Independent Health Advice Panel
Second Face-to-Face Meeting Minutes

Date: Monday 9 September 2019
Time: 13:00 to 16:15
Location: Ground Floor, 5 Constitution Avenue Canberra ACT 2600

Participants:

Independent Health Advice Panel:
- Dr Antonio Di Dio, Australian Medical Association, IHAP Chair
- Professor Brendan Murphy, Australian Government Chief Medical Officer (Commonwealth Chief Medical Officer), Department of Health
- Dr Parbodh Gogna, Chief Medical Officer of the Department of Home Affairs and Surgeon-General of the Australian Border Force
- Associate Professor Susan Moloney, Royal Australasian College of Physicians
- Associate Professor Neeraj Gill, Royal Australian and New Zealand College of Psychiatrists
- Mr Guy Coffey, Australian Psychological Society
- Associate Professor Michael Douglas, Australian College of Rural and Remote Medicine

Department of Home Affairs:
- [Redacted] Director, Regional Processing Taskforce (RPTF)
- [Redacted] Acting Director, IHAP Secretariat
- [Redacted] IHAP Secretariat

Acknowledgement of Country:
Dr Di Dio, IHAP Chair

Apologies:
Nil
Independent Health Advice Panel
Second Face-to-Face Meeting Agenda

Date: Monday 9 September 2019
Time: 13:00 to 16:15 (AEDT)
Location: Ground Floor, 5 Constitution Avenue Canberra ACT 2600
Note that the room is available for the Panel’s use all day.

<table>
<thead>
<tr>
<th>Agenda Item</th>
<th>Time</th>
<th>Lead</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Welcome to IHAP and Minutes of 6 June 2019 meeting</td>
<td>13:00</td>
<td>Chair</td>
</tr>
<tr>
<td>Departmental representations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Update on health services available in Nauru and PNG and relationship with host countries</td>
<td>13:15</td>
<td>Regional Processing Taskforce</td>
</tr>
<tr>
<td>IHAP business</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Reporting – 30 September 2019 Quarterly Report</td>
<td>14:00</td>
<td>Chair/Panel</td>
</tr>
<tr>
<td>4 Other Business</td>
<td></td>
<td>Panel</td>
</tr>
<tr>
<td>a) Document Library</td>
<td></td>
<td></td>
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<tr>
<td>b) IHAP Outcomes Tracker</td>
<td></td>
<td></td>
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<tr>
<td>c) PNG and Nauru visit status</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Closing remarks</td>
<td>16:00</td>
<td>Chair</td>
</tr>
</tbody>
</table>

Following the meeting, at 16:30, there will be a security briefing for Panel and Secretariat members travelling to PNG in October 2019.
Item 1: The Chair opened the meeting and welcomed Independent Health Advice Panel (IHAP) members, noting the three new members, and departmental officers. The minutes of the previous IHAP meeting held 12 June 2019 were accepted as a true record.

The Panel made use of the meeting to request and exchange information with the Secretariat regarding:

- the relevant legislation
- the outcomes of the Federal Court case regarding the term “remote treatment”
- the repeal process going through the parliamentary process.

Item 2: Director, Regional Processing Taskforce, joined the meeting at 13:30 to provide a briefing on the current and future processes for transferees as well as details of relationships, facilities and services available in both PNG and Nauru. She gave a detailed overview for the benefit of the three new Panel members and an update for all participants.

Director, Regional Processing Taskforce, provided information regarding the changes that have occurred recently with the transfer of people from Manus Island to the Bomana Immigration Centre Port Moresby and an overview of the circumstances of the remaining eight. She said that there should be no one left on Manus Island by the time the Panel travelled to PNG in October 2019.

Following a very detailed description of the various facilities available in PNG, including the ongoing support provided to those in the community, she undertook to provide the Panel members with a full breakdown of numbers for the various cohorts, including location and pathways, as well as maps and descriptions of the types of accommodation. An update of the statistics would be provided again in early October, prior to the Panel’s travel to PNG.

Action: RPTF and Secretariat

Items 3 and 4a: The participants were provided with a copy of the template for the 30 September 2019 report and the Secretariat explained how the Panel’s requests for information will be routinely submitted as a formal Notice under s199D of the Act to be complied with ten days following the end of each reporting period.

The Panel requested that the current Notice be amended to include daily patient logs from IHMS and statistics for Nauru (as is provided for PIH).

Action: Secretariat

Item 4b: The Panel requested that the Outcomes Tracker be amended to reflect only current cases and agreed that a sub-committee be formed on rotation to review outcomes in more detail. Mr Coffey and A/P Moloney agreed to take this role for the first three months.

Action: Panel

Item 4c: The Secretariat informed that PNG government approval was still pending, however all plans were confirmed. The Department’s PNG Program Management Branch were liaising with PNG officials regarding the required permission. The Panel requested the following meetings, arrangements and information for their visit:
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- What access is available to follow-up facilities and what is the reach of PIH post discharge or whether it depends on the patient to seek this support;
- Summary of mental health capacity at PIH;
- Meetings with services providers, including JDA, and PIH senior medical staff.

Panel discussed the need to travel to Nauru later in the year and agreed that A/P Gill or Mr Coffey should travel with A/P Douglas or Dr Di Dio.

**Concerns** raised by the Panel over the course of the meeting included:

Panel members were asked to provide the IHAP Secretariat with any leave plans.

**Next meetings**
The next face-to-face meeting will be held at 13:00 hrs on Monday 2 December 2019 in Canberra. The date for the next meeting to be held early February 2020 will need to be decided.
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Independent Health Advice Panel
Third Face-to-Face Meeting Minutes

Date: Monday 2 December 2019
Time: 13:20 to 16:15
Location: History Room, Ground Floor, 5 Constitution Avenue Canberra ACT 2600

Participants:
Independent Health Advice Panel:
- Dr Antonio Di Dio, Australian Medical Association, IHAP Chair
- Professor Brendan Murphy, Australian Government Chief Medical Officer (Commonwealth Chief Medical Officer), Department of Health
- Dr Parbodh Gogna, Chief Medical Officer of the Department of Home Affairs and Surgeon-General of the Australian Border Force
- Associate Professor Susan Moloney, Royal Australasian College of Physicians
- Associate Professor Neeraj Gill, Royal Australian and New Zealand College of Psychiatrists
- Mr Guy Coffey, Australian Psychological Society
- Associate Professor Michael Douglas, Australian College of Rural and Remote Medicine

Department of Home Affairs:
- Director, PNG Program Management
- Director, Nauru Program Management
- Acting Director, IHAP Secretariat (outgoing)
- Director, IHAP Secretariat (incoming)
- IHAP Secretariat

Acknowledgement of Country:
- Dr Di Dio, IHAP Chair

Apologies:
- Mr Stephen Hayward, First Assistant Secretary, Health Services Division, Department of Home Affairs
- Mr Anton Bockwinkel, Assistant Secretary, Migration and Citizenship Law, Department of Home Affairs
- Director, Regional Processing Taskforce, Department of Home Affairs

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Independent Health Advice Panel

Fourth Face-to-Face Meeting Agenda

Date: Monday 2 December 2019
Time: 13:20 to 16:15 (AEDT)
Location: History Room, Ground Floor, 5 Constitution Avenue Canberra ACT 2600

Note that the room is available for the Panel’s use all day.

<table>
<thead>
<tr>
<th>Agenda Item</th>
<th>Time</th>
<th>Lead</th>
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<tbody>
<tr>
<td>Welcome to IHAP and update on Medevac Bill</td>
<td>13:00</td>
<td>Chair and FAS CEG HS</td>
</tr>
<tr>
<td><strong>Departmental representations</strong></td>
<td></td>
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</tr>
<tr>
<td>2 Update on health services available in Nauru and</td>
<td>13:15</td>
<td>Regional Processing T/F</td>
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<tr>
<td>PNG and relationship with host countries</td>
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<td>Plus briefing by Legal Division</td>
<td></td>
<td>Legal Division</td>
</tr>
<tr>
<td><strong>IHAP business</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Reporting – 31 December 2019 Quarterly Report</td>
<td>14:00</td>
<td>Chair/Panel</td>
</tr>
<tr>
<td>4 Other Business</td>
<td></td>
<td>Panel</td>
</tr>
<tr>
<td>a) Document Library</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) IHAP Outcomes Tracker</td>
<td></td>
<td></td>
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<tr>
<td>c) Nauru visit status</td>
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<tr>
<td>d) Dates for the next two meetings (first week of March and June 2020)</td>
<td></td>
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<tr>
<td>5 Closing remarks</td>
<td>16:00</td>
<td>Chair</td>
</tr>
</tbody>
</table>
Item 1: The Chair opened the meeting and welcomed the Independent Health Advice Panel (IHAP) members and departmental officers. He thanked all in advance for their time. The Minutes of the previous IHAP meeting held Monday 9 September 2019 were accepted as a true and accurate record.

In lieu of FAS CEG providing an update on the Medevac Bill, (PNG Program Management) and (Nauru Program Management) advised that the legislation would be debated in Parliament during this sitting period and a vote taken to determine the future of the IHAP legislation.

Item 2: noted:

- The biggest change in circumstance for transitory persons in Papua New Guinea (PNG) is the completion of the contract with Paladin. Paladin completed services on 30 November 2019. As such, the security and garrison type services which have typically been available to them have now ceased. noted that transitory persons had been made aware prior to the contract ceasing and provided with alternatives for essential services such as transport (e.g. taxi vouchers for transport to medical services etc).

- The population of transitory persons on PNG continues to decrease as refugees find long term settlement arrangements such as resettlement in the United States or alternative third country options (for example UNHCR settlement). Of those transitory persons who have not been assessed as refugees, there are only a small number who are on the pathway to return to their country of origin.

- noted:

- The Department’s biggest service providers in Nauru, IHMS (medical services) and Canstruct (Garrison services), have extended their contracts to June 2020.

- The Panel discussed a number of items related to health services in these processing countries:

  - The panel requested an update regarding the progress of the mental health outreach programme in Port Moresby.
  - The Panel asked whether interpreter availability at Pacific International Hospital (PIH). The Department advised that transitory persons had access to the Telephone Interpreter Service (TIS).
  - The Panel asked whether the PIH employed mental health nurses.
  - The Panel requested that the Department ensure that treating doctor reports are provided to psychiatrists or other doctors at PIH.
The Panel discussed the benefit of having access to the welfare provider reports in Port Moresby and requested access to similar services in Nauru. The Department noted that the welfare provider in Nauru, Eigigu Solutions Corporation (ESC), is contracted directly by the Government of Nauru. However, the Department is able to submit these types of requests on behalf of the Panel.

The briefing by the Legal Division was postponed due to unavailability of key staff. It was agreed that the Panel would consolidate its questions and submit them to Legal Services in writing for their consideration. The Panel requested a separate meeting (via teleconference) with Legal Services.

Item 3: The Panel discussed the GovTEAMs Document Library.

Item 4a: The Panel discussed the Outcomes Tracker and agreed to review the cases that continue to be monitored by the Department.

Item 4c: The Panel noted the previous advice from the Department who noted that the Panel and Department could recommence liaison with the Government of Nauru regarding an appropriate travel period in early 2020 for the Panel’s site visit.

Item 4d: The Panel agreed that the next face to face meetings will be held:

- Tuesday 10 March 2020; and
- Monday 1 June 2020.
Independent Health Advice Panel

Clinical Assessment

Meeting details

<table>
<thead>
<tr>
<th>IHAP referral date/time:</th>
<th>04/07/2019</th>
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<tbody>
<tr>
<td></td>
<td>Time: 1040 hrs</td>
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</table>

<table>
<thead>
<tr>
<th>IHAP Meeting date:</th>
<th>05/07/2019</th>
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</thead>
<tbody>
<tr>
<td>Treating Doctor’s referral attached:</td>
<td>Yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Reconvened IHAP meeting (if required):</th>
<th>N/A</th>
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</thead>
<tbody>
<tr>
<td>Was the Referring Doctor’s clinical assessment performed remotely or in person?</td>
<td>Remotely</td>
</tr>
<tr>
<td>Health Service Provider clinical summary received:</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

IHAP findings:

Following IHAP document review, has been diagnosed with:

<table>
<thead>
<tr>
<th>s47F</th>
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</table>
The IHAP Panel accepted. The Panel also accepted IHAP determined.

IHAP has accepted that IHAP noted that.

The members also noted that the MOC reviewed case and did not recommend transfer to Australia for treatment. The IHAP agreed with the MOC opinion and noted that transfer to Australia is not necessary at this stage.

The Panel expressed concern about the delays between independent assessments of the patient and the reports being referred to the IHAP.

The Panel noted that there was quite a delay from the treating doctors in preparing their reports (following their initial review) and submitting for Minister review. The Panel considers this to be particularly concerning considering their reports stated a transfer to Australia was urgent.

**IHAP recommendations**

The three IHAP members present agreed that their recommendation is that transfer to Australia for medical treatment be refused. This recommendation is based on the following reasons:

The Panel agreed that their recommendation that not be transferred to Australia is based on the above factors.

**Actions:**

1. The IHAP be notified via the Outcomes Tracker in GovTEAMS when is transferred to POM.
## Independent Health Advice Panel

### Document library reviewed:
(list documents considered)

1. ABF Client brief – 2 pages
2. MOC Opinion – 2 pages
3. Letter from [X]
4. Treating Drs referral – 9 pages
   a. [X]
   b. [X]
5. Medical Records – 159 pages
6. Health Discharge Summary – 6 pages

### Panel members assessing:

- Professor Brendan Murphy
- Dr Antonio Di Dio (Chair)
- Associate Professor Susan Moloney

### IHAP Majority recommendation:

<table>
<thead>
<tr>
<th>Is the Minister’s refusal confirmed:</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Majority (out of total members):</td>
<td>3/3</td>
</tr>
<tr>
<td>Transfer is recommended:</td>
<td>No</td>
</tr>
</tbody>
</table>

**Date of IHAP recommendation:** 05/07/2019

**Time of IHAP recommendation:** 18:36

**Deemed approval (post 72 hours)?**

- No

**Meeting audio recorded:**

- No
### Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>IHAP referral date/time:</strong></td>
<td>12/07/2019  16:43 hrs</td>
</tr>
<tr>
<td><strong>IHAP Meeting date:</strong></td>
<td>13/17/2019  1500 hrs</td>
</tr>
<tr>
<td><strong>Reconvened IHAP meeting (if required):</strong></td>
<td>N/A</td>
</tr>
</tbody>
</table>

- **Treating Doctor's referral received:** Yes
- **Was the Referring Doctor’s clinical assessment performed remotely or in person?:** Remotely
- **Health Service Provider clinical summary received:** Yes

#### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

#### IHAP findings:

**Initial meeting:** Saturday 13 July 2019 at 1500 hrs attended by 6 IHAP Panel members.

Secretariat attending: s22(1)(a)(ii) and Stephen Hayward, Dept. of Home Affairs

has been referred to the Independent Health Advice Panel by the Minister for clinical assessment following a notification having been received from two physicians that he is a relevant transitory person.

Following IHAP document review has been diagnosed with:

---

This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.

**Sensitive**
The Panel agreed with the diagnoses outlined by the treating doctors following review of the clinical records supplied by the health care providers in PNG and the report by the Medical Officer of the Commonwealth (MOC).

The Panel agreed that

The Panel noted that

The Panel agreed that

The Panel agreed that

The Panel noted that there was a significant unexplained delay from the treating doctors in preparing their reports (following their initial review) and submitting for Minister review. The Panel considers this to be particularly concerning considering their reports stated a transfer to Australia was urgent. The panel makes no criticism of any person or agency, as there are no doubt significant logistical challenges involved in this area, however, would appreciate further information about where and how the delays occur, in order to provide the best possible service to all concerned.

IHAP recommendations

All six IHAP members present agreed that their recommendation is that *transfer to Australia for medical treatment be refused*. This recommendation is based on the following reasons:

The Panel agreed that their recommendation that *not be transferred to Australia* is based on the above factors.
### Actions:

1. 
2. 
3. The Panel be notified via the Outcomes Tracker in GovTEAMS when [s47F] is transferred to PIH POM.

### Document library reviewed:

- **ABF Client brief** – 2 pages
- Clinical Advisory Team (MOC) Opinion dated 05/07/2019 – 2 pages
- Letter from [s47F], 2 pages
- Treating Drs referral – 10 pages
  - a. 
  - b. 
- Clinical Records

### Panel members assessing:

- Dr Antonio Di Dio (Chair)
- Professor Brendan Murphy
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Mr Guy Coffey
- Associate Professor Michael Douglas

### IHAP Majority recommendation:

- Is the Minister's refusal confirmed: Yes
- **Majority** (out of total members): 6/6
- Transfer is recommended: No
- Date of IHAP recommendation: 14/07/2019
- Time of IHAP recommendation: 07:51 hrs
- Deemed approval (post 72 hours)? No
- Meeting audio recorded: No
### Independent Health Advice Panel

#### Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
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</thead>
</table>
| **IHAP referral date/time:** | 12/08/2019  
Time: 1235 hrs | 12/08/2019  
Time: 1235 hrs |
| **IHAP Meeting date:** | 13/08/2019 1700hrs | Treating Doctor’s referral received? | Yes |
| **Reconvened IHAP meeting (if required):** | N/A | **Was the Referring Doctor’s clinical assessment performed remotely or in person?** | Remotely |
| **Health Service Provider clinical summary received:** | Yes |

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Tuesday 13 August 2019 at 17:00 attended by 7 IHAP Panel members.

