing connection to land, waters and community. We pay our respects to them and their cultures; and to Elders past, present and emerging.

Small patient, big complications >

MORE THAN a thousand kilometres stood between young mum Ratna Wilis and the hospital that could help her newborn son.

After exchanging the bustle of Indonesia for the Australian outback two years ago, Ratna met her now husband Nathan and began a new life surrounded by the vast red earth and endless skies of Alice Springs.

The young couple welcomed their first son, Muhammad, in 2024 – a tiny bundle of joy they hoped would bring light into their life.

But instead of the sleepless nights that new parents often expected, Ratna and Nathan faced something much worse.

Muhammad was born prematurely at 31 weeks with a rare brain condition that became apparent immediately after his birth.

A series of tests at Alice Springs Hospital confirmed the diagnosis: hydrocephalus – an abnormal buildup of fluid deep within the brain, putting harmful pressure on the brain's tissues.

Muhammad needed urgent surgery, but it was a complicated case that could only be treated in Adelaide, more than a thousand kilometres away.

"Muhammad was born really early and so small. For me, the experience was scary – *really* scary for me," Ratna said.

"But as Mum, I tried to be strong for him."

It wasn't until Ratna's phone rang one afternoon that hope became reality – it was the Medical Retrieval and Consultation Centre (MRaCC) at Alice Springs Hospital informing Ratna that the Royal Flying Doctor Service could safely transport her son to Adelaide.

Just days later, Ratna found herself in the back of an RFDS PC-24 aeromedical jet with a flight nurse, who provided in-flight care and midwifery support.

The RFDS monitored Muhammad's vitals, giving reassurance that everything would be alright.

"Baby Muhammad needed a special neurosurgical procedure to have a shunt inserted. It needed to be done in a timely manner or it could have led to disability or further health issues," RFDS Flight Nurse Charlotte Sumskas said.

He was 1500 to 1600 grams. Logistically I had to think, 'How am I going to get this very small vulnerable baby all the way to Adelaide safely and Securely?' – Charlotte Sumskas

"It wasn't just landing in Adelaide and then waving goodbye – I escorted the road ambulance to the hospital for a bedside handover. It was about ensuring from the door of the discharging hospital to the receiving hospital that Muhammad, and mum, had the care they needed." At the time. Ratna had never heard of the Flying

At the time, Ratna had never heard of the Flying Doctor, let alone imagined needing to use an aircraft to reach medical care.



Growing up in Indonesia, the concept seemed like something out of a movie.

"When this baby was sent to Adelaide, we flew on a jet," Ratna said.

"I was like, 'Okay this is nice, it's really really nice.' It was a great experience for me. I knew this was really safe for him.

"The Flying Doctor is really doing a great thing. For helping people like us – like my boy."

Muhammad's surgery was delicate, but successful. Over the next few weeks, Muhammad made a full recovery with Ratna by his side and was able to return home to Alice Springs.

"Seeing them back here after all this time, I mean he just looks so big and chubby faced," Charlotte said.

"You can tell he's doing so well and is so loved - they're just a beautiful little family."

As Ratna continues her life in Alice Springs, her connection with her new country has deepened. The vast desert, the quiet town, and now the medical professionals who cared for her son... Australia has given her more than she could have ever expected.

"I can't imagine if the Flying Doctor didn't help. This is a gift for me – a *really* big gift," Ratna said.

For 24-hour emergency assistance, remember to dial 000.



Clockwise from top: Josh fully recovered and in good health; RFDS crew prepares Josh for his flight from William Creek; The RFDS William Creek Virtual Emergency Centre's telehealth unit.



Contractor

Desert dinner drama >

WHEN Josh Larven felt his lip start to swell at an outback pub, he had a sinking feeling of what was to come.

As a pilot and customer support officer with aviation software company, OzRunways, 23-year-old Josh's job takes him to many corners of the country.

His latest adventure in September took him to William Creek, 800km north of Adelaide, for the town's annual Outback Fly-In event.

"As part of the event, we were delivering a seminar on our Electronic Flight Bag product and how pilots can best use it," Josh said.

"We arrived late afternoon and got settled in, when we decided to head over to the pub to have dinner."

Josh was about halfway through his meal when something didn't feel right.