**Secretariat attending:** [22(1)(a)(ii)](s47F)

[22(1)(a)(ii)](s47F) has been referred to the Independent Health Advice Panel by the Minister for clinical assessment following a notification having been received from two physicians that [s47F] is a relevant transitory person.

Following IHAP document review [s47F] has been diagnosed with:

This document may contain ‘personal identifiers’ and ‘personal information’ as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.
The Panel agreed with the diagnoses outlined by the treating doctors following review of the clinical records supplied by the health care providers and the report by the Medical Officer of the Commonwealth (MOC).

The Panel noted the disparity between the medical records provided to the IHAP versus the medical records referenced in the treating doctors’ referrals.

The Panel agreed that Dr Parbodh Gogna’s name was listed in the patient’s notes on the chest x-ray and blood screening results taken when the patient first arrived on Christmas Island. Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All seven IHAP members present agreed that their recommendation is that transfer to Australia for medical treatment be **refused**. This recommendation is based on the following reasons:
**Actions:**

1.  
2.  
3.  

**Document library reviewed:** ABF Client brief – 2 pages  
1. Clinical Advisory Team (MOC) Opinion dated 07.08.2019 – 2 pages  
2. Letter from [Redacted] – 5 pages  
3. Treating Drs referral – 13 pages   
   a.  
   b.  
4. Clinical Records  

**Panel members assessing:**  
Dr Antonio Di Dio (Chair)  
Dr Parbodh Gogna  
Professor Brendan Murphy  
Associate Professor Susan Moloney  
Dr Neeraj Gill  
Dr Michael Douglas  
Mr Guy Coffey

**IHAP Majority recommendation:**  
Is the Minister’s refusal confirmed:  
Yes  
Majority (out of total members): 7/7  
Transfer is recommended: No  
Date of IHAP recommendation: 14/08/2019  
Time of IHAP recommendation: 20:49 hrs  
Deemed approval (post 72 hours)? No  
Meeting audio recorded: No
### Independent Health Advice Panel

#### Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
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</thead>
<tbody>
<tr>
<td><strong>IHAP referral date/time:</strong></td>
<td>04/09/2019 16:26 hrs</td>
</tr>
<tr>
<td><strong>IHAP Meeting date:</strong></td>
<td>06/09/2019 19:00 hrs</td>
</tr>
<tr>
<td><strong>Reconvened IHAP meeting (if required):</strong></td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Treating Doctor’s referral received?</strong></td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Was the Referring Doctor’s clinical assessment performed remotely or in person?</strong></td>
<td>Remotely</td>
</tr>
<tr>
<td><strong>Health Service Provider clinical summary received:</strong></td>
<td>Yes</td>
</tr>
</tbody>
</table>

**Interview with Transitory Person**

☑ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

Initial meeting: Friday 6 September 2019 at 19:00 hrs attended by five IHAP Panel members with two apologies.

Secretariat attending: [22(1)(a)(ii)] and [22(1)(a)(ii)]

[47F  has been referred to the Independent Health Advice Panel by the Minister for clinical assessment following a notification having been received from two physicians that [47] is a relevant transitory person.

Following IHAP document review [47F  has been diagnosed with:
The Panel agreed with the possible diagnoses outlined by the treating doctors following review of the clinical records supplied by the health care providers in PNG and the report by the Medical Officer of the Commonwealth (MOC).

The Panel noted that

The Panel also noted that

The Panel also discussed

The members further noted that

It was noted that

, the Panel agreed that

The members also noted that

The Panel considered that
The Panel agree that

IHAP recommendations

All five IHAP members agreed that their recommendation is that transfer to Australia for medical treatment be refused. This recommendation is based on the following reasons:

The Panel agreed that their recommendation that not be transferred to Australia is based on the above factors

Actions:

1. 

2. The Panel be notified, via the Outcomes tracker, when has been transferred to
**Document library reviewed:**  ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 27.08.2019 – 2 pages
2. Letter from – 2 pages
3. Treating Drs referral – 20 pages
   a. 
   b. 
4. Clinical Records

**Panel members assessing:**
- Dr Antonio Di Dio (Chair)
- Associate Professor Susan Moloney
- Dr Michael Douglas
- Mr Guy Coffey
- Dr Neeraj Gill

**IHAP Majority recommendation:**
- **Is the Minister’s refusal confirmed:** Yes
- **Majority (out of total members):** 5/5
- **Transfer is recommended:** No
- **Date of IHAP recommendation:** 07/09/2019
- **Time of IHAP recommendation:** 15:45 hrs
- **Deemed approval (post 72 hours)?** No
- **Meeting audio recorded:** No
**Sensitive: Personal**

Independent Health Advice Panel

**Clinical Assessment**

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<tr>
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<tbody>
<tr>
<td><strong>IHAP referral date/time:</strong></td>
<td>05/09/2019 16:45 hrs</td>
</tr>
<tr>
<td><strong>IHAP Meeting date:</strong></td>
<td>06/09/2019 19:00 hrs</td>
</tr>
<tr>
<td><strong>Reconvened IHAP meeting (if required):</strong></td>
<td>N/A</td>
</tr>
</tbody>
</table>

**Treating Doctor’s referral received?**

**Yes**

**Was the Referring Doctor’s clinical assessment performed remotely or in person?**

**Remotely**

**Health Service Provider clinical summary received:**

**Yes**

**Interview with Transitory Person**

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

Initial meeting: Friday 6 September 2019 at 19:00 hrs attended by five IHAP Panel members with two apologies.

Secretariat attending: §22(1)(a)(ii)

§47F has been referred to the Independent Health Advice Panel by the Minister for clinical assessment following a notification having been received from two physicians that §47 is a relevant transitory person.

Following IHAP document review §47F has been diagnosed with:
The Panel agreed with the diagnoses outlined by the treating doctors following review of the clinical records supplied by the health care providers in PNG and the report by the Medical Officer of the Commonwealth (MOC).

The Panel members noted that... It was also noted...

The Panel noted that...

All members agreed that...

It was noted by the Panel that...

The Panel members agreed that...

The Panel agrees that...

**IHAP recommendations**

All five IHAP members agreed that their recommendation is that transfer to Australia for medical treatment be **refused**. However, the Panel recommends:

The Panel agreed that their recommendation that not be transferred to Australia is based on the above factors.
## Actions:

1. [Sensitive]
2.  
3. The Panel be notified, via the Outcomes tracker, when [Sensitive] has been transferred to [Sensitive].

## Document library reviewed:

- ABF Client brief – 3 pages
  - Clinical Advisory Team (MOC) Opinion dated 09/09/2019 – 3 pages
  - Letter from [Sensitive] dated 22/08/2019 – 2 pages
  - Treating Drs referral
    - a.  
    - b.  
  - Clinical Records

### Panel members assessing:

- Dr Antonio Di Dio (Chair)
- Associate Professor Susan Moloney
- Dr Michael Douglas
- Mr Guy Coffey
- Dr Neeraj Gill

### IHAP Majority recommendation:

- Is the Minister's refusal confirmed: Yes
- Majority (out of total members): 5/5
- Transfer is recommended: No

<table>
<thead>
<tr>
<th>Date of IHAP recommendation:</th>
<th>7/09/2019</th>
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<tr>
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# Independent Health Advice Panel

## Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
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### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Attended by: Dr Antonio Di Dio, Professor Paul Kelly, A/Prof Sue Moloney, A/Prof Neeraj Gill, A/Prof Michael Douglas, Mr Guy Coffey. Dr Gogna provided his input following the meeting.

Secretariat attending: $47F$ and $47F$.

Following IHAP document review $47F$ has been diagnosed with: $47F$.

---

This document may contain ‘personal identifiers’ and ‘personal information’ as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.

---

Sensitive: Personal
The Panel noted

The Panel shared concern that

The Panel were concerned that

They were also concerned

The Panel found

The Panel noted that,

The Panel notes

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

IHAP recommendations

All six members present recommended that be approved transferred to Australia for treatment.

The Panel agreed that

. The Panel considered that th

Actions:

1. 

2. The Panel be informed once transfer has occurred.
**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 30.08.2019 – 2 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral – 12 pages
   a. 
   b. 
4. Clinical Records

---

### Panel members assessing:
- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Professor Paul Kelly
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Dr Michael Douglas
- Mr Guy Coffey

### IHAP Majority recommendation:
- **Is the Minister’s refusal confirmed:** No
- **Majority (out of total members):** 7/7
- **Transfer is recommended:** Yes

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**Sensitive: Personal**

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FOI reference: FA 20/02/01088

**Released by Department of Home Affairs under the Freedom of Information Act 1982**
Independent Health Advice Panel

Clinical Assessment

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<td>IHAP Meeting date:</td>
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</table>

Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

IHAP findings:

Initial meeting: Attended by four panel members.

Secretariat attending: \[s22(1)(g)(ii)]\ has been referred to the Independent Health Advice Panel by the Minister for clinical assessment following a notification having been received from two physicians that \[s47F\] is a relevant transitory person.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as Dr Gogna was not the treating doctor on Christmas Island, allowed Dr Gogna to continue in the discussion.

Following IHAP document review \[s47F\] has been diagnosed with:

This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.
The Panel agreed with the diagnoses outlined by the treating doctors following review of the clinical records supplied by the health care providers in PNG and the report by the Medical Officer of the Commonwealth (MOC).

The members noted...

The Panel agreed that...

The Panel notes that...

It is noted that...

The Panel noted that...

The Panel note...

The Panel expressed strong concerns with the particularly long delay in the treating doctors conducting their interviews and completing and submitting their reports.

IHAP recommendations

All four IHAP members agreed that their recommendation is that transfer to Australia for medical treatment be refused. However, the Panel recommends:

- 

Actions:

Nil
**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 10.09.2019 – 1 page
2. Letter from advocate – 5 pages
3. Treating Drs referral – 9 pages
   a. 
   b. 
4. Clinical Records
5. 

**Panel members assessing:**
- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Associate Professor Susan Moloney
- Dr Michael Douglas

**IHAP Majority recommendation:**

<table>
<thead>
<tr>
<th>Is the Minister’s refusal confirmed?</th>
<th>Yes</th>
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</thead>
<tbody>
<tr>
<td>Majority (out of total members):</td>
<td>4/4</td>
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<tr>
<td>Transfer is recommended:</td>
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**Date of IHAP recommendation:** 16/09/2019

**Time of IHAP recommendation:** 16:30 hrs

**Deemed approval (post 72 hours)?** No

**Meeting audio recorded:** No
### Independent Health Advice Panel

#### Clinical Assessment

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</table>

#### Interview with Transitory Person

- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

#### IHAP findings:

**Initial meeting:** Attended by: Dr Antonio Di Dio, A/Prof Sue Moloney, A/Prof Neeraj Gill, A/Prof Michael Douglas, Dr Parbodh Gogna.

Secretariat attending: and Following IHAP document review has been diagnosed with:

This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.
The Panel considered the two treating doctor reports. The Panel expressed concerns that...

The Panel recommended...

The Panel requested confirmation that...

The Panel notes a large volume of cases being referred to the Minister and then to IHAP; this creates some difficulty getting the complete panel to review the case and may need to be addressed by the Secretariat to ensure compliance with the relevant legislation.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

The Panel recommended that request to transfer to Australia for medical treatment be **refused**.

The Panel recommended that...
Actions:

1. The Panel request confirmation that

2. The Panel expressed concern about the length of time taken for a case to be fully documented and referred to the IHAP. This case had extensive delays between the treating doctors initial interview and final report, as well as lengthy delay between the Department receiving notification and the Panel receiving a request to review. This has been raised repeatedly. The Chair will write to the [REDACTED] to discuss.

Document library reviewed:

ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 10.09.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral – 22 pages
   a. [REDACTED]
   b. [REDACTED]
4. Clinical Records – 220 pages
5. [REDACTED]

Panel members assessing:

Dr Antonio Di Dio (Chair)
Dr Parbodh Gogna
Associate Professor Susan Moloney
Associate Professor Neeraj Gill
Dr Michael Douglas

IHAP Majority recommendation:

Is the Minister’s refusal confirmed: Yes

Majority (out of total members): 5/7

Transfer is recommended: No

Date of IHAP recommendation: 14/09/2019

Time of IHAP recommendation: 0930hrs

Deemed approval (post 72 hours)? No

Meeting audio recorded: No

Sensitive: Personal
# Independent Health Advice Panel

## Clinical Assessment

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<th>Meeting details</th>
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<td><strong>IHAP Meeting date:</strong> 16/09/2019 07:30hrs</td>
<td><strong>Treating Doctor’s referral received?</strong> Yes</td>
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<td><strong>Reconvened IHAP meeting (if required):</strong> N/A</td>
<td><strong>Was the Referring Doctor’s clinical assessment performed remotely or in person?</strong> Remotely</td>
</tr>
<tr>
<td></td>
<td><strong>Health Service Provider clinical summary received:</strong> Yes</td>
</tr>
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</table>

### Interview with Transitory Person

- [ ] The IHAP undertook an interview.
- [ ] The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Attended by four panel members.

Secretariat attending: [s22(1)(b)(i)(II)]

[has been referred to the Independent Health Advice Panel by the Minister for clinical assessment following a notification having been received from two physicians that [s47F] is a relevant transitory person.](FOI_Document#11)

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and, as Dr Gogna was not the treating doctor on Christmas Island, allowed Dr Gogna to continue in the discussion.

Following IHAP document review [s47F] has been diagnosed with:
The Panel agreed with the diagnoses outlined by the treating doctors following review of the clinical records supplied by the health care providers in PNG and the report by the Medical Officer of the Commonwealth (MOC).

The Panel notes

The Panel agreed that

**IHAP recommendations**

All four IHAP members agreed that their recommendation is that transfer to Australia for medical treatment be **refused**. The Panel notes that concerns have been addressed prior to the Minister and IHAP receiving the referral. The Panel recommends:

**Actions:**

Nil

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 10.09.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral – 8 pages
   a. 
   b. 
4. Clinical Records
5. 

**Panel members assessing:**

Dr Antonio Di Dio (Chair)
Dr Parbodh Gogna
Associate Professor Susan Moloney
Dr Michael Douglas

**IHAP Majority recommendation:**

Is the Minister’s refusal confirmed: Yes

**Sensitive: Personal**
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<tr>
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<td>Meeting audio recorded:</td>
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# Independent Health Advice Panel

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<tr>
<td>16/09/2019 1900hrs</td>
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### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Attended by: Dr Antonio Di Dio, Associate Professor Sue Moloney, Mr Guy Coffey, Associate Professor Neeraj Gill, Professor Paul Kelly, Dr Parbodh Gogna

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

---

This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.
The Panel reviewed the treating doctors’ reports and noted that

The Panel note that the Minister’s letter has been omitted from this paperwork and request that the Secretariat confirm the Minister’s refusal.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All six members agreed that request for transfer to Australia for medical treatment should be refused.

The Panel noted that, and agreed that requires:

- 

- 

- 

The Panel agreed that

**Actions:**

- Secretariat to provide Minister’s letter.
Document library reviewed: ABF Client brief – 2 pages
1. Clinical Advisory Team (MOC) Opinion dated 10.09.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral – 8 pages
   a. 
   b. 
4. Clinical Records
5. Offshore HSP response to Section 198E notification – 2 pages

Panel members assessing:
Dr Antonio Di Dio (Chair)
Dr Parbodh Gogna
Dr Paul Kelly
Associate Professor Susan Moloney
Associate Professor Neeraj Gill
Mr Guy Coffey

IHAP Majority recommendation:
Is the Minister’s refusal confirmed: Yes
Majority (out of total members): 6/7
Transfer is recommended: No
Date of IHAP recommendation: 16/09/2019
Time of IHAP recommendation: 2201hrs
Deemed approval (post 72 hours)? No
Meeting audio recorded: No
### Independent Health Advice Panel

### Clinical Assessment

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<tr>
<td><strong>Health Service Provider clinical summary received:</strong></td>
<td>Yes</td>
</tr>
</tbody>
</table>

#### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

#### IHAP findings:

**Initial meeting:** Attended by: Dr Antonio Di Dio, Associate Professor Sue Moloney, Mr Guy Coffey, Associate Professor Neeraj Gill, Professor Paul Kelly, Dr Parbodh Gogna

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.
The Panel reviewed the treating doctors’ reports and noted. The Panel noted that. The Panel noted that. The Panel were concerned. The Panel discussed. The Panel expressed concern that. The Panel note that. The Panel request:

- Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

The IHAP recommended that request for transfer to Australia for medical treatment be refused in the first instance. Noting this, the Panel request regular (at least weekly) updates.
**Actions:**

- ABF Client brief – 3 pages
- Clinical Advisory Team (MOC) Opinion dated 09.09.2019 – 1 page
- Letter from advocate – 6 pages
- Treating Drs referral – 30 pages
  - a.
  - b.
- Clinical Records
- Offshore HSP Response – 2 pages

**Document library reviewed:**

<table>
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<th>Document</th>
<th>Pages</th>
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<tbody>
<tr>
<td>ABF Client brief</td>
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<tr>
<td>Clinical Advisory Team (MOC) Opinion</td>
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<td>Clinical Records</td>
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<td>Offshore HSP Response</td>
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**Panel members assessing:**

- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Professor Paul Kelly
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Mr Guy Coffey

**IHAP Majority recommendation:**

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
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<tbody>
<tr>
<td>Is the Minister’s refusal confirmed?</td>
<td>Yes</td>
</tr>
<tr>
<td>Majority (out of total members)</td>
<td>6/7</td>
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<tr>
<td>Transfer is recommended?</td>
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<td>Deemed approval (post 72 hours)?</td>
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<td>Meeting audio recorded?</td>
<td>No</td>
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<td>Treating Doctor’s referral received?</td>
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<tr>
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### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Attended by: Dr Antonio Di Dio, Associate Professor Sue Moloney, Mr Guy Coffey, Associate Professor Neeraj Gill, Professor Paul Kelly, Dr Parbodh Gogna

Secretariat attending: s22(1)(d)(i)

Following IHAP document review s47F has been diagnosed with:

This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.
The Panel reviewed the treating doctors’ reports and note that... The Panel note... The Panel noted that... The Panel note...

The Panel noted... The Panel request review... The Panel noted that... Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.
IHAP recommendations

All six members of the IHAP Panel agreed that request for transfer to Australia for medical treatment should be refused in the first instance.

The Panel request an update in two weeks.

Actions:

- Request for update in two weeks.

Document library reviewed:

1. Clinical Advisory Team (MOC) Opinion dated 10.09.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral – 14 pages
   a. 
   b. 
4. Clinical Records
5. OFFSHORE HSP RESPONSE TO SECTION 198E NOTIFICATION – 2 pages

Panel members assessing:

Dr Antonio Di Dio (Chair)
Dr Parbodh Gogna
Dr Paul Kelly
Associate Professor Susan Moloney
Associate Professor Neeraj Gill
Mr Guy Coffey
### IHAP Majority recommendation:

<table>
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<td>6/7</td>
</tr>
<tr>
<td>Transfer is recommended?</td>
<td>No</td>
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#### Date of IHAP recommendation:
- Date: 16/09/2019

#### Time of IHAP recommendation:
- Time: 1001hrs

#### Deemed approval (post 72 hours)?
- Deemed: No

#### Meeting audio recorded?
- Recorded: No
## Independent Health Advice Panel

### Clinical Assessment

<table>
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<tr>
<td>17/09/2019</td>
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<tr>
<td>Time: 15:00 hrs</td>
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<td><strong>IHAP Meeting date:</strong></td>
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<tr>
<td>19/09/2019</td>
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</tr>
<tr>
<td>Time: 19:00 hrs</td>
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<tr>
<td>N/A</td>
<td>Was the Referring Doctor’s clinical assessment performed remotely or in person? Remotely</td>
</tr>
<tr>
<td></td>
<td>Health Service Provider clinical summary received: Yes</td>
</tr>
</tbody>
</table>

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

Following IHAP document review has been diagnosed with:
The Panel reviewed and noted The Panel discussed The Panel noted The Panel noted The Panel agreed that

With this in mind, the Panel recommended that request for transfer to Australia for medical treatment be refused at this time.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

IHAP recommendations

All six IHAP members present recommended that request for transfer to Australia for medical treatment be refused at this time.

Actions:

The Panel discussed the level of services that were available in Port Moresby and requested an update regarding service delivery (noting the sudden increase in resident numbers as transitory persons previously residing in Manus have been transferred to Port Moresby, and thus wishing to ensure that there were enough services available for the increase numbers of residents).
**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 12.09.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral – 14 pages
   a. 
   b. 
4. Clinical Records

**Panel members assessing:**
- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Professor Paul Kelly
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Mr Guy Coffey

**IHAP Majority recommendation:**
- **Is the Minister’s refusal confirmed:** Yes
- **Majority (out of total members):** 6/7
- **Transfer is recommended:** No

**Date of IHAP recommendation:** 20/09/2019
**Time of IHAP recommendation:** 05:50

**Deemed approval (post 72 hours)?**
- **No**

**Meeting audio recorded:** No
## Independent Health Advice Panel

### Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>IHAP referral date/time:</strong></td>
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<th>Treating Doctor’s referral received?</th>
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<th>Was the Referring Doctor’s clinical assessment performed remotely or in person?</th>
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<tbody>
<tr>
<td>N/A</td>
<td>Remotely</td>
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<table>
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<tr>
<th>Health Service Provider clinical summary received:</th>
<th>Yes</th>
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</table>

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- **Initial meeting:** Attended by: 
  - Secretariat attending:

  Following IHAP document review has been diagnosed with: 

- [s47F]

---

This document may contain ‘personal identifiers’ and ‘personal information’ as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.
The Panel discussed the treating doctors' reports and noted the lengthy delay between the interview and the initial report (written five weeks after interview).

The Panel agreed that...

With this in mind, the Panel recommended that the request for transfer to Australia for medical treatment be approved.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All six IHAP members present at this meeting agreed that request for transfer to Australia for medical treatment should be approved.
### Actions:

The Panel requested they be informed via the Secretariat as soon as plans have been confirmed for transfer to Australia.

### Document library reviewed:

**ABF Client brief – 3 pages**

1. **Clinical Advisory Team (MOC) Opinion dated 12.09.2019** – 1 pages
2. **Letter from** – 2 pages
3. **Treating Drs referral** – 13 pages
   - a.
   - b.
4. **Clinical Records**

### Panel members assessing:

- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Professor Paul Kelly
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Mr Guy Coffey

### IHAP Majority recommendation:

<table>
<thead>
<tr>
<th>Is the Minister's refusal confirmed:</th>
<th>No</th>
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</thead>
<tbody>
<tr>
<td>Majority (out of total members):</td>
<td>6/7</td>
</tr>
<tr>
<td>Transfer is recommended:</td>
<td>Yes</td>
</tr>
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</table>

**Date of IHAP recommendation:** 20/09/2019  
**Time of IHAP recommendation:** 05:50

**Deemed approval (post 72 hours)?** No  
**Meeting audio recorded:** No
## Clinical Assessment

### Meeting details

| IHAP referral date/time: | 17/09/2019  
Time: 1500 hrs |
|------------------------|-----------------
| IHAP Meeting date:     | 19/09/2019 1900hrs |
| Reconstituted IHAP meeting (if required): | N/A |

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### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Attended by: Dr Antonio Di Dio, Professor Paul Kelly, Dr Parbodh Gogna, Associate Professor Sue Moloney, Associate Professor Neeraj Gill, Mr Guy Coffey

**Secretariat attending:**

**Following IHAP document review** has been diagnosed with:

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This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.
The Panel considered the treating doctors’ reports and the MOC opinion. It was noted that the refusal documentation from the Minister was not in the GovTeams folder of the documents provided and will be obtained by the Secretariat. The panel also notes The Panel noted that

The Panel discussed and noted:

- 

- 

The Panel noted that.

The Panel note the wholesale movement of transferees from Manus Island to Port Moresby may require an adjustment period, and the panel will write to the Secretary clarifying the model of medical care being provided to refugees and non-refugees.

The Panel agreed that

With this in mind, the Panel agreed that request for transfer to Australia should be refused

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.
IHAP recommendations

Four of the six members in attendance at the meeting agreed that request for transfer to Australia should be **refused**.

**Actions:**

- The IHAP request weekly updates.
- A letter be written to the Secretary:-
  1. Clarifying the model of medical care being provided to refugees and non-refugees in Port Moresby.
  2. Noting that the Treating Doctors reports are being provided in advance of IHAP review, evidenced by the reports by the Health Service Provider (HSP) in the GovTeams case folders. IHAP would ask that secretary provide governance that the HSP attempts to engage with individuals to stratify/manage medical needs highlighted by the treating doctors.

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 12/09/2019 – 1 page
2. Letter from advocate – 2 pages
3. – Offshore HSP Response – 2 pages
4. Treating Drs referral – 14 pages
   a. 
   b. 
5. Clinical Records

**Panel members assessing:**

Dr Antonio Di Dio (Chair)
Dr Parbodh Gogna
<table>
<thead>
<tr>
<th>IHAP Majority recommendation:</th>
<th>Is the Minister’s refusal confirmed:</th>
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<tbody>
<tr>
<td></td>
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<td>4/7</td>
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<td>20/09/2019</td>
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# Independent Health Advice Panel

## Clinical Assessment

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<tr>
<th>Meeting details</th>
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| **IHAP referral date/time:** | 19/09/2019  
Time: 1100 hrs |
| **IHAP Meeting date:** | 20/09/2019 1730 hrs |
| **Reconvened IHAP meeting (if required):** | N/A |
| **Health Service Provider clinical summary received:** | Yes |

### Interview with Transitory Person

- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☐ The IHAP undertook an interview.

### IHAP findings:

**Initial meeting:** Friday, 20 September 2019 at 1730 hrs

Attended by: Dr Antonio Di Dio, Dr Susan Moloney, Dr Parbodh Gogna, A/Prof. Paul Kelly, A/Prof, Michael Douglas, Mr Guy Coffey

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

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Sensitive: Personal
The Panel agreed that

The Panel noted that

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

IHAP recommendations

All 6 members of the IHAP Panel agreed that their recommendation was that be refused transfer to Australia. This recommendation is based on the following factors:

The Panel agreed that their recommendation to refuse transfer to Australia was based on the above factors.

Actions:

Released by Department of Home Affairs under the Freedom of Information Act 1982
**Document library reviewed:** ABF Client brief – 2 pages

2. Letter from [s47F] – 2 pages
3. [s47F] - Offshore HSP Response – 2 pages
4. Treating Drs referral – 13 pages
   a. [s47F]
   b. [s47F]
5. Clinical Records [s47F]

**Panel members assessing:**
- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Professor Brendan Murphy
- Associate Professor Susan Moloney (Case Lead)
- Dr Michael Douglas
- Mr Guy Coffey

**IHAP Majority recommendation:**

<table>
<thead>
<tr>
<th>Is the Minister’s refusal confirmed:</th>
<th>Yes</th>
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<tbody>
<tr>
<td>Majority (out of total members):</td>
<td>6/6</td>
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<tr>
<td>Transfer is recommended:</td>
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**Date of IHAP recommendation:** 21/09/2019

**Time of IHAP recommendation:** 1138hrs

**Deemed approval (post 72 hours)?** No

**Meeting audio recorded:** No
# Independent Health Advice Panel

## Clinical Assessment

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| IHAP referral date/time: | 19/09/2019  
Time: 1100 hrs |
| IHAP Meeting date: | 20/09/2019 1730 hrs |
| Reconvened IHAP meeting (if required): | N/A |
| Treating Doctor’s referral received? | Yes |
| Was the Referring Doctor’s clinical assessment performed remotely or in person? | Remotely |
| Health Service Provider clinical summary received: | Yes |

### Interview with Transitory Person

- [ ] The IHAP undertook an interview.
- [ ] The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Friday, 20 September 2019 at 17:30 hrs

Attended by: Dr Antonio Di Dio, Dr Parbodh Gogna, Dr Susan Moloney, A/Prof. Paul Kelly, A/Prof. Michael Douglas, Mr Guy Coffey

Secretariat attending: [Section 22(1)(a)(ii)]

Following IHAP document review [Section 47F](#) has been diagnosed with:

---

This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.
The Panel considered the treating doctors’ reports and the MOC opinion. The panel notes  

The Panel discusses and noted:

- 
- 

The Panel noted that however the Panel agreed that . The Panel agreed that .

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All five of six Panel members present agreed that their recommendation was to approve transfer to Australia. This recommendation is based on the below factors:

Based on the above factors, the Panel agrees that should be transferred to Australia.
### Actions:

1. [REDACTED]
   - be transferred to Australia for treatment. The Panel be notified through the Outcomes Tracker once [REDACTED] has been transferred to Australia for treatment.

2. [REDACTED]

3. [REDACTED]

### Document library reviewed:

- **ABF Client brief** – 2 pages
  - Clinical Advisory Team (MOC) Opinion dated 16.09.2019 – 1 page
  - Letter from [REDACTED] – 2 pages
  - [REDACTED] - Offshore HSP Response – 2 pages
  - Treating Drs referral – 13 pages
    - a. [REDACTED]
    - b. [REDACTED]
  - Clinical Records

### Panel members assessing:

- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna (Case Lead)
- Professor Brendan Murphy
- Associate Professor Susan Moloney
- Dr Michael Douglas
- Mr Guy Coffey

### IHAP Majority recommendation:

- **Is the Minister’s refusal confirmed:** No
- **Majority (out of total members):** 5/6
- **Transfer is recommended:** Yes

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## Independent Health Advice Panel

### Clinical Assessment

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<td>Remotely</td>
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<td><strong>Health Service Provider clinical summary received:</strong></td>
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### Interview with Transitory Person

- □ The IHAP undertook an interview.
- □ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Monday, 23 September 2019 at 1730 hrs

Attended by: Dr Antonio Di Dio, Dr Parbodh Gogna, Dr Susan Moloney, Dr Neeraj Gill, A/Prof. Paul Kelly, A/Prof. Michael Douglas

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:
The Panel considered the treating doctors’ reports and the MOC opinion. The Panel noted that. The Panel agreed that. The Panel raised concern that. The panel raised concerns that. The Panel agreed that. The Panel agreed that. The Panel noted that. The Panel noted that. The Panel noted that. The Panel noted that. The Panel agreed that. Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

Four of the six IHAP Panel members agreed that their recommendation was to **approve** transfer to Australia for treatment. This recommendation was based on the following factors:

The Panel agreed that their recommendation is based on the above reasons.
Actions:
1. [Redacted] be transferred to Australia.
2. [Redacted]
3. [Redacted]

Document library reviewed: ABF Client brief – 2 pages
2. Letter from [Redacted] – 2 pages
3. [Redacted] - Offshore HSP Response – 2 pages
4. Treating Drs referral – 13 pages
   a. [Redacted]
   b. [Redacted]
5. Clinical Records

Panel members assessing:
- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna (Case Lead)
- Associate Professor Paul Kelly
- Dr Susan Moloney
- Dr Neeraj Gill
- Associate Professor Michael Douglas

IHAP Majority recommendation:
Is the Minister’s refusal confirmed: No
Majority (out of total members): 4/6
Transfer is recommended: Yes

Date of IHAP recommendation: 24/09/2019
Time of IHAP recommendation: 0849 hrs
Deemed approval (post 72 hours)? No
Meeting audio recorded: No
### Meeting details

| IHAP referral date/time: | 21/09/2019  
| Time: 16:50 hrs |

### Biodata details

| IHAP Meeting date: | 23/09/2019 17:30hrs  
| Treating Doctor’s referral received? | Yes |

| Reconstituted IHAP meeting (if required): | N/A  
| Was the Referring Doctor’s clinical assessment performed remotely or in person? | Remotely |

| Health Service Provider clinical summary received: | Yes |

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do so due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Monday, 23 September 2019 at 1730 hrs

Attended by: Dr Antonio Di Dio, Dr Parbodh Gogna, Dr Susan Moloney, Dr Neeraj Gill, A/Prof. Paul Kelly, A/Prof. Michael Douglas

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

The Panel considered the treating doctors’ reports and the MOC opinion s47F.
The Panel noted that. The Panel noted that.
The Panel also noted that. The Panel raised concern.
The Panel raised concern that.
The Panel raised concern about.
The Panel were concerned.
The Panel agreed that.
The Panel agreed that.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

Four of the six IHAP Panel members agreed that their recommendation was to approve the transfer of to Australia for treatment. The Panel members agreed that their recommendation was based on the below factors:

The Panel agreed that their recommendation was based on the above reasons.

**Actions:**

1. be transferred to Australia.
2. 
3. The Panel be notified through the Outcomes Tracker once has been transferred to Australia.
4. 
Document library reviewed: ABF Client brief – 2 pages
1. Clinical Advisory Team (MOC) Opinion dated 12.09.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral – 11 pages
   a. 
   b. 