"I hadn't eaten anything all day and the first thing I saw was there was curry for dinner," he said.

"I started getting into it when I started to feel my lip swell. I thought, 'that's not normal', and so I had a chat to the staff and found out there were cashews in the curry.

As a child, Josh was diagnosed as anaphylactic to various foods, including cashew nuts – but had never experienced a serious episode.

As it'd been a long time since his allergies were front of mind, he didn't think to ask and wasn't carrying any medication with him.

"I felt like an idiot for not checking... I was exhausted, hungry and just wasn't thinking," he said.

"This was the first ever time I was experiencing anaphylaxis, and I was nearly a thousand kilometres from home."

Josh knew within minutes of exposure, his life was at risk. Anaphylaxis causes the immune system to release a flood of chemicals that can cause one to go into shock — blood pressure drops suddenly and the airways narrow, blocking breathing.

Fortunately for Josh, William Creek is home to a new RFDS Virtual Emergency Centre – accessible 24/7 in medical emergencies. The clinic houses innovative digital health technology, including a telehealth unit with video conferencing, diagnostic devices, and life-saving oxygen and medications that a layperson can give under simple instruction – immediately connecting patients with an RFDS doctor and treatment.

William Creek Hotel manager Taylor Stewart, and Jo Swinton, a retired paramedic who happened to be at the event, accompanied Josh to the clinic.

"It was really easy – like rocking up to someone's house and ringing the doorbell," Josh said.

"A doctor popped up on the screen via telehealth and they were extremely professional from the start. Even though they weren't physically in the room, the first thing they wanted to do was make me feel calm and relaxed, before getting straight into treating me."

At this stage, Josh's face had swollen up and he had broken out in hives from neck to toe. He was doing everything he could to avoid going into shock.

"My heart rate just kept spiking – it was sitting at about 130. I could feel myself getting light-headed and was close to falling unconscious," Josh said.

The whole time, I genuinely felt like I was being looked after as if I was in Adelaide at a hospital. It was extremely professional and it just felt normal. – Josh Larven

Under the guidance of RFDS Rural Generalist Dr Patrick Sprau, Jo assisted with treating Josh utilising the RFDS Medical Chest.

"Having telehealth connectivity and constant communication meant I had the best tools at my disposition to assess and support the patient right from the start," Dr Patrick said.

"This, combined with having two dedicated community members assist, one of them with medical skills, made monitoring Josh's vital signs and instructing on the administration of a life-saving adrenaline injection relatively straightforward, even from our Port Augusta Base more than 500km away. "While this stabilised Josh's condition for the time being, it was clear he needed to be evacuated to a hospital as soon as possible."

Dr Patrick Sprau joined an aeromedical team comprising a pilot and flight nurse in an RFDS PC-12 aircraft to retrieve Josh, handing over the telehealth consultation to a second on-call doctor, RFDS Rural Generalist Dr Susie Keynes.

"While Patrick flew to William Creek, I was able to continue monitoring Josh visually," Dr Susie said.

"When Josh's condition deteriorated again, as it can with anaphylaxis, I was able to respond immediately and direct a second adrenaline shot to be given. Without the telehealth system, I could not have perceived this as rapidly and a delayed response could've had dire consequences.

"Josh responded to the second shot within minutes, before Patrick and the team arrived to take him to hospital in a stable condition.

"Outback people are practical people and willing to help each other. In this case, their quick actions and ability to enter the clinic to begin the consult immediately was a life-saving action."

Josh described the episode as a "wake-up call" and said he would be lying if the worst possible outcome didn't cross his mind.

"If the RFDS didn't exist, I'd most likely not be alive right now," Josh said.

"It was such a full-on experience and the thought kept going through my head, 'What if the clinic wasn't there?'

"Every time I go out now, my partner and I lengthily check what's in our food. We know now how easily it can spiral out of control."

Fully recovered and back at work, as a young pilot Josh's focus is to build his flying hours and get more experience in the aviation industry.

"I'm just very grateful for the services they provide," Josh said.

"It's always been my dream to be in the front seat of an RFDS PC-12, flying people and being part of aeromedical services. Unfortunately, my first experience with the RFDS has been in the back of the aircraft – not where anyone wants to end up."