Clinical Records – 335 pages

e. Offshore HSP Response to S198E

Panel members assessing:
Dr Antonio Di Dio (Chair)
Dr Parbodh Gogna
Associate Professor Paul Kelly (Case Lead)
Dr Susan Moloney
Dr Neeraj Gill
Associate Professor Michael Douglas

IHAP Majority recommendation:
Is the Minister’s refusal confirmed: No
Majority (out of total members): 4/6
Transfer is recommended: Yes

Date of IHAP recommendation: 24/09/2019
Time of IHAP recommendation: 0849 hrs
Deemed approval (post 72 hours)? No
Meeting audio recorded: No
### Clinical Assessment

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<tr>
<td>Interview with Transitory Person</td>
<td>☑ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.</td>
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</tbody>
</table>

#### IHAP findings:

**Initial meeting:** Monday, 23 September 2019 at 1730 hrs
Attended by: Dr Antonio Di Dio, Dr Parbodh Gogna, Dr Susan Moloney, Dr Neeraj Gill, A/Prof. Paul Kelly, A/Prof. Michael Douglas

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with: s47F

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The Panel considered the treating doctors’ reports and the MOC opinion and noted:

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All six IHAP Panel members agreed that their recommendation is to refuse transfer to Australia for treatment. The Panel agreed that their recommendation is based on the following factors:

The Panel agree that their recommendation is based on the above reasons.

**Actions:**

1. 

Sensitive: Personal
### Document library reviewed:

2. Letter from [redacted] – 2 pages
3. Treating Drs referral – 13 pages
   a. [redacted]
   b. [redacted]
4. Clinical Records
   [redacted]

### Panel members assessing:

- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Associate Professor Paul Kelly
- Dr Susan Moloney
- Dr Neeraj Gill
- Associate Professor Michael Douglas (Case Lead)

### IHAP Majority recommendation:

- **Is the Minister’s refusal confirmed:** Yes
- **Majority (out of total members):** 6/6
- **Transfer is recommended:** No

<table>
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**Independent Health Advice Panel**

**Clinical Assessment**

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</tbody>
</table>

| Treating Doctor’s referral received? | Yes |
| Was the Referring Doctor’s clinical assessment performed remotely or in person? | Remotely |
| Health Service Provider clinical summary received: | Yes |

**Interview with Transitory Person**

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

**Initial meeting:** Monday, 23 September 2019 at 1730 hrs

Attended by: Dr Antonio Di Dio, Dr Parbodh Gogna, Dr Susan Moloney, Dr Neeraj Gill, A/Prof. Paul Kelly, A/Prof. Michael Douglas

Secretariat attending: §22(1)(a)(i)

Following IHAP document review §47F has been diagnosed with: §47F

---

*This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.*
The Panel considered the treating doctors’ reports and the MOC opinion in relation to the case.
The Panel discussed the case. The Panel noted that the treating doctors’ reports were comprehensive and thorough.
The Panel noted that the MOC opinion was consistent with the treating doctors’ reports.
The Panel agreed that the case was complex and required careful consideration.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All six IHAP Panel members agreed that their recommendation is to refuse transfer to Australia for treatment. The Panel agreed that they based their recommendation on the following reasons:

- The case is complex and requires careful consideration.
- The treating doctors’ reports and the MOC opinion support the refusal.
- The potential conflict of interest was managed appropriately.

The Panel agreed that their recommendation is based on the above factors.

**Actions:**

1. [Redacted]
Document library reviewed: ABF Client brief – 3 pages

2. Letter from – 2 pages
3. Treating Drs referral – 13 pages
   a.
   b.
4. Clinical Records

Panel members assessing:
Dr Antonio Di Dio (Chair)
Dr Parbodh Gogna
Associate Professor Paul Kelly
Dr Susan Moloney
Dr Neeraj Gill
Associate Professor Michael Douglas

IHAP Majority recommendation:

<table>
<thead>
<tr>
<th>Is the Minister’s refusal confirmed:</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Majority (out of total members):</td>
<td>6/6</td>
</tr>
<tr>
<td>Transfer is recommended:</td>
<td>No</td>
</tr>
</tbody>
</table>

Date of IHAP recommendation: 24/09/2019

Time of IHAP recommendation: 0849 hrs

Deemed approval (post 72 hours)? No

Meeting audio recorded: No
### Independent Health Advice Panel

#### Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
</tr>
</thead>
</table>
| IHAP referral date/time: | 23/09/2019  
Time: 1510 hrs |
| IHAP Meeting date: | 25/09/2019 0700 hrs |
| Reconstituted IHAP meeting (if required): | N/A |

| Treating Doctor’s referral received? | Yes |
| Was the Referring Doctor’s clinical assessment performed remotely or in person? | Remotely |
| Health Service Provider clinical summary received: | Yes |

#### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

#### IHAP findings:

**Initial meeting:** Wednesday, 25 September 2019 at 0700 hrs

- Attended by: Dr Antonio Di Dio, Dr Parbodh Gogna, Dr Neeraj Gill, Dr Susan Maloney, Dr Paul Kelly, Dr Michael Douglas.
- Secretariat attending: s22(1)(g)(ii)

Following IHAP document review, has been diagnosed with:

#47F

The Panel considered the treating doctors’ reports and the MOC opinion in relation to the case.

The Panel discussed #47F.
The Panel noted that... The Panel noted that...

The Panel noted that. The Panel noted that...

The Panel noted that. The Panel noted that...

The Panel noted. The Panel noted that...

The Panel noted that. The Panel noted that...

The Panel noted that. The Panel noted that...

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All six IHAP Panel members agreed that their recommendation was to **refuse** transfer to Australia for treatment. The Panel members agreed that their recommendation was based on the below reasons:

The Panel agreed that their recommendation to refuse transfer was based on the above factors.
### Actions:

1. 
2. 

### Document library reviewed:

- **ABF Client brief – 3 pages**
  - 1. Clinical Advisory Team (MOC) Opinion dated 18.09.2019 – 1 page
  - 2. Letter from [Redacted] – 2 pages
  - 3. Treating Drs referral – 13 pages
    - a. 
    - b. 
  - 4. Clinical Records

### Panel members assessing:

- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Professor Brendan Murphy
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Dr Michael Douglas

### IHAP Majority recommendation:

- **Is the Minister’s refusal confirmed:** Yes
- **Majority (out of total members):** 6/6
- **Transfer is recommended:** No
- **Date of IHAP recommendation:** 26/09/2019
- **Time of IHAP recommendation:** 0925 hrs
- **Deemed approval (post 72 hours)?** No
- **Meeting audio recorded:** No
**Independent Health Advice Panel**

**Clinical Assessment**

<table>
<thead>
<tr>
<th>Meeting details</th>
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<tr>
<td><strong>IHAP referral date/time:</strong></td>
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<tr>
<td><strong>IHAP Meeting date:</strong></td>
<td>25/09/2019 0700 hrs</td>
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<tr>
<td><strong>Health Service Provider clinical summary received:</strong></td>
<td></td>
</tr>
</tbody>
</table>

**Interview with Transitory Person**

☑ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

*Initial meeting:* Wednesday, 25 September 2019 at 0700 hrs

Attended by: Dr Antonio Di Dio, Dr Parbodh Gogna, Dr Susan Maloney, Dr Neeraj Gill, Dr Michael Douglas, Dr Paul Kelly

Secretariat attending: [s22(1)(a)(ii)]

Following IHAP document review [s47F] has been diagnosed with:

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This document may contain ‘personal identifiers’ and ‘personal information’ as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.

**Sensitive: Personal**
The Panel considered the treating doctors’ reports and the MOC opinion in relation to the case.

The Panel discussed and noted:

The Panel noted that

The Panel also noted that

The Panel noted that

The Panel noted that

The Panel agreed that

The Panel noted that

The Panel raised concern that

The Panel agreed that

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.
IHAP recommendations

5 of the 6 IHAP Panel members present agreed that their recommendation was to **refuse** transfer to Australia for treatment. The Panel agreed that their recommendation was based on the below reasons:

1.
2.
3.

The Panel agreed that their recommendation to refuse transfer was based on the above factors.

**Actions:**

1.
2.

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 17.09.2019 – 1 pages
2. Letter from – 2 pages
3. Treating Drs referral – 13 pages
   a.
   b.
4. Clinical Records

**Panel members assessing:**

Dr Antonio Di Dio (Chair)
Dr Parbodh Gogna
Professor Brendan Murphy
Associate Professor Susan Moloney
Associate Professor Neeraj Gill
Dr Michael Douglas

**IHAP Majority recommendation:**

Is the Minister’s refusal confirmed: Yes
<p>| | |</p>
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<tr>
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<td><strong>Majority</strong> (out of total members):</td>
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<td>Date of IHAP recommendation:</td>
<td>26/09/2019</td>
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<tr>
<td>Time of IHAP recommendation:</td>
<td>0925 hrs</td>
</tr>
<tr>
<td>Deemed approval (post 72 hours)?</td>
<td>No</td>
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<td>Meeting audio recorded:</td>
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## Clinical Assessment

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<td><strong>IHAP referral date/time:</strong></td>
<td>27/09/2019 0941 hrs</td>
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<tr>
<td><strong>IHAP Meeting date:</strong></td>
<td>28/09/2019 0800 hrs</td>
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<tr>
<td><strong>Reconvened IHAP meeting (if required):</strong></td>
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| Treating Doctor’s referral received? | Yes |
| Was the Referring Doctor’s clinical assessment performed remotely or in person? | Remotely |
| Health Service Provider clinical summary received: | Yes |

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: s22(1)(a)(ii)
- Following IHAP document review s47F has been diagnosed with: s47F

---

This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.
The Panel noted and agreed with the diagnoses provided by the treating doctors based on the clinical records provided.

The Panel noted that it was agreed that Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

The Panel agreed that their recommendation to refuse transfer was based on the above findings.

**Actions:**

1. 
2. The Panel be provided with a status update
**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 18.09.2019 – 1 pages
2. Letter from [redacted] – 2 pages
3. Treating Drs referral –
   a. [redacted]
   b. [redacted]
4. Clinical Records

---

**Panel members assessing:**
- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Professor Paul Kelly
- Associate Professor Neeraj Gill
- Mr Guy Coffey

**IHAP Majority recommendation:**
- **Is the Minister’s refusal confirmed:** Yes
- **Majority (out of total members):** 5/7
- **Transfer is recommended:** No
- **Date of IHAP recommendation:** 28/09/2019
- **Time of IHAP recommendation:** 17:00
- **Deemed approval (post 72 hours)?** No
- **Meeting audio recorded:** No
## Independent Health Advice Panel

### Clinical Assessment

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| Treating Doctor’s referral received? | Yes |
| Was the Referring Doctor’s clinical assessment performed remotely or in person? | Remotely |
| Health Service Provider clinical summary received: | Yes |

**Interview with Transitory Person**

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

- Secretariat attending: s22(1)(a)(i)
- Following IHAP document review s47F has been diagnosed with: s47F

---

This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.

**Sensitive: Personal**
The Panel noted and agreed

They noted that

The Panel were concerned that,

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

The Panel considered that

The Panel agreed that their recommendation to refuse transfer was based on the above findings.

**Actions:**

1. 
2. 
3. A full update be made available to the Panel
### Document library reviewed:

- **ABF Client brief** – 2 pages
- **Clinical Advisory Team (MOC) Opinion dated 18.09.2019** – 1 pages
- **Letter from [redacted]** – 2 pages
- **Treating Drs referral** – 2 pages
  - **a.** [redacted]
  - **b.** [redacted]
  - **c.** [redacted]
- **Clinical Records**

### Panel members assessing:
- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Professor Paul Kelly
- Associate Professor Neeraj Gill
- Mr Guy Coffey

### IHAP Majority recommendation:
- **Is the Minister's refusal confirmed:** Yes
- **Majority** (out of total members): **5/7**
- **Transfer is recommended:** No

### Date
- **Date of IHAP recommendation:** 28/09/2019
- **Time of IHAP recommendation:** 17:00 hrs
- **Deemed approval (post 72 hours)?** No
- **Meeting audio recorded:** No
# Independent Health Advice Panel

## Clinical Assessment

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<td>Was the Referring Doctor’s clinical assessment performed remotely or in person?</td>
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<tr>
<td>Health Service Provider clinical summary received:</td>
<td>Yes</td>
</tr>
</tbody>
</table>

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: s22(1)(a)(ii) [RTP]
- Following IHAP document review s47F [RTP] has been diagnosed with:

This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.
The Panel were concerned that [REDACTED]. They agreed that [REDACTED].

It was noted that [REDACTED].

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

The Panel recommends that [REDACTED].

The Panel agreed that their recommendation to refuse [REDACTED] transfer was based on the above findings.

**Actions:**

1. [REDACTED]
**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 20.09.2019 – 1 pages
2. Letter from [Redacted] – 2 pages
3. Treating Drs referral –
   a. [Redacted]
   b. [Redacted]
4. Clinical Records

**Panel members assessing:**
Dr Antonio Di Dio (Chair)
Dr Parbodh Gogna
Professor Paul Kelly
Associate Professor Neeraj Gill
Mr Guy Coffey

**IHAP Majority recommendation:**

<table>
<thead>
<tr>
<th>Is the Minister’s refusal confirmed:</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Majority (out of total members):</td>
<td>5/7</td>
</tr>
<tr>
<td>Transfer is recommended:</td>
<td>No</td>
</tr>
</tbody>
</table>

| Date of IHAP recommendation:       | 28/09/2019 |
| Time of IHAP recommendation:       | 17:00     |
| Deemed approval (post 72 hours)?   | No        |
| Meeting audio recorded:           | No        |
**Independent Health Advice Panel**

**Clinical Assessment**

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<td>28/09/2019 0800 hrs</td>
<td><strong>Treating Doctor’s referral received?</strong> Yes</td>
</tr>
<tr>
<td><strong>Reconvened IHAP meeting (if required):</strong></td>
<td></td>
</tr>
<tr>
<td>N/A</td>
<td><strong>Was the Referring Doctor’s clinical assessment performed remotely or in person?</strong> Remotely</td>
</tr>
<tr>
<td></td>
<td><strong>Health Service Provider clinical summary received:</strong> Yes</td>
</tr>
</tbody>
</table>

**Interview with Transitory Person**

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

- Secretariat attending: [Section 22(1)(b)(ii)]
- Following IHAP document review [Section 47F] has been diagnosed with: [Section 47F]
The Panel noted and agreed

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

The Panel considered that

The Panel agreed that their recommendation to refuse transfer was based on the above findings.

**Actions:**

1. 

2. A full update be provided to the Panel
### IHAP Majority recommendation:

- **Is the Minister's refusal confirmed:** Yes
- **Majority (out of total members):** 5/7
- **Transfer is recommended:** No
- **Date of IHAP recommendation:** 28/09/2019
- **Time of IHAP recommendation:** 17:00
- **Deemed approval (post 72 hours)?** No
- **Meeting audio recorded:** No
### Independent Health Advice Panel

#### Clinical Assessment

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<tr>
<td>IHAP referral date/time:</td>
<td>28/09/2019</td>
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<tr>
<td>Time: 13:45 hrs</td>
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<td>29/09/2019 15:00 hrs</td>
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<td>Yes</td>
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<tr>
<td>Reconstituted IHAP meeting (if required):</td>
<td>N/A</td>
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<tr>
<td>Was the Referring Doctor’s clinical assessment...</td>
<td>Remotely</td>
</tr>
<tr>
<td>Health Service Provider clinical summary received:</td>
<td>Yes</td>
</tr>
</tbody>
</table>

### Interview with Transitory Person

- ☑️ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do so due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: s22(1)(b)(i)
- Following IHAP document review s47F has been diagnosed with: s47F
The Panel noted. The Panel agreed. They also recommended that. The Panel recommended that they noted.

IHAP recommendations

Actions:

- Panel to be informed via the IHAP Secretariat once these have been provided.
**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 20.09.2019 – 1 pages
2. Letter from – 2 pages
3. Treating Drs referral –
   a.
   b.
4. Clinical Records

**Panel members assessing:**
- Dr Antonio Di Dio (Chair)
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Dr Michael Douglas

**IHAP Majority recommendation:**
- Is the Minister’s refusal confirmed: Yes
- Majority (out of total members): 4/7
- Transfer is recommended: No

**Date of IHAP recommendation:** 29/09/2019
**Time of IHAP recommendation:** 20:27

**Deemed approval (post 72 hours)?** No
**Meeting audio recorded:** No

Released by Department of Home Affairs under the Freedom of Information Act 1982
## Independent Health Advice Panel

### Clinical Assessment

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Time: 13:45 hrs | |
| IHAP Meeting date: | 29/09/2019  
15:00 hrs | Treating Doctor’s referral received?  
Yes |
| Reconvened IHAP meeting (if required): | N/A | Was the Referring Doctor’s clinical assessment performed remotely or in person?  
Remotely |
| Health Service Provider clinical summary received: | | Yes |

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: [s22(1)(a)(ii)]
- Following IHAP document review [s47F] has been diagnosed with:

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This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.
The Panel noted that the IHAP recommendations

**Actions:**
- Panel to be informed via the IHAP Secretariat once these have been provided.
**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 18.09.2019 – 1 pages
2. Letter from [REDACTED] – 2 pages
3. Treating Drs referral –
   a. [REDACTED]
   b. [REDACTED]
4. Clinical Records

**Panel members assessing:**
- Dr Antonio Di Dio (Chair)
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Dr Michael Douglas

**IHAP Majority recommendation:**

| Is the Minister’s refusal confirmed: | Yes |
| Majority (out of total members): | 4/7 |
| Transfer is recommended: | No |

**Date of IHAP recommendation:** 29/09/2019

**Time of IHAP recommendation:** 20:27

**Deemed approval (post 72 hours)?**
- No

**Meeting audio recorded:**
- No
**Independent Health Advice Panel**

**Clinical Assessment**

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**Interview with Transitory Person**

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

- Secretariat attending: s22(1)(a)(i)

Following IHAP document review s47F has been diagnosed with:

The Panel noted s47F

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### Document library reviewed:

<table>
<thead>
<tr>
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<td>ABF Client brief</td>
<td>3</td>
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<td>Clinical Advisory Team (MOC)</td>
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<tr>
<td>Opinion dated 25.09.2019</td>
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<tr>
<td>Letter from</td>
<td>2</td>
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<tr>
<td>Treating Drs referral</td>
<td>13</td>
</tr>
<tr>
<td>Clinical Records</td>
<td>4</td>
</tr>
</tbody>
</table>

### Panel members assessing:

- Dr Antonio Di Dio (Chair)
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Dr Michael Douglas

### IHAP Majority recommendation:

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the Minister's refusal confirmed?</td>
<td>Yes</td>
</tr>
<tr>
<td>Majority (out of total members):</td>
<td>4/7</td>
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<tr>
<td>Transfer is recommended?</td>
<td>No</td>
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<tr>
<td>Date of IHAP recommendation:</td>
<td>29/09/2019</td>
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<td>Deemed approval (post 72 hours)?</td>
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<td>Meeting audio recorded:</td>
<td>No</td>
</tr>
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## Clinical Assessment

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<td>IHAP referral date/time:</td>
<td>01/10/2019 Time: 1300 hrs</td>
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<td>02/10/2019 1900 hrs</td>
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<td>Remotely</td>
</tr>
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</tbody>
</table>

### Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(ii) [DSTF]

Following IHAP document review [DSTF], has been diagnosed with:

s47F

---

This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.
The Panel noted that.[REDACTED]

The Panel welcomed.[REDACTED].

It was noted [REDACTED].

[REDACTED] the Panel was of the opinion that [REDACTED].

**IHAP recommendations**

The Panel agreed that Mr.[REDACTED].

They recommend that [REDACTED].

**Actions:**

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
**Sensitive: Personal**

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 18.05.2019 – 1 page
2. Letter from [redacted] – 2 pages
3. Treating Drs referral –
   a. [redacted]
   b. [redacted]
4. Clinical Records

**Panel members assessing:**

- Dr Antonio Di Dio (Chair)
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Dr Michael Douglas
- Mr Guy Coffey

**IHAP Majority recommendation:**

- Is the Minister’s refusal confirmed: Yes
- Majority (out of total members): 5/7
- Transfer is recommended: No

**Deemed approval (post 72 hours)?**

- No

**Date of IHAP recommendation:** 3/10/2019

**Time of IHAP recommendation:** 1220 hrs

**Meeting audio recorded:** No
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<td>Time: 08:49 hrs</td>
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<td><strong>IHAP Meeting date:</strong></td>
<td></td>
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<tr>
<td>4/10/2019 0700 hrs</td>
<td>Treating Doctor’s referral received?</td>
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</tr>
<tr>
<td>N/A</td>
<td>Was the Referring Doctor’s clinical assessment performed remotely or in person?</td>
</tr>
<tr>
<td></td>
<td>Health Service Provider clinical summary received:</td>
</tr>
</tbody>
</table>

**Interview with Transitory Person**

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

Secretariat attending: s22(1)(a)(ii)[2]

Following IHAP document review, s47F[2] has been diagnosed with:

---

This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.
The Panel noted that

They noted that

The Panel agreed that

IHAP recommendations

The Panel recommend that

The Panel was concerned that

The Panel noted that

Actions:

•

•

•
**Sensitive: Personal**

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 25/09/2019 – 1 page
2. Letter from advocate – 2 pages
3. – 2 pages
4. Treating Drs referral – 23 pages
   a. 
   b. 
5. Clinical Records

**Panel members assessing:**

- Dr Antonio Di Dio (Chair)
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Mr Guy Coffey

**IHAP Majority recommendation:**

<table>
<thead>
<tr>
<th>Is the Minister’s refusal confirmed:</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Majority (out of total members):</td>
<td>4/7</td>
</tr>
<tr>
<td>Transfer is recommended:</td>
<td>No</td>
</tr>
</tbody>
</table>

| Date of IHAP recommendation: | 4/10/2019          |
| Time of IHAP recommendation: | 13:55              |

| Deemed approval (post 72 hours)? | No                |
| Meeting audio recorded:         | No                |
## Meeting details

<table>
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<th>03/10/2019 0847 hrs</th>
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<tbody>
<tr>
<td>IHAP Meeting date:</td>
<td>04/10/2019 0700hrs</td>
</tr>
<tr>
<td>Reconvened IHAP meeting (if required):</td>
<td>N/A</td>
</tr>
</tbody>
</table>

### Biodata details

| Treating Doctor’s referral received? | Yes |
| Was the Referring Doctor’s clinical assessment performed remotely or in person? | Remotely |
| Health Service Provider clinical summary received: | Yes |

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: s22(1)(a)(ii)
- Following IHAP document review s47F has been diagnosed with: s47F

---

This document may contain ‘personal identifiers’ and ‘personal information’ as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.
The Panel noted the difficulty in making recommendations when the clinical documentation provided to them dated back to when the case was presented to the Department, and therefore often one month or more out of date.

**IHAP recommendations**
The Panel recommend that

**Actions:**
### Document library reviewed:

1. Clinical Advisory Team (MOC) Opinion dated 27.09.2019 – 1 pages
2. Letter from — 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

---

### Panel members assessing:

- Dr Antonio Di Dio (Chair)
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Mr Guy Coffey

### IHAP Majority recommendation:

- Is the Minister’s refusal confirmed: Yes
- Majority (out of total members): 4/7
- Transfer is recommended: No

- Date of IHAP recommendation: 4/10/2019
- Time of IHAP recommendation: 13:55
- Deemed approval (post 72 hours)? No
- Meeting audio recorded: No
# Independent Health Advice Panel

## Clinical Assessment

<table>
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<tbody>
<tr>
<td><strong>IHAP referral date/time:</strong></td>
<td>s47F</td>
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<tr>
<td>03/10/2019 Time: 0849 hrs</td>
<td></td>
</tr>
<tr>
<td><strong>IHAP Meeting date:</strong></td>
<td></td>
</tr>
<tr>
<td>04/10/2019 0700hrs</td>
<td></td>
</tr>
<tr>
<td><strong>Reconvened IHAP meeting (if required):</strong></td>
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</tr>
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<tr>
<td>Remotely</td>
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### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending:
- Following IHAP document review has been diagnosed with:

---

This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.

**Sensitive: Personal**
The Panel noted that

It was also noted that

The Panel agreed that

**IHAP recommendations**

The Panel recommended that

**Actions:**

- A report back to IHAP via the Secretariat with outcomes of the above
Document library reviewed: ABF Client brief – 2 pages

2. Letter from [REDACTED] – 2 pages
3. Treating Drs referral –
   a. [REDACTED]
   b. [REDACTED]
4. Clinical Records

Panel members assessing:
- Dr Antonio Di Dio (Chair)
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Mr Guy Coffey

IHAP Majority recommendation:
- Is the Minister’s refusal confirmed: Yes
- Majority (out of total members): 4/7
- Transfer is recommended: No
- Date of IHAP recommendation: 4/10/2019
- Time of IHAP recommendation: 13:55
- Deemed approval (post 72 hours)? No
- Meeting audio recorded: No
### Independent Health Advice Panel

#### Clinical Assessment

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<td>04/10/2019 0700hrs</td>
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<td>Health Service Provider clinical summary received:</td>
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#### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

#### IHAP findings:

- Secretariat attending:  
- Following IHAP document review has been diagnosed with:  

---

This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.
The Panel shared concern that one treating doctor's report was written nearly three months after the assessment on and the other was also tardy at nearly two months. This increased the difficulty in the Panel's understanding of a patient's current medical situation.

IHAP recommendations

The Panel recommended that

Actions:

- 
- 
- 
-
Document library reviewed: ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 25.09.2019 – 1 pages
2. Letter from [REDACTED] – 2 pages
3. Treating Drs referral –
   a. [REDACTED]
   b. [REDACTED]
4. Clinical Records

Panel members assessing:
Dr Antonio Di Dio (Chair)
Associate Professor Susan Moloney
Associate Professor Neeraj Gill
Mr Guy Coffey

IHAP Majority recommendation:
Is the Minister’s refusal confirmed: Yes
Majority (out of total members): 4/7
Transfer is recommended: No

Date of IHAP recommendation: 4/10/2019
Time of IHAP recommendation: 13:55
Deemed approval (post 72 hours)? No
Meeting audio recorded: No
**Independent Health Advice Panel**

**Clinical Assessment**

<table>
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<tr>
<th>Meeting details</th>
<th>Biodata details</th>
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<tr>
<td><strong>IHAP referral date/time:</strong></td>
<td>03/10/2019</td>
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<tr>
<td><strong>IHAP Meeting date:</strong></td>
<td>05/10/2019</td>
</tr>
<tr>
<td><strong>Reconvened IHAP meeting (if required):</strong></td>
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<table>
<thead>
<tr>
<th>Treating Doctor’s referral received?</th>
<th>Yes</th>
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<tbody>
<tr>
<td>Was the Referring Doctor’s clinical assessment performed remotely or in person?</td>
<td>Remotely</td>
</tr>
<tr>
<td>Health Service Provider clinical summary received:</td>
<td>Yes</td>
</tr>
</tbody>
</table>

**Interview with Transitory Person**

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

Secretariat attending:

Following IHAP document review has been diagnosed with:
The Panel discussed...

The Panel agreed that...

The Panel noted that...

The Panel noted that...

The Panel noted that...

The Panel noted that...

The Panel noted.

The Panel noted that...

The Panel noted.

The Panel agreed that...

The Panel raised concern...

The Panel noted.

The Panel agreed that...

The Panel agreed that...

The Panel agreed that...

The Panel agreed that...

The Panel agreed that...

**IHAP recommendations**

All four IHAP Panel members agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- ...
- ...
- ...
The Panel agree that their recommendation to approve transfer to Australia for medical treatment is based on the above reasons.

**Actions:**

1. Be transferred to Australia, and the Panel be notified via the Outcomes Tracker when this is done.
2. 

**Document library reviewed:** ABF Client brief – 2 pages

2. Letter from – 6 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

**Panel members assessing:**

- Dr Antonio Di Dio (Chair)
- Professor Paul Kelly
- Associate Professor Susan Moloney
- Dr Michael Douglas

**IHAP Majority recommendation:**

- Is the Minister’s refusal confirmed: No
- Majority (out of total members): 4/7
- Transfer is recommended: Yes
- Date of IHAP recommendation: 05/10/2019
- Time of IHAP recommendation: 1431 hrs
- Deemed approval (post 72 hours)? No
- Meeting audio recorded: No

---

**Sensitive: Personal**
## Independent Health Advice Panel

### Clinical Assessment

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<th>Biodata details</th>
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<tr>
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<td>Remotely</td>
</tr>
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<td>Health Service Provider clinical summary received:</td>
<td>Yes</td>
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### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending:
- Following IHAP document review has been diagnosed with:

This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.
The Panel discussed. The Panel noted that. The Panel agreed that. The Panel agreed that.

The Panel noted that. The Panel noted that.

The Panel noted that. The Panel noted that.

**IHAP recommendations**

All four IHAP Panel members agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- 
- 
- 

Based on the above reasons and the recommendation from PIH POM and the Medical Officer of the Commonwealth, the Panel agree that their recommendation is to approve transfer to Australia for medical treatment.

**Actions:**

1. be transferred to Australia and the Panel be notified via the Outcomes Tracker when this is done.

- 

Sensitive: Personal
Document library reviewed:  ABF Client brief – 2 pages

2. Letter from [redacted] – 2 pages
3. Treating Drs referral –
   a. [redacted]
   b. [redacted]
4. Clinical Records

Panel members assessing:
- Dr Antonio Di Dio (Chair)
- Professor Brendan Murphy
- Associate Professor Susan Moloney
- Dr Michael Douglas

IHAP Majority recommendation:
- Is the Minister’s refusal confirmed: No
- Majority (out of total members): 4/7
- Transfer is recommended: Yes
- Date of IHAP recommendation: 05/10/2019
- Time of IHAP recommendation: 1431 hrs
- Deemed approval (post 72 hours)? No
- Meeting audio recorded: No
## Clinical Assessment

<table>
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<td>Time: 1342 hrs</td>
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<td>06/10/2019 0800 hrs</td>
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<td>IHAP Meeting date:</td>
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<td>06/10/2019 0800 hrs</td>
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### Interview with Transitory Person
- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:
- Secretariat attending: s22(1)(a)(i)
- Following IHAP document review s47F has been diagnosed with:

---

This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.
The Panel discussed. The Panel noted that. The Panel noted that. The Panel noted that. The Panel noted that. The Panel noted that. The Panel agreed that.

**IHAP recommendations**

All five IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 

Based on the above reasons, the Panel agree that transfer to Australia for treatment should be refused.

**Actions:**

1. 
2. 

Released by Department of Home Affairs under the Freedom of Information Act 1982
### Document library reviewed:

2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

<table>
<thead>
<tr>
<th>Panel members assessing:</th>
<th>Dr Antonio Di Dio (Chair)</th>
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<tbody>
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<td></td>
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</tr>
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<tbody>
<tr>
<td></td>
<td>Majority (out of total members): 5/7</td>
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<td>Transfer is recommended: No</td>
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<td>07/10/2019</td>
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<td>Meeting audio recorded:</td>
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## Interview with Transitory Person
- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

## IHAP findings:

Secretariat attending: s22(1)(a)(i)

Following IHAP document review s47F has been diagnosed with:
The Panel discussed...

The Panel noted that...

The Panel noted that... The Panel agreed that...

The Panel agreed the... The Panel agreed that...

The Panel noted that there... The Panel raised concern... The Panel agreed that...

The Panel agreed that... needed a transfer to Australia for... treatment and the management of... symptoms.

**IHAP recommendations**

All five IHAP Panel members agreed that their recommendation was that... transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

-...
-...
-...

Based on the above reasons, the Panel agreed that their recommendation was to approve... transfer to Australia for treatment.

**Actions:**

1. ... be transferred to Australia for treatment and the Panel be notified via the Outcomes Tracker once this is done.
2. ...
3. ...
**Document library reviewed:** ABF Client brief – 4 pages

1. Clinical Advisory Team (MOC) Opinion dated 25.09.2019 – 1 pages
2. Letter from [REDACTED] – 2 pages
3. Treating Drs referral –
   a. [REDACTED]
   b. [REDACTED]
4. Clinical Records [REDACTED]

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<td></td>
<td>Dr Michael Douglas</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>IHAP Majority recommendation:</th>
<th>Is the Minister’s refusal confirmed:</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Majority (out of total members):</td>
<td>5/7</td>
</tr>
<tr>
<td></td>
<td>Transfer is recommended:</td>
<td>Yes</td>
</tr>
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<table>
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<tr>
<th>Date of IHAP recommendation:</th>
<th>07/10/2019</th>
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<tr>
<td>Time of IHAP recommendation:</td>
<td>1246 hrs</td>
</tr>
<tr>
<td>Deemed approval (post 72 hours)?</td>
<td>No</td>
</tr>
<tr>
<td>Meeting audio recorded:</td>
<td>No</td>
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</table>
# Independent Health Advice Panel

## Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
</tr>
</thead>
</table>
| **IHAP referral date/time:** | 04/10/2019  
Time: 1342 hrs |  
24F |
| **IHAP Meeting date:** | 06/10/2019 0800 hrs |  
Treating Doctor’s referral received?  
Yes |
| **Reconvened IHAP meeting (if required):** | N/A |  
Was the Referring Doctor’s clinical assessment performed remotely or in person?  
Remotely |
|  |  |  
Health Service Provider clinical summary received:  
Yes |

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: s22(1)(a)(ii)
- Following IHAP document review s47F has been diagnosed with:  
s47F
- The Panel noted that s47F
- The Panel noted that  s47F
- The Panel noted further that  s47F
The Panel noted that all five IHAP Panel members agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- 
- 
- 

Based on the above factors, the Panel agreed that their recommendation was to approve transfer to Australia for treatment.

Actions:

1. be transferred to Australia for medical treatment, urgently, and the Panel be notified via the Outcomes Tracker once this is done.
2. 