THE FLYING DOCTOR has hit the road in 2025 with a new all-terrain ambulance - the first of its kind in South Australia.

Engineered to navigate rough landscapes and conditions, the purpose-built vehicle helps the RFDS reach people swiftly and safely, providing enhanced care and greater comfort for patients and crews.

Equipped with the latest in satellite communication technology, the ambulance keeps crews in constant contact with RFDS doctors and emergency services, even in the most remote locations.

This real-time connectivity enables immediate doctor consultation, guiding on-the-spot treatment for the highest standard of care during transport.

"Your postcode shouldn't determine your access to quality health care," Remote Area Clinics Manager Melissa Allen said.

"Whether off the beaten track or across rough roads, this ambulance brings timely, life-saving care directly to patients, no matter the location

In medical emergencies, improved access, better treatment and slashed transport time can be the difference between life and death. – Melissa Allen 🕥

S268-DD2

Royal Flying Doctor Service

Combining the comfort and cargo capacity of a Toyota HiAce with the robust durability of a LandCruiser 200, the ambulance features a sturdy four-wheel-drive system and high ground clearance, ensuring it can handle the toughest conditions.

Inside, it's outfitted with modern medical equipment, including a powered automatic-lift stretcher, portable defibrillator, monitoring devices, a medical refrigerator and a 'grab and go' locker that ensures urgent first response and resuscitation gear is on hand in emergencies.

RFDS team members Melissa Allen and Nicola Medlycott with the new remote ambulance.

Initially stationed at the RFDS Community Health Clinic in Andamooka, which provides 24/7 on-call emergency medical support to the outback opal mining town and surrounding area, the ambulance will support approximately 150 patients every year.

Co-designed and custom-built by St John Ambulance NT, the \$300,000 vehicle was funded by a generous donation from RFDS donor Carole Stone.

"We've worked closely with St John NT, who have significant experience in emergency ambulance response in some of the country's most remote areas, to design a vehicle with the clinician and patient in mind." RFDS SA/NT Operations Manager Ambulance Services Nicola Medlycott said.

"Innovations such as this custom-designed vehicle, help bridge the critical gap in emergency services between remote communities and urban centres."

'Glenda' flying free >

DURING an emotional ceremony in October 2024, RFDS aircraft VH-FNH was dedicated in loving memory of the late Glenda Kidman.

The late Glenda and her husband John, who unveiled the dedication, were long-time benefactors to local organisations, caring for and empowering the less fortunate in the Limestone Coast community.

Prior to her passing two years ago, Glenda and John committed to continuing their support of the Royal Flying Doctor Service in a sincerely generous decision.

Together, they believed the Flying Doctor was vital for the health and wellbeing of not just their own rural community, but for all South Australians - no matter where they lived - city and the bush alike.

According to John, Glenda always loved travelling, particularly across Australia. In his words, "Whenever we would fly, Glenda felt free."

Glenda was also well known for her love of frogs, both living and ornamental. She would record their croaking at the back of the house and around the dams - playing the audio back to spark conversations and create a response.

Alongside the frogs, John and Glenda would often hear the distinctive sound of an RFDS aircraft overhead at their Penola farm.

Glenda's motto was lots of little things make big things happen – we couldn't think of anything more important than to do what we are doing for the RFDS. – John Kidman 🕥

Operating between the RFDS's Port Augusta and Adelaide Bases, over the past three years, aircraft VH-FNH has served regional, rural and remote South Australians by flying 1.7 million kilometres and airlifting more than 3,700 patients.

Moving forward, the aircraft will continue its life-saving work bearing Glenda's name and accompanying frog totem under its cockpit window.

'Glenda' will continue to fly free, airlifting and supporting the care of more than two patients a day for the next decade.







ert and Katerina with their life-saving crew – Dr \

Robert's life-saving journey from the clinic in

Borroloola to the operating table in Adelaide

aeromedical services in remote Australia.

play in remote communities.

survive an aortic dissection.

highlights the critical importance of emergency

His survival story has made him a passionate

advocate for the RFDS and the essential role they

"When I spoke to the nurse back in Borroloola, who

was only the third person she knew in her career to

has worked in cardiology for years, she told me l

"With Dr Yasmin and Flight Nurse Chris, I knew

that everything was under control. I knew everything

was being done to keep me alive with the utmost

professionalism and commitment with a special

"You kind of go, 'This is incredible - I can't believe it."