Document library reviewed: ABF Client brief – 2 pages

2. Letter from – 5 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records
| Panel members assessing:               | Dr Antonio Di Dio (Chair) |
|                                       | Professor Paul Kelly      |
|                                       | Associate Professor Susan Moloney |
|                                       | Associate Professor Neeraj Gill |
|                                       | Dr Michael Douglas        |

| IHAP Majority recommendation:         | Is the Minister’s refusal confirmed: No |
|                                       | Majority (out of total members): 5/7  |
|                                       | Transfer is recommended: Yes        |

| Date of IHAP recommendation:          | 07/10/2019             |
| Time of IHAP recommendation:         | 1246 hrs               |
| Deemed approval (post 72 hours)?     | No                     |
| Meeting audio recorded:              | No                     |
### Independent Health Advice Panel

#### Clinical Assessment

<table>
<thead>
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<td>IHAP Meeting date:</td>
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<tr>
<td>Reconvened IHAP meeting (if required):</td>
<td>N/A</td>
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</table>

- **Treating Doctor’s referral received?** Yes
- **Was the Referring Doctor’s clinical assessment performed remotely or in person?** Remotely
- **Health Service Provider clinical summary received?** Yes

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending:
- Following IHAP document review has been diagnosed with:
- The Panel discussed and noted that:

---

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The Panel agreed that the treating doctors' assessments and the medical referrals raised concern about the delay in the treating doctors' assessments and the medical referrals. The Panel agreed that the medical referral did not come until 3 months later. The Panel agreed that.

**IHAP recommendations**

All five IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.
Actions:
1. 
2. 
3. 

Document library reviewed: ABF Client brief – 2 pages
1. Clinical Advisory Team (MOC) Opinion dated 30/09/2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

Panel members assessing:
- Dr Antonio Di Dio (Chair)
- Professor Paul Kelly
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Dr Michael Douglas

IHAP Majority recommendation:
- Is the Minister’s refusal confirmed: Yes
- Majority (out of total members): 5/7
- Transfer is recommended: No
- Date of IHAP recommendation: 07/10/2019
- Time of IHAP recommendation: 1528 hrs
- Deemed approval (post 72 hours)? No
- Meeting audio recorded: No
## Independent Health Advice Panel

### Clinical Assessment

<table>
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<td>13/09/2019 1800hrs</td>
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<td>N/A</td>
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<tr>
<td></td>
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</table>

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Attended by: Dr Antonio Di Dio, Professor Paul Kelly, A/Prof Sue Moloney, A/Prof Neeraj Gill, A/Prof Michael Douglas, Mr Guy Coffey, Dr Parbodh Gogna.

Secretariat attending: s22(1)(b)(ii) and s22(1)(b)(x)

Following IHAP document review s47F has been diagnosed with:

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**Sensitive: Personal**
The Panel considered the reports of the treating doctors and the Medical Officer of the Commonwealth and agreed that

With this in mind, the Panel agreed that

The Panel notes a large volume of cases being referred to the Minister and then to IHAP; this creates some difficulty getting the complete panel to review the case and may need to be addressed by the Secretariat to ensure compliance with the relevant legislation.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All seven Panel members recommended that transfer to Australia for medical treatment be approved as soon as possible in order to ensure receives appropriate medical care.

**Actions:**

1. to be transferred to Australia.

2. The Panel be informed once the transfer has occurred.
Document library reviewed: ABF Client brief – 2 pages
1. Clinical Advisory Team (MOC) Opinion dated 29.08.2019 – 2 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral – 12 pages
   a. 
   b. 
4. Clinical Records – total pages 625 pages

Panel members assessing:
Dr Antonio Di Dio (Chair)
Dr Parbodh Gogna
Professor Paul Kelly
Associate Professor Susan Moloney
Associate Professor Neeraj Gill
Dr Michael Douglas
Mr Guy Coffey

IHAP Majority recommendation:
Is the Minister’s refusal confirmed: No
Majority (out of total members): 7/7
Transfer is recommended: Yes
Date of IHAP recommendation: 13/09/2019
Time of IHAP recommendation: 2000hrs
Deemed approval (post 72 hours)? No
Meeting audio recorded: No
# Independent Health Advice Panel

## Clinical Assessment

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<tr>
<td><strong>IHAP Meeting date:</strong></td>
<td>13/09/2019 07:00 hrs</td>
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<td><strong>Treating Doctor’s referral received?</strong></td>
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</tr>
<tr>
<td><strong>Was the Referring Doctor’s clinical assessment performed remotely or in person?</strong></td>
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</tr>
<tr>
<td><strong>Health Service Provider clinical summary received:</strong></td>
<td>Yes</td>
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</table>

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Monday 13 September 2019 at 07:00 hrs attended by three IHAP Panel members with one Panel member providing an assessment outside of the meeting environment.

Secretariat attending: s22(1)(a)(iii)

s47F has been referred to the Independent Health Advice Panel by the Minister for clinical assessment following a notification having been received from two physicians that [redacted] is a relevant transitory person.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel notes a large volume of cases being referred to the Minister and then to IHAP, this created some difficulty getting the complete Panel to review the case.
The Panel agreed with the diagnoses outlined by the treating doctors following review of the clinical records supplied by the health care providers in PNG and the report by the Medical Officer of the Commonwealth (MOC).

The Panel agreed that, the Panel recommends that.

The Panel notes that, the Panel agrees that.

The Panel also noted that. They further note that.

The Panel recommended that. The also noted that.

The Panel also noted the significant delay from the completion of the treating doctor reviews and the submission/notification to the Department of Home Affairs.
IHAP recommendations

All four IHAP members agreed that their recommendation is that transfer to Australia for medical treatment be refused. However, the Panel recommends:

- The Panel agreed that their recommendation that not be transferred to Australia is based on the above factors.

Actions:

- The Panel to be notified via the IHAP Outcomes Tracker.

Document library reviewed: ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 30.08.2019 – 2 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral – 13 pages
   a. 
   b. 
4. Clinical Records – 146 pages

Panel members assessing:

Dr Antonio Di Dio (Chair) - provided assessment outside of meeting environment.
Dr Parbodh Gogna
Associate Professor Susan Moloney
Mr Guy Coffey

IHAP Majority recommendation:

Is the Minister’s refusal confirmed: Yes
Majority (out of total members): 4/4
Transfer is recommended: No
<table>
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<tr>
<th>Date of IHAP recommendation:</th>
<th>13/09/2019</th>
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</thead>
<tbody>
<tr>
<td>Time of IHAP recommendation:</td>
<td>16:09 hrs</td>
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<tr>
<td>Deemed approval (post 72 hours)?</td>
<td>No</td>
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<td>Meeting audio recorded:</td>
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# Independent Health Advice Panel

## Clinical Assessment

<table>
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<th>Biodata details</th>
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<td><strong>IHAP referral date/time:</strong></td>
<td>Treating Doctor’s referral received?</td>
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<tr>
<td>12/09/2019</td>
<td>Yes</td>
</tr>
<tr>
<td>Time: 10:51 hrs</td>
<td></td>
</tr>
<tr>
<td>IHAP Meeting date:</td>
<td>Was the Referring Doctor’s clinical assessment performed remotely or in person?</td>
</tr>
<tr>
<td>13/09/2019 07:00 hrs</td>
<td>Remotely</td>
</tr>
<tr>
<td>Reconvened IHAP meeting (if required):</td>
<td>Health Service Provider clinical summary received:</td>
</tr>
<tr>
<td>N/A</td>
<td>Yes</td>
</tr>
</tbody>
</table>

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Monday 13 September 2019 at 07:00 hrs attended by three IHAP Panel members with one Panel member providing an assessment outside of the meeting environment.

Secretariat attending: s22(1)(a)(ii)

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel notes a large volume of cases being referred to the Minister and then to IHAP, this created some difficulty getting the complete Panel to review the case.

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**Sensitive: Personal**
Following IHAP document review has been diagnosed with:

The Panel agreed with the diagnoses outlined by the treating doctors following review of the clinical records supplied by the health care providers in PNG and the report by the Medical Officer of the Commonwealth (MOC).

The Panel agreed that. It was noted that. They also suggest that. The Panel noted that.

The Panel assessed that.

The Panel notes, that.

The Panel also noted the significant delay from the completion of the treating doctor reviews and the submission/notification to the Department of Home Affairs and one of the treating doctor’s reports was undated.

**IHAP recommendations**

All four IHAP members agreed that their recommendation is that transfer to Australia for medical treatment be refused. However, the Panel recommends:

- 

The Panel agreed that their recommendation that not be transferred to Australia is based on the above factors.

**Actions:**

- be transferred

  - The Panel to be notified when transferred via the IHAP Outcomes Tracker.
### Document library reviewed:
- ABF Client brief – 2 pages
  2. Letter from advocate – 2 pages
  3. Treating Drs referral – 13 pages
    a.  
    b.  
  4. Clinical Records

### Panel members assessing:
- Dr Antonio Di Dio (Chair) – provided assessment outside of meeting environment.
- Dr Parbodh Gogna
- Associate Professor Susan Moloney
- Mr Guy Coffey

### IHAP Majority recommendation:
- Is the Minister’s refusal confirmed: Yes
- Majority (out of total members): 4/4
- Transfer is recommended: No
- Date of IHAP recommendation: 13/09/2019
- Time of IHAP recommendation: 16:09 hrs
- Deemed approval (post 72 hours)? No
- Meeting audio recorded: No
**Independent Health Advice Panel**

**Clinical Assessment**

<table>
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<tr>
<th>Meeting details</th>
<th>Biodata details</th>
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</thead>
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<td>IHAP Meeting date:</td>
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<td>N/A</td>
</tr>
<tr>
<td>Treating Doctor's referral received?</td>
<td>Yes</td>
</tr>
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</table>

**Interview with Transitory Person**

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

- Secretariat attending: $47F
- Following IHAP document review $47F has been diagnosed with: $47F

---

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**Sensitive: Personal**
The Panel discussed

The Panel noted that

The Panel noted that

The Panel noted that

The Panel noted that

The Panel noted that

The Panel noted that

The Panel noted that

IHAP recommendations

All four IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 
- 
- 

Based on the above reasons, the Panel agree that transfer to Australia for medical treatment be refused.

Actions:

1. 

Sensitive: Personal
### Document library reviewed:
- ABF Client brief – 3 pages
  2. Letter from [Redacted] – 2 pages
  3. Treating Drs referral –
    a. [Redacted]
    b. [Redacted]
  4. Clinical Records

### Panel members assessing:
- Dr Antonio Di Dio (Chair)
- Professor Brendan Murphy
- Associate Professor Susan Moloney
- Dr Michael Douglas

### IHAP Majority recommendation:
- **Is the Minister’s refusal confirmed:** Yes
- **Majority (out of total members):** 4/7
- **Transfer is recommended:** No
- **Date of IHAP recommendation:** 05/06/2019
- **Time of IHAP recommendation:** 1431 hrs
- **Deemed approval (post 72 hours)?** No
- **Meeting audio recorded:** No

---

**Sensitive: Personal**
# Independent Health Advice Panel

## Clinical Assessment

<table>
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<tr>
<th>Meeting details</th>
<th>Biodata details</th>
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<tbody>
<tr>
<td><strong>IHAP referral date/time:</strong></td>
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<tr>
<td>Time: 14:55 hrs</td>
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<tr>
<td><strong>IHAP Meeting date:</strong></td>
<td>13/06/2019 17:00 hrs</td>
</tr>
<tr>
<td><strong>Reconvened IHAP meeting (if required):</strong></td>
<td>N/A</td>
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</tbody>
</table>

| Treating Doctor's referral received? | Yes |
| Was the Referring Doctor's clinical assessment performed remotely or in person? | Remotely |
| Health Service Provider clinical summary received: | Yes |

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Following IHAP document review has been diagnosed with:

---

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**Sensitive**
The Chair advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Chair also advised he was a Senior Medical Officer on Manus Island 2013/2014. IHAP noted the potential/perceived conflict of interest and advised they were happy for the Chair to continue in the discussion.

The Panel accepted the diagnoses outlined by the treating doctors following review of the clinical records supplied by the health care providers and the report by the Medical Officer of the Commonwealth. IHAP have also provide commentary on other areas of clinical significance found during this review.

The Panel noted that IHAP determined that it will not be necessary for them to IHAP has accepted that.

**IHAP recommendations**

All four IHAP members agreed that their recommendation is that transfer to Australia for medical treatment should be refused initially. The recommendation was based on the following reason:

1. 
2. 
3. 
4. 
5.
### Actions:

1.  
2.  
3.  

### Document library reviewed:

- ABF Client brief – 2 pages
- Clinical Advisory Team (MOC) Opinion dated 07/06/2019 – 2 pages
- Letter from – 4 pages
- Treating Drs referral – 13 pages
  - a.  
  - b.  
- Clinical Records

### Panel members assessing:

- Dr Parbodh Gogna (Chair)
- Professor Brendan Murphy
- Dr Antonio Di Dio
- Associate Professor Susan Moloney

### IHAP Majority recommendation:

- Is the Minister’s refusal confirmed: Yes
- Majority (out of total members): 4/4
- Transfer is recommended: No

### Details:

- Date of IHAP recommendation: 14/06/2019
- Time of IHAP recommendation: 12:47hrs
- Deemed approval (post 72 hours)? No
- Meeting audio recorded: No
## Independent Health Advice Panel

### Clinical Assessment

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<th>Treating Doctor’s referral received?</th>
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<tr>
<td>Was the Referring Doctor’s clinical assessment performed remotely or in person?</td>
<td>Remotely</td>
</tr>
<tr>
<td>Health Service Provider clinical summary received:</td>
<td>Yes</td>
</tr>
</tbody>
</table>

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.
IHAP findings:

Following IHAP document review, [redacted] has been diagnosed with: [redacted] has been diagnosed with:

The Panel accepted the diagnoses outlined by the treating doctors following review of the clinical records supplied by the health care providers [redacted] and the report by the Medical Officer of the Commonwealth. IHAP have also provided commentary on other areas of clinical significance found during this review.

IHAP determined that it will not be necessary for them to [redacted]. IHAP has accepted that

The Secretariat advised the Panel that [redacted]
IHAP recommendations

All four available IHAP members agreed that their recommendation is that transfer to Australia for medical treatment should be refused initially. The recommendation was based on the following reasons:

1. 
2. 
3. 
4. 

Actions:

1. 
2. 
3. 
4. 

Document library reviewed: ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 17.06.2019 – 2 pages
2. Two letter from – 6 pages
3. Letter from – 2 pages
4. Treating Drs referral – 10 pages
   a. 
   b. 
5. Clinical Records
## IHAP Majority recommendation:

| Panel members assessing: | Dr Antonio Di Dio (Acting Chair)  
| | Professor Brendan Murphy  
| | Associate Professor Susan Moloney  
| | Associate Professor Neeraj Gill |

| IHAP Majority recommendation: | Is the Minister’s refusal confirmed: | Yes |
| | Majority (out of total members): | 4/5 |
| | Transfer is recommended: | No |
| Date of IHAP recommendation: | 24/06/2019 |
| Time of IHAP recommendation: | 13:40hr |
| Deemed approval (post 72 hours)? | No |
| Meeting audio recorded: | No |
### Clinical Assessment

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<td>Reconvened IHAP meeting (if required):</td>
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- **Treating Doctor’s referral received?** Yes
- **Was the Referring Doctor’s clinical assessment performed remotely or in person?** Remotely
- **Health Service Provider clinical summary received:** Yes

## Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

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**IHAP findings:**

Following IHAP document review has been diagnosed with:

The Chair advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Chair also advised he was a Senior Medical Officer on Manus Island 2013/2014. IHAP noted the potential/perceived conflict of interest and advised they were happy for the Chair to continue in the discussion.

The Panel accepted the diagnoses outlined by the treating doctors following review of the clinical records supplied by the health care providers and the report by the Medical Officer of the Commonwealth. IHAP have also provided commentary on other areas of clinical significance found during this review.

The Panel noted . IHAP determined that it will not be necessary for them to . IHAP has accepted that .
IHAP recommendations

All five IHAP members agreed that their recommendation is that transfer to Australia for medical treatment should be refused initially. The recommendation was based on the following reason:

1. [Redacted]
2. [Redacted]
3. [Redacted]
4. [Redacted]
5. [Redacted]

Actions:

1. [Redacted]
2. The IHAP will seek an updated transfer. IHAP will review the case at that time.
3. [Redacted]
4. IHAP Assessment copy be provided to the treating team as suggestions for review.