Scan to

watch the

aircraft to help get me there on time.



A risk of rupture and a race against time >

FOR Robert Wendl and his wife Katerina. life in the remote NT community of Borroloola 1,000km southeast of Darwin, offers peace, solitude and a deep sense of purpose.

But isolation also means medical emergencies can guickly become life-or-death situations, as Robert discovered one morning in July 2024.

"I was woken up by this incredible pain. I couldn't breathe or at least that's how it felt," Robert said.

"I tried to convince myself I was fine, but Katerina insisted on taking me to the local Borroloola clinic.

"They took x-rays and tests and it became clear that something was serious. I was taken to Royal Darwin Hospital and was told I needed another urgent flight. That's when they rang the Royal Flying Doctor Service."

Robert was suffering an aortic dissection - a rare and often deadly condition that occurs when there is a tear in the wall of the aorta (the body's main artery), compromising blood flow from the heart to vital organs.

In a race against time, Robert now needed life-saving surgery - and the closest city with the specialist team and facilities available to respond to Robert's condition was Adelaide – almost 3,000 kilometres away.

The RFDS PC-24 aeromedical jet, a high-speed aircraft, was the fastest way to get Robert to Adelaide. With the aircraft flying at a high altitude of 45,000 feet to expedite care, managing his blood Medical Centre. pressure and heart rate was a delicate task.

RFDS Critical Care Doctor Dr Yasmin Endlich knew just how high the stakes were.

"When I hear 'aortic dissection', the main thing that comes to mind is that the risk of dying increases every minute," she said.

"Flying at altitude, with the pressure changes and speed of the aircraft, presents unique challenges. If the heart pumps fast and hard, then the risk of the aorta rupturing and the patient dying on the spot is extremely high.

The key was to keep Robert's systolic blood pressure at exactly 100 – no more, no less – which required two infusions and constant monitoring to keep him stable.'

RFDS Flight Nurse Chris Green accompanied Dr Yasmin, assisting with the difficult task of adjusting Robert's medications during the four-hour flight.

"Blood pressure and heart rate fluctuate with altitude changes - on take-off, a person's blood pressure drops and then it spikes on landing," Chris said.

"We had to carefully adjust Robert's medications to keep him at life-sustaining levels all the way to

Despite the pain and uncertainty. Robert was incredibly calm during the flight. With the care we were able to provide and the speed of the jet, he had a fighting live and work here. Working alongside Traditional chance. – Chris Green 🕥

Following the tense flight, Robert arrived in Adelaide and was rushed straight into surgery at Flinders

A larger-than-life character, Robert had tried to make light of the whole situation to this point. But minutes from his open-heart surgery, he was finally overcome with emotion.

"At first, I was kind of resolved. I was telling myself, 'If I don't make it, I had a good life'," Robert said.

"But then, the surgeon asked me a question that still gets me emotional today. He asked me if I had spoken to my wife and my son. That really hit me. "All I could tell them was that I was in good hands."

Robert's surgery lasted 10 hours, but it was ultimately successful.

Waking up to Katerina by my side was the most emotional moment of my life," Robert said.

"My son also flew back from Europe to Australia to e with me and that meant the world.

"At first, it took me half an hour to walk a kilometre t was extremely strenuous to do anything. But that also helped in my recovery – just being there with my family."

Following weeks of recovery in Adelaide and Darwin, Robert returned to Borroloola, where he has continued his work leading the Mabunji Aboriginal Resource Indigenous Corporation.

The organisation provides essential services to the local community, from aged care to childcare, and is the largest employer in the region.

During his ordeal, Robert felt immense support from the Borroloola community.

"For three years, we've been extremely fortunate to Owners in very remote Australia has provided a completely different perspective of what impact we can make in life." Robert said.

"When I was in hospital and being airlifted, the people here were singing for me, praying for me.

"When I survived this thing, you know, people asked me, 'Are you done?'