Document library reviewed: ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 11.06.2019 – 2 pages
2. Letter from [Redacted] – 5 pages
3. Treating Drs referral – 17 pages
   a. [Redacted]
   b. [Redacted]
4. Clinical Records [Redacted]
### Panel members assessing:
- Dr Parbodh Gogna (Chair)
- Professor Brendan Murphy
- Dr Antonio Di Dio
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill

### IHAP Majority recommendation:
- **Is the Minister’s refusal confirmed:** Yes
- **Majority (out of total members):** 5/5
- **Transfer is recommended:** No

### Date of IHAP recommendation:
- 17/06/2019

### Time of IHAP recommendation:
- 10:15

### Deemed approval (post 72 hours)?
- No

### Meeting audio recorded:
- No
## Independent Health Advice Panel

### Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
</tr>
</thead>
<tbody>
<tr>
<td>IHAP referral date/time:</td>
<td>21/06/2019 Time: 16:02hrs</td>
</tr>
<tr>
<td>IHAP Meeting date:</td>
<td>23/06/2019 17:00hrs</td>
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<tr>
<td>Reconvened IHAP meeting (if required):</td>
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</table>

<table>
<thead>
<tr>
<th>Treating Doctor’s referral received?</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Was the Referring Doctor’s clinical assessment performed remotely or in person?</td>
<td>Remotely</td>
</tr>
<tr>
<td>Health Service Provider clinical summary received:</td>
<td>Yes</td>
</tr>
</tbody>
</table>

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

---

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**Sensitive**
IHAP findings:

Following IHAP document review, [REDACTED] has been diagnosed with:

The Panel accepted the diagnoses outlined by the treating doctors following review of the clinical records supplied by the health care providers [REDACTED] and the report by the Medical Officer of the Commonwealth. IHAP have also provided commentary on other areas of clinical significance found during this review.

IHAP determined that it will not be necessary for them to [REDACTED]. IHAP has accepted that [REDACTED].

The Secretariat advised the Panel that [REDACTED].

The Panel noted that there was quite a delay from the treating doctors in preparing their reports (following their initial review) and submitting to the Minister review. The Panel considers this to be particularly concerning considering their reports stated a transfer to Australia was urgent. It was also noted by the Panel that [REDACTED].
IHAP recommendations

All four available IHAP members agreed that their recommendation is that transfer to Australia for medical treatment should be refused initially. The recommendation was based on the following reason:

1. 
2. 
3. 
4. 

Actions:

1. 
2. 
3. IHAP Assessment copy be provided to the treating team as suggestions for review.
4. Arrange a teleconference to introduce Dr Gill and discuss issues including capacity, patient load, average length of stay and post discharge care provision. IHAP members have supplied their urgent availability for the teleconference on both Monday 24 and Tuesday 25 June 2019.

Document library reviewed: ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 18.06.2019 – 2 pages
2. Letter from – 5 pages
3. Treating Drs referral – 16 pages
   a. 
   b. 
4. Clinical Records
### Panel members assessing:
- Dr Antonio Di Dio (Acting Chair)
- Professor Brendan Murphy
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill

### IHAP Majority recommendation:

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
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<tbody>
<tr>
<td>Is the Minister’s refusal confirmed:</td>
<td>Yes</td>
</tr>
<tr>
<td>Majority (out of total members):</td>
<td>4/5</td>
</tr>
<tr>
<td>Transfer is recommended:</td>
<td>No</td>
</tr>
</tbody>
</table>

| Date of IHAP recommendation: | 24/06/2019 |
| Time of IHAP recommendation: | 13:40hrs   |
| Deemed approval (post 72 hours)? | No        |
| Meeting audio recorded:      | No        |
# Independent Health Advice Panel

## Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
</tr>
</thead>
</table>
| **IHAP referral date/time:** | 11/10/2019  
Time: 11:32 hrs | $47F |
| **IHAP Meeting date:** | 12/10/2019 08:00 hrs | Treating Doctor's referral received? | Yes |
| **Reconvened IHAP meeting (if required):** | N/A | Was the Referring Doctor's clinical assessment performed remotely or in person? | Remotely |
| **Health Service Provider clinical summary received:** | | |

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: $22(1)(a)(ii)$ and $22(1)(a)(i)$
- Following IHAP document review $47F$ has been diagnosed with:

---

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The Panel noted that

The Panel discussed and noted that:

The Panel agreed that

The Panel discussed and noted that:

The Panel expressed concern that

The Panel noted that

-----------------------------------------------

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All six IHAP Panel members agreed that their recommendation was that transfer to Australia be **refused**.

The Panel agreed that their recommendation was based on the following factors:

- 
- 
- 
- 

*Sensitive: Personal*
Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

**Actions:**

- 

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 04.10.2019 – 2 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral – 22 pages
   a. 
   b. 
4. Clinical Records

**Panel members assessing:**

Dr Antonio Di Dio (Chair)
Dr Parbodh Gogna

Released by Department of Home Affairs under the Freedom of Information Act 1982
<table>
<thead>
<tr>
<th>IHAP Majority recommendation:</th>
<th>Is the Minister's refusal confirmed:</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Majority (out of total members):</td>
<td>6/7</td>
<td></td>
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<tr>
<td>Transfer is recommended:</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>

<table>
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<tr>
<th>Date of IHAP recommendation:</th>
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<tr>
<td>Time of IHAP recommendation:</td>
<td>16:41hrs</td>
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<td>Deemed approval (post 72 hours)?</td>
<td>No</td>
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<tr>
<td>Meeting audio recorded:</td>
<td>No</td>
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## Independent Health Advice Panel

### Clinical Assessment

<table>
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<tr>
<th>Meeting details</th>
<th>Biodata details</th>
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<tr>
<td><strong>IHAP referral date/time:</strong></td>
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<td>12/10/2019 08:00 hrs</td>
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<tr>
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<td>N/A</td>
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<tr>
<td>Treating Doctor’s referral received?</td>
<td>Yes</td>
</tr>
<tr>
<td>Health Service Provider clinical summary received:</td>
<td>Yes</td>
</tr>
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</table>

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: s22(1)(a)(ii) and s22(1)(a)(ii) 
- Following IHAP document review s47F has been diagnosed with: 

---

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**Sensitive: Personal**
The panel discussed and noted the following:

The Panel noted that

The Panel has concerns that

The Panel noted that

The Panel noted that

The Panel agreed that should be transferred to Australia

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All six IHAP Panel members agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- 
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.
## Actions:

- be transferred to Australia.

## Document library reviewed:

- Clinical Advisory Team (MOC) Opinion dated 03.10.2019 – 2 pages
- Letter from advocate – 2 pages
- Treating Drs referral – 2 pages
- Clinical Records

## Panel members assessing:

- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Professor Brendan Murphy
- Associate Professor Susan Moloney
- Dr Michael Douglas
- Mr Guy Coffey

## IHAP Majority recommendation:

- Is the Minister’s refusal confirmed: No
- Majority (out of total members): 6/7
- Transfer is recommended: Yes
## IHAP Recommendation Details

<table>
<thead>
<tr>
<th>Date of IHAP recommendation:</th>
<th>12/10/2019</th>
<th>Time of IHAP recommendation:</th>
<th>16:41 hrs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deemed approval (post 72 hours)?</td>
<td>No</td>
<td>Meeting audio recorded:</td>
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</table>
### Independent Health Advice Panel

#### Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
</tr>
</thead>
<tbody>
<tr>
<td>IHAP referral date/time:</td>
<td>10/10/2019 17:04hrs</td>
</tr>
<tr>
<td>IHAP Meeting date:</td>
<td>12/10/2019 08:00hrs</td>
</tr>
<tr>
<td>Reconvened IHAP meeting (if required):</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**Treating Doctor’s referral received?**
- Yes

**Was the Referring Doctor’s clinical assessment performed remotely or in person?**
- Remotely

**Health Service Provider clinical summary received:**
- Yes

### Interview with Transitory Person

- [ ] The IHAP undertook an interview.
- [ ] The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- [x] The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:
**Secretariat attending:**
- s22(1)(a)(ii)

**Following IHAP document review**
- s47F

**has been diagnosed with:**
- s47F

- The panel discussed s47F and noted that:

---

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The panel agreed that.
The Panel noted that. They also noted that.
It is also noted that.
The Panel raised concerns that.
The Panel agreed that.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All six IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 
- 
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.
Actions:

- Document library reviewed: ABF Client brief – 2 pages
  1. Clinical Advisory Team (MOC) Opinion dated 02.10.2019 – 1 pages
  2. Letter from advocate – 2 pages
  3. Treating Drs referral –
     a. 
     b. 
  4. Clinical Records

Panel members assessing:

Dr Antonio Di Dio (Chair)
Dr Parbodh Gogna
Professor Brendan Murphy
Associate Professor Susan Moloney
Dr Michael Douglas
Mr Guy Coffey

IHAP Majority recommendation:

Is the Minister's refusal confirmed: Yes
Majority (out of total members): 6/7
Transfer is recommended: No

Date of IHAP recommendation: 12/10/2019
Time of IHAP recommendation: 16:41 hrs
<table>
<thead>
<tr>
<th>Deemed approval (post 72 hours)?</th>
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<tr>
<td>Meeting audio recorded:</td>
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<td><strong>IHAP Meeting date:</strong></td>
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<td><strong>Reconvened IHAP meeting (if required):</strong></td>
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</tbody>
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<thead>
<tr>
<th>Treating Doctor's referral received?</th>
<th>Yes</th>
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<tbody>
<tr>
<td>Was the Referring Doctor’s clinical assessment performed remotely or in person?</td>
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</tr>
<tr>
<td>Health Service Provider clinical summary received:</td>
<td>Yes</td>
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</tbody>
</table>

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: §22(1)(a)(ii) 
- Following IHAP document review §47F has been diagnosed with:
The Panel considered the treating doctors’ reports. The Panel discussed. The Panel agree that Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All five IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.
The Panel agree that:

- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]

**Document library reviewed:** ABF Client brief – 2 pages

2. Letter from advocate – 2 pages
3. [Redacted]
4. Treating Drs referral –
   a. [Redacted]
   b. [Redacted]
5. Clinical Records

**Panel members assessing:**

- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Professor Brendan Murphy
- Associate Professor Susan Moloney
- Mr Guy Coffey

**IHAP Majority recommendation:**

- **Is the Minister’s refusal confirmed:** Yes
- **Majority (out of total members):** 5/7
- **Transfer is recommended:** No
<table>
<thead>
<tr>
<th>Date of IHAP recommendation:</th>
<th>19/10/2019</th>
<th>Time of IHAP recommendation:</th>
<th>1830hrs</th>
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<tbody>
<tr>
<td>Deemed approval (post 72 hours)?</td>
<td>No</td>
<td>Meeting audio recorded:</td>
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</table>
## Independent Health Advice Panel

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</tr>
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<tbody>
<tr>
<td><strong>IHAP referral date/time:</strong></td>
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<tr>
<td>17/10/2019 Time: 1342 hrs</td>
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<tr>
<td><strong>IHAP Meeting date:</strong></td>
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<tr>
<td>19/10/2019 Time: 0800hrs</td>
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<td><strong>Reconvened IHAP meeting (if required):</strong></td>
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<td>N/A</td>
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</tbody>
</table>

- **Treating Doctor's referral received?** Yes
- **Was the Referring Doctor's clinical assessment performed remotely or in person?** Remotely
- **Health Service Provider clinical summary received:** Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- **Secretariat attending:** s22(1)(a)(i)
- **Following IHAP document review** s47F has been diagnosed with:
- **s47F**

---

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**Sensitive: Personal**
The Panel discussed the treating doctors’ reports and considered all other medical records and case management notes provided.

The Panel noted that... The Panel agreed that...

The Panel further noted that there... The Panel noted:

With this in mind, the Panel agreed that...

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

IHAP recommendations

All six IHAP Panel members agreed that their recommendation was for transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

The Panel agree that... They suggested that...
Document library reviewed: ABF Client brief – 2 pages

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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<tbody>
<tr>
<td>1.</td>
<td>Clinical Advisory Team (MOC) Opinion dated 9/10/2019 – 2 pages</td>
</tr>
<tr>
<td>2.</td>
<td>Letter from advocate – 2 pages</td>
</tr>
<tr>
<td>3.</td>
<td>Treating Drs referral –</td>
</tr>
<tr>
<td></td>
<td>a.</td>
</tr>
<tr>
<td></td>
<td>b.</td>
</tr>
<tr>
<td>4.</td>
<td>Clinical Records</td>
</tr>
</tbody>
</table>

Panel members assessing:

- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Professor Brendan Murphy
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Mr Guy Coffey

IHAP Majority recommendation:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the Minister’s refusal confirmed:</td>
<td>Yes</td>
</tr>
<tr>
<td>Majority (out of total members):</td>
<td>6/7</td>
</tr>
<tr>
<td>Transfer is recommended:</td>
<td>No</td>
</tr>
<tr>
<td>Date of IHAP recommendation:</td>
<td>19/10/2019</td>
</tr>
<tr>
<td>Time of IHAP recommendation:</td>
<td>1830hrs</td>
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<td>Deemed approval (post 72 hours)?</td>
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<tr>
<td>Meeting audio recorded:</td>
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# Independent Health Advice Panel

## Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
</tr>
</thead>
</table>
| **IHAP referral date/time:** | 18/10/2019  
Time: 1352 hrs |
| **IHAP Meeting date:** | 19/10/2019  
Time: 0800 hrs |
| **Reconvened IHAP meeting (if required):** | N/A |

### Treating Doctor's referral received?
- Yes

### Was the Referring Doctor’s clinical assessment performed remotely or in person?
- Remotely

### Health Service Provider clinical summary received:
- Yes

#### Interview with Transitory Person
- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

#### IHAP findings:
- Secretariat attending: [s22(1)(a)(ii)]
- Following IHAP document review has been diagnosed with:
- [s47F]
- The Panel discussed.

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**Sensitive: Personal**
The Panel agreed that Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All five IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

**Actions:**

The Panel agreed that...
Document library reviewed: ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 03.10.2019 – 2 pages
2. Letter from advocate – 2 pages
3. [Redacted]
4. Treating Drs referral –
   a. [Redacted]
   b. [Redacted]
5. Clinical Records
[Redacted]

Panel members assessing:

- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Professor Brendan Murphy
- Associate Professor Susan Moloney
- Mr Guy Coffey

IHAP Majority recommendation:

- Is the Minister’s refusal confirmed: No
- Majority (out of total members): 5/7
- Transfer is recommended: No
- Date of IHAP recommendation: 19/10/2019
- Time of IHAP recommendation: 1830hrs
- Deemed approval (post 72 hours)? No
- Meeting audio recorded: No
## Independent Health Advice Panel

### Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
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<tbody>
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<td>18/10/2019 Time: 1830hrs</td>
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<td><strong>Reconvened IHAP meeting (if required):</strong></td>
<td>N/A</td>
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</table>

**Treating Doctor's referral received?**  Yes

**Was the Referring Doctor's clinical assessment performed remotely or in person?**  Remotely

**Health Service Provider clinical summary received:**  Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: s22(1)(a)(ii)
- Following IHAP document review s47F has been diagnosed with:

---

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**Sensitive: Personal**
The Panel discussed

The Panel noted

The Panel felt that

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

IHAP recommendations

All four IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.
Actions:
The Panel agreed that.
The Panel also agreed that.

Document library reviewed: ABF Client brief – 2 pages
1. Clinical Advisory Team (MOC) Opinion dated 09.10.2019 – 2 pages
2. Letter from advocate – 2 pages
3. – 2 pages
4. Treating Drs referral –
   a.
   b.
5. Clinical Records

Panel members assessing:
Dr Antonio Di Dio (Chair)
Dr Parbodh Gogna
Associate Professor Susan Moloney
Associate Professor Neeraj Gill

IHAP Majority recommendation:
Is the Minister’s refusal confirmed: Yes
Majority (out of total members): 4/7
Transfer is recommended: No
## Date of IHAP recommendation:
19/10/2019

### Time of IHAP recommendation:
11:44am

#### Deemed approval (post 72 hours)?
No

### Meeting audio recorded:
No
## Independent Health Advice Panel

### Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
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<tbody>
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<td><strong>IHAP referral date/time:</strong></td>
<td>Treating Doctor’s referral received?</td>
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<tr>
<td>17/10/2019</td>
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<td>Time: 1346 hrs</td>
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<td><strong>IHAP Meeting date:</strong></td>
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<tr>
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<td>Time: 1830hrs</td>
<td>Health Service Provider clinical summary received:</td>
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</table>

**Reconvened IHAP meeting (if required):**
- N/A
- **Yes**

**Interview with Transitory Person**
- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**
- Secretariat attending: s22(1)(a)(i)
- Following IHAP document review s47F has been diagnosed with:
- The Panel discussed s47F
- The Panel noted s47F

This document may contain ‘personal identifiers’ and ‘personal information’ as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.
The Panel noted that Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All four IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

**Actions:**

Nil.
**Document library reviewed:**  ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 04.10.2019 – 2 pages
2. Letter from advocate – 2 pages
3. [Redacted]
4. Treating Drs referral –
   a. [Redacted]
   b. [Redacted]
5. Clinical Records

**Panel members assessing:**

- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill

**IHAP Majority recommendation:**

- **Is the Minister's refusal confirmed:** Yes
- **Majority (out of total members):** 4/7
- **Transfer is recommended:** No

<table>
<thead>
<tr>
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<th>19/10/2019</th>
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<tr>
<td>Time of IHAP recommendation:</td>
<td>11:44am</td>
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<tr>
<td>Deemed approval (post 72 hours)?</td>
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<tr>
<td>Meeting audio recorded:</td>
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Independent Health Advice Panel

Clinical Assessment

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<tr>
<td>Health Service Provider clinical summary received:</td>
<td>Yes</td>
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</tbody>
</table>

Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

IHAP findings:

Secretariat attending: \[s22(1)(a)(i)]

Following IHAP document review \[s47F\] has been diagnosed with:

The Panel noted that \[s47F\]

The Panel considered \[s47F\]

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Sensitive: Personal
The Panel noted that Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All five IHAP Panel members agreed that their recommendation was that transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

**Actions:**

The panel suggested that ...
## Document library reviewed:

ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 15.10.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

### Panel members assessing:

- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Professor Brendan Murphy
- Associate Professor Susan Moloney
- Mr Guy Coffey

### IHAP Majority recommendation:

- **Is the Minister’s refusal confirmed:** Yes
- **Majority (out of total members):** 5/7
- **Transfer is recommended:** No

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**FOI reference:** FA 20/02/01088

**Sensitive: Personal**
# Clinical Assessment

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<tr>
<td>IHAP Meeting date:</td>
<td>27/10/2019 &lt;br&gt;Time: 1600 hrs</td>
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<tr>
<td>Reconvened IHAP meeting (if required):</td>
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## Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

## IHAP findings:

<table>
<thead>
<tr>
<th>Secretariat attending:</th>
<th>$22(1)(a)(ii)$</th>
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</thead>
<tbody>
<tr>
<td>Following IHAP document review $47F$ has been diagnosed with:</td>
<td>$47F$</td>
</tr>
</tbody>
</table>
The Panel acknowledge...