"Without a second thought, I said, 'I'm not going anywhere,' I love it here, and I'm proud to call it



Robert's journey >

Robert is taken to Royal Darwin Hospital and is diagnosed with aortic dissection - an often fata condition - requiring life-saving surgery in Adelaide

Robert is emergency airlifted by the RFDS under the care of Dr Yasmin Endlich, Flight Nurse Chris Green and Pilot Danny Nakov in an RFDS PC-24 aeromedical jet to expedite his emergency treatment

During the flight, and particularly on take-off and landing, the team carefully monitor and adjust Robert's medications to protect his fragile heart from altitude changes.

Robert is safely transported to Flinders Medical Centre where he undergoes a successful 10-hour surgery.

I knew everything was being done to keep me alive... you kind of go, 'This is incredible – I can't believe it.' – Robert ᇬ PC-24 aeromedical jet 2.636km 4-hour flight



As time ticked by, Robert had a tight window to travel across the country for life-saving surgery.

An outback nightmare >

WITH blood splayed across the white tiles of her bathroom, Liana 'Lil' Bryant's family and friends arrived to what looked like a scene from a horror movie.

Agriculture runs in the blood of 29-year-old Lil, who since a young girl has lived and worked on remote stations in outback Australia.

Alongside her partner Sam, the couple manage Mount Doreen Station in the NT, one of Australia's largest organic cattle stations spanning over 730,000 hectares, 400km northwest of Alice Springs.

Living remotely, the Flying Doctor has been a constant for Lil and her family for as long as she can remember, with almost every member of her family, young and old, having had an emergency flight at some point throughout their life.

But most recently, it was Lil who needed the Flying Doctor when she was fighting for her life just 48 hours after having her second child, Poppy.

"I woke up in the middle of the night to feed Poppy and, as I sat up in bed, I felt a lot of liquid and realised pretty quickly it was blood," Lil said.

"Sam was trying to keep me calm because I went into shock – I started shaking.

"I rushed to the bathroom – we have white tiles and it looked like a scene from a horror movie. It was horrific for me, but more horrific for Sam and our staff members. It was definitely touch and go."

Lil was experiencing a secondary postpartum haemorrhage, an unpredictable pregnancy complication that causes excessive bleeding after childbirth and can occur up to 12 weeks after having a baby.

With help at least four hours' drive away via rough dirt roads and highways in pitch darkness, Lil's only lifeline was to call the RFDS and the Medical Retrieval and Consultation Centre (MRaCC) in Alice Springs.

Lil had already lost half a litre of blood.

"I spoke to a doctor on the phone and she gave Sam and me pretty clear advice of what to do and that she was coordinating an RFDS retrieval team as soon as possible," Lil said.

The RFDS team prepared for dispatch with fluid pumps, syringe drivers, medical monitor devices,

medications and a ventilator in case of Lil's collapse, as well as blood from Alice Springs Hospital as a precaution.

"We also had our staff members Terri, her husband Tim and our nanny Bec assisting us and helping with the kids while we waited for RFDS to arrive," Lil said.

"It was all hands on deck – whether it's working in the yards or an emergency, everyone jumps in to help without a second thought."

Meanwhile, the team at Mount Doreen prepared the station's dirt airstrip for a night landing, following the RFDS's official airstrip procedure and old-fashioned outback improvisation.

"It was very traumatic at the time. There was so much blood, and a lot of uncertainty with it all," Sam said.

It was not only making sure Lil was alright but making sure the airstrip was going to be lit enough so the plane could land safely. – Sam Smith 🕥

"We keep it regularly graded, rolled and maintained for this exact scenario. We had toilet rolls soaked in diesel, placed them in increments and lit them up.

"Thankfully, it created a pretty good airstrip – the RFDS pilot said they could see it from 20 miles out."

The next challenge was moving a barely conscious Lil, who was continuing to lose blood, five kilometres from the homestead to the airstrip, safely.

"We had to be innovative – using our office chair like a wheelchair to get me to the car," Lil said.

"The doctor told us to keep pressure on my uterus to stop the bleeding, so Terri was crammed between our two baby seats in the back, leaning across the front seat trying to do that for me."

Lil and the team were met by an RFDS pilot, flight nurse and an MRaCC doctor, who immediately stretchered Lil to get her into the aircraft, so they could begin treatment out of the desert cold.

"I could see the panic and fear on Sam's face – so when the plane landed I saw the weight lift off his shoulders knowing that help was here," Lil said. "I just grabbed him and said, 'There's a doctor and a midwife here that can take over. You can be a partner – you don't have to try and save my life now.'" The back of the RFDS PC-12 aircraft was a scene of controlled chaos with Lil on the stretcher and the doctor, nurse and Sam (carrying baby Poppy) occupying the only three seats.

The RFDS team administered fluids and medication via cannula, including tranexamic acid, which works by blocking the breakdown of blood clots to prevent bleeding, to ensure Lil was stable for the flight.

As the homemade flares began burning out, time was of the essence to get in the air. As soon as she was stable, Lil, alongside Sam and Poppy, were safely airlifted to Alice Springs Hospital.

"It would've been a long drive into town – it was in the middle of the night, there would've been roos on the road and the chances of puncturing a tyre was high," Sam said.

"Knowing that someone is on the other end of a phone call, a flight away, to get that critical health care if and when it's needed. That's pretty remarkable."

Following initial treatment and preliminary tests, Lil required further examination and treatment in Adelaide and was again airlifted with a medical crew on the RFDS PC-24 aeromedical jet.

It was confirmed she had a rare case of secondary postpartum haemorrhage, due to a collapsed uterine wall, remaining in Adelaide for several weeks to recover before returning home to Mount Doreen Station.

Lil has now enjoyed a stable couple of months at home and is cherishing life as a healthy young family, while she manages day-to-day station operations with Sam.

"If the RFDS didn't exist, my kids probably wouldn't have their mum, which is a really scary thought."











P**r.-**94

Sky scramble >

Can you find our top 20 landing locations in SA/NT? Ceduna Coober Pedy Kadina Kingscote Maitland Maningrida Marla Mount Gambier Naracoorte Olympic Dam Oodnadatta Port Lincoln Port Pirie Renmark Tennant Creek Uluru Whyalla Yalata Yorketown Yuendumu



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Oceans to Outback >

Throughout October, people across the country again answered the call to walk, run and ride to raise vital funds for the Flying Doctor.





participants \$4.4 million

1.5 million km logged

SA/NT Leaderboard

Teams

Mount Gambier Hospital HDU	\$17,341
RFDS SA/NT Staff	\$12,743
Moonta SAAS	\$7,613
Tennant Creek Run Squad	\$7,496
Mount Gambier Hospital ED	\$7,320

Individuals

mannada	
Henry Treloar	\$6,703
Shane Thompson	\$6,606
Nathan Mitchell	\$4,494
Bray Dunlop	\$4,093
Annie Pollard	\$3,459

A 'hole' lot of funds >

A RECORD-BREAKING year saw the RFDS Port Lincoln Auxiliary raise more than \$200,000 for the Flying Doctor through a range of community engagements and activities in the Eyre Peninsula.

The Auxiliary's iconic Flying Donut van sold more than 38,000 donuts, on top of members' efforts through sausage sizzles, events and silent auctions.

The fundraising tally was also boosted by a very generous \$61,000 donation from Southern Eyre Trailers, who auctioned off a trailer dolly for the benefit of the RFDS.



A Clare affair >

MORE THAN 300 guests gathered at the Clare Valley Aerodrome for the inaugural RFDS Clare Support Group Ball to dine and dance the night away.

The event coincided with the Clare Support Group's 70th anniversary, a history almost as long as the Flying Doctor itself.

With more than \$26,000 raised on the night, thanks to all those who gave generously to help keep the Flying Doctor flying.





Good tidings >

THANK YOU to our South Australian donors and volunteers who joined us for a special morning tea in the lead-up to Christmas.

Longtime RFDS volunteer Russell Duncan OAM and major donor Bill Williams were invited on stage to talk about their ongoing support, before the crowd was treated with carols and tunes from the City of Adelaide Concert Band – a performance courtesy of a generous donation from an anonymous RFDS supporter.



Thanks a million >

FOR the first time our 24 rural and regional volunteer support groups and auxiliaries raised more than \$1 million in a financial year.

From barbecues to black tie balls, dedicated RFDS volunteers give up their time, often weekends, to come up with so many ways to help keep the Flying Doctor flying. Thank you for your outstanding efforts.

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