The Panel notes...

The Panel agree that...

The Panel agree that...

**IHAP recommendations**

All four IHAP Panel members agreed that their recommendation was that **transfer to Australia be approved**. The Panel agreed that their recommendation was based on the following factors:

- ...
- ...
- ...

Based on the above reasons, the Panel agreed that their recommendation is to approve **transfer to Australia** for treatment.

**Actions:**

- **requires transfer to Australia**.
- **

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 17 October 2019 – 2 pages
2. Letter from advocate – 2 pages
3. **
4. Treating Drs referral –
   a. **
   b. **
5. Clinical Records **
## IHAP Majority recommendation:

<table>
<thead>
<tr>
<th>Panel members assessing:</th>
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<tbody>
<tr>
<td>Dr Antonio Di Dio (Chair)</td>
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<tr>
<td>Professor Brendan Murphy</td>
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<tr>
<td>Associate Professor Neeraj Gill</td>
<td></td>
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<tr>
<td>Mr Guy Coffey</td>
<td></td>
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<tr>
<td>Is the Minister’s refusal confirmed:</td>
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<td>Majority (out of total members):</td>
<td>4/7</td>
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<td>Transfer is recommended:</td>
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<tr>
<td>Date of IHAP recommendation:</td>
<td>28/10/2019</td>
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<td>Time of IHAP recommendation:</td>
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**Independent Health Advice Panel**

**Clinical Assessment**

<table>
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<th>Meeting details</th>
<th>Biodata details</th>
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</table>
| **IHAP referral date/time:** | 25/10/2019  
Time: 1526 hrs | s47F |
| **IHAP Meeting date:** | 27/10/2019  
Time: 1600 hrs | Treating Doctor’s referral received?  
Yes |
| **Reconvened IHAP meeting (if required):** | N/A | Was the Referring Doctor’s clinical assessment performed remotely or in person?  
Remotely |
| **Interview with Transitory Person** | | Health Service Provider clinical summary received:  
Yes |

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

Secretariat attending: s22(1)(a)(i)  
Following IHAP document review s47F has been diagnosed with: s47F
The Panel noted

• IHAP recommendations

All four IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

• The Panel is confident

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

Nil

Document library reviewed: ABF Client brief – 2 pages

2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a.
   b.
4. Clinical Records

Panel members assessing:

Dr Antonio Di Dio (Chair)
Professor Brendan Murphy
Associate Professor Neeraj Gill
Mr Guy Coffey

IHAP Majority recommendation:

Is the Minister’s refusal confirmed: Yes

Majority (out of total members): 4/7
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### Independent Health Advice Panel

#### Clinical Assessment

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</tr>
<tr>
<td><strong>Reconvened IHAP meeting (if required):</strong></td>
<td>N/A</td>
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</table>

- **Treating Doctor’s referral received?** Yes
- **Was the Referring Doctor’s clinical assessment performed remotely or in person?** Remotely
- **Health Service Provider clinical summary received:** Yes

#### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

#### IHAP findings:

- Secretariat attending: s22(1)(a)(ii)
- Following IHAP document review s47F has been diagnosed with:  

---

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The Panel noted the

IHAP recommendations
All four IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

•

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:
The Panel recommends:

Document library reviewed:
1. Clinical Advisory Team (MOC) Opinion dated 17 October 2019 – 2 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a.
   b.
4. Clinical Records

Panel members assessing:
Dr Antonio Di Dio (Chair)
Professor Brendan Murphy
| IHAP Majority recommendation: | Associate Professor Neeraj Gill  
Mr Guy Coffey |
<table>
<thead>
<tr>
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<tr>
<td>Is the Minister’s refusal confirmed:</td>
<td>Yes</td>
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<tr>
<td>Majority (out of total members):</td>
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**Sensitive: Personal**

## Independent Health Advice Panel

### Clinical Assessment

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</table>

### Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: $\PageIndex{47F}$

Following IHAP document review $\PageIndex{47F}$ has been diagnosed with: $\PageIndex{47F}$

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Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel found that

The Panel found a

It was agreed that

IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.

Actions:

• Transfer to Australia
•
•
•
• Panel to be notified once transfer has occurred.
**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 11 October 2019 – 2 pages
2. Sensitive
3. Letter from advocate Sensitive – 2 pages
4. Treating Drs referral –
   a. Sensitive
   b. Sensitive
5. Clinical Records

**Panel members assessing:**
- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Professor Brendan Murphy
- Dr Michael Douglas
- Mr Guy Coffey

**IHAP Majority recommendation:**

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
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<tbody>
<tr>
<td>Is the Minister's refusal confirmed?</td>
<td>No</td>
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<td>Majority (out of total members):</td>
<td>5/7</td>
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<td>Transfer is recommended:</td>
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<td>Date of IHAP recommendation:</td>
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<td>Time: 08:00 hrs</td>
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<tr>
<td>N/A</td>
<td>Remotely</td>
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<td><strong>Health Service Provider clinical summary received:</strong></td>
<td>Yes</td>
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**Interview with Transitory Person**

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

- Secretariat attending: [s22(1)(a)(ii)]
- Following IHAP document review [s47F] has been diagnosed with:

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of

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interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel noted that the Panel recognises. They note that. The Panel have requested notification once transfer has taken place.

IHAP recommendations

All HAP Panel members present agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- be transferred to Australia for treatment
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.

Actions:

- be transferred to Australia
- 
- 

- The Panel have requested notification once transfer has taken place.
## Document library reviewed

1. Clinical Advisory Team (MOC) Opinion dated 27 September 2019 – 1 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
   c. 
4. Clinical Records

## Panel members assessing

- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Professor Brendan Murphy
- Dr Michael Douglas
- Mr Guy Coffey

## IHAP Majority recommendation

<table>
<thead>
<tr>
<th>Is the Minister's refusal confirmed</th>
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<tbody>
<tr>
<td>Majority (out of total members)</td>
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<tr>
<td>Transfer is recommended</td>
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### Details

- Date of IHAP recommendation: 27/10/2019
- Time of IHAP recommendation: 17:30
- Deemed approval (post 72 hours)? No
- Meeting audio recorded: No

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**Sensitive: Personal**
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<td>N/A</td>
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#### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

#### IHAP findings:

- Secretariat attending: s22(1)(a)(ii)
- Following IHAP document review s47F has been diagnosed with: s47F

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Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel noted .

Treating doctors' reports were quite different in a number of findings which was of concern .

IHAP recommendations

All HAP Panel members present agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- 
- 
-
### Document library reviewed:
- ABF Client brief – 3 pages
  1. Clinical Advisory Team (MOC) Opinion dated 14/10/2019 – 2 pages
  2. Letter from advocate – 2 pages
  3. Treating Drs referral –
     a. 
     b. 
  4. Clinical Records

### Panel members assessing:
- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Professor Brendan Murphy
- Dr Michael Douglas
- Mr Guy Coffey

### IHAP Majority recommendation:
- Is the Minister’s refusal confirmed: Yes
- Majority (out of total members): 5/7
- Transfer is recommended: No
- Date of IHAP recommendation: 27/10/2019
- Time of IHAP recommendation: 17:30
- Deemed approval (post 72 hours)? No
- Meeting audio recorded: No
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<td>IHAP Meeting date:</td>
<td>27/10/2019 08:00</td>
</tr>
<tr>
<td>Reconstituted IHAP meeting (if required):</td>
<td>N/A</td>
</tr>
<tr>
<td>IHAP findings:</td>
<td></td>
</tr>
<tr>
<td>Secretariat attending:</td>
<td></td>
</tr>
<tr>
<td>Following IHAP document review has been diagnosed with:</td>
<td></td>
</tr>
</tbody>
</table>

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of...
interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel found that...

IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- ...

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- ...
  - ...
  - ...
<table>
<thead>
<tr>
<th>IHAP Majority recommendation:</th>
<th>Is the Minister's refusal confirmed:</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Majority (out of total members):</td>
<td>5/7</td>
<td></td>
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<tr>
<td>Transfer is recommended:</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Date of IHAP recommendation:</td>
<td>27/10/2019</td>
<td></td>
</tr>
<tr>
<td>Time of IHAP recommendation:</td>
<td>17:30</td>
<td></td>
</tr>
<tr>
<td>Deemed approval (post 72 hours)?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Meeting audio recorded:</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>
## Independent Health Advice Panel

### Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
</tr>
</thead>
</table>
| **IHAP referral date/time:** | 25/10/2019  
Time: 12:53 hrs |
| **IHAP Meeting date:** | 26/10/2019  
Time: 08:00 hrs  
Treating Doctor’s referral received?  
Yes |
| **Reconvened IHAP meeting (if required):** | N/A  
Was the Referring Doctor’s clinical assessment performed remotely or in person?  
Remotely  
Health Service Provider clinical summary received:  
Yes |

### Interview with Transitory Person

- [ ] The IHAP undertook an interview.
- [ ] The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

#### IHAP findings:

- Secretariat attending:
- Following IHAP document review has been diagnosed with:

---

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Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel noted that [redacted]. They also noted that [redacted].

IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that [redacted] transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- [redacted]
- [redacted]
- [redacted]

Based on the above reasons, the Panel agreed that their recommendation is to refuse [redacted] transfer to Australia for treatment.

Actions:

- [redacted]
- [redacted]
- Panel requests an update on the above within one month
## IHAP Majority recommendation:

<table>
<thead>
<tr>
<th>Panel members assessing:</th>
<th>Is the Minister's refusal confirmed:</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr Antonio Di Dio (Chair)</td>
<td>Majority (out of total members):</td>
<td>4/7</td>
</tr>
<tr>
<td>Dr Parbodh Gogna</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Professor Brendan Murphy</td>
<td></td>
<td></td>
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<tr>
<td>Associate Professor Neeraj Gill</td>
<td></td>
<td></td>
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<table>
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<th>26/10/2019</th>
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</thead>
<tbody>
<tr>
<td>Time of IHAP recommendation:</td>
<td>17:15</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Deemed approval (post 72 hours)?</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
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### Independent Health Advice Panel

#### Clinical Assessment

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| **IHAP referral date/time:** | 25/10/2019  
Time: 12:53 hrs |  |
| **IHAP Meeting date:** | 26/10/2019  
Time: 08:00 hrs | Treating Doctor’s referral received?  
Yes |
| **Reconvened IHAP meeting (if required):** | N/A | Was the Referring Doctor’s clinical assessment performed remotely or in person?  
Remotely |
| **Health Service Provider clinical summary received:** |  | Yes |

#### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

#### IHAP findings:

- Secretariat attending: [s22(1)(a)(i)]]
- Following IHAP document review [s47F] has been diagnosed with:

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.
The Panel noted that the IHAP recommendations were agreed upon by all members present. Their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.

**Actions:**

- Transfer to Australia
**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 17.10.2019 – 2 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
   c. 
4. Clinical Records

<table>
<thead>
<tr>
<th>Panel members assessing:</th>
<th>Dr Antonio Di Dio (Chair)</th>
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Independent Health Advice Panel

Clinical Assessment

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Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

IHAP findings:

Secretariat attending: §22(1)(a)(ii)

Following IHAP document review §47F has been diagnosed with:

S22(1)(a)(ii)
Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel found that

They noted that

IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

•

•

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

•

•

•

•
**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 14.10.2019 – 1 page
2. Letter from advocate – 4 pages
3. Treating Drs referral –
   a.
   b.
4. Clinical Records

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<th>Panel members assessing:</th>
<th>Dr Parbodh Gogna (Chair)</th>
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**Independent Health Advice Panel**

**Clinical Assessment**

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</table>
| IHAP referral date/time: | 23/10/2019  
                      | Time: 17:40 hrs |
| IHAP Meeting date: | 25/10/2019  
                      | Time: 18:30 hrs |
| IHAP Meeting date: | Yes  
                      | Treating Doctor’s referral received? |
| IHAP meeting (if required): | N/A  
                      | Was the Referring Doctor’s clinical assessment performed remotely or in person? |
| IHAP meeting (if required): | Yes  
                      | Health Service Provider clinical summary received: |

**Interview with Transitory Person**

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

- Secretariat attending: s22(1)(a)(ii)
- Following IHAP document review s47F has been diagnosed with: s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.
IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- 
- 
- 
- 
- Update to be provided to the Panel

Document library reviewed:

2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records
Panel members assessing:

<table>
<thead>
<tr>
<th>Dr Parbodh Gogna (Chair)</th>
</tr>
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<td>Professor Brendan Murphy</td>
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<td>Associate Professor Neeraj Gill</td>
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<td>Mr Guy Coffey (provided assessment prior to meeting)</td>
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</table>

IHAP Majority recommendation:

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<tr>
<th>Is the Minister’s refusal confirmed:</th>
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<tbody>
<tr>
<td>Majority (out of total members):</td>
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<tr>
<td>Transfer is recommended:</td>
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Date of IHAP recommendation: 26/10/2019

Time of IHAP recommendation: 12:00

Deemed approval (post 72 hours)? No

Meeting audio recorded: No
## Independent Health Advice Panel

### Clinical Assessment

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<tr>
<th>Meeting details</th>
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<tbody>
<tr>
<td><strong>IHAP referral date/time:</strong> 23/10/2019</td>
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<tr>
<td><strong>IHAP Meeting date:</strong> 25/10/2019</td>
<td>Treating Doctor’s referral received? Yes</td>
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<tr>
<td>Time: 18:30 hrs</td>
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</tr>
<tr>
<td><strong>Reconvened IHAP meeting (if required):</strong> N/A</td>
<td>Was the Referring Doctor’s clinical assessment performed remotely or in person? Remotely</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Health Service Provider clinical summary received:</strong> Yes</td>
<td></td>
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</table>

### Interview with Transitory Person
- □ The IHAP undertook an interview.
- □ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:
- Secretariat attending: s22(1)(a)(ii)
- Following IHAP document review s47F has been diagnosed with: s47F

---

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Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

**Actions:**

- 
- 
- 
- 
- 

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 15.10.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records
<table>
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<th>Is the Minister’s refusal confirmed:</th>
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<tbody>
<tr>
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<td>Majority (out of total members):</td>
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<td>Transfer is recommended:</td>
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## Clinical Assessment

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<td>Treating Doctor’s referral received?</td>
</tr>
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<td>Health Service Provider clinical summary received:</td>
</tr>
</tbody>
</table>

### Meeting details

| IHAP referral date/time: | 23/10/2019  
Time: 17:40 hrs |
|-------------------------|
| IHAP Meeting date:      | 25/10/2019  
Time: 18:30 hrs |
| Reconvened IHAP meeting (if required): | N/A |

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: s22(1)(b)(i)
- Following IHAP document review s47F has been diagnosed with:

---

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The Panel noted that.

The Panel discussed.

**IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- 
- 
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.

**Actions:**

- 
- 

Released by Department of Home Affairs under the Freedom of Information Act 1982.
Document library reviewed: ABF Client brief – 3 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
   c. 
4. Clinical Records

Panel members assessing:
Dr Parbodh Gogna (Chair)
Professor Brendan Murphy
Associate Professor Neeraj Gill
Mr Guy Coffey (provided assessment prior to meeting)

IHAP Majority recommendation:
Is the Minister’s refusal confirmed: No
Majority (out of total members): 4/7
Transfer is recommended: Yes

Date of IHAP recommendation: 26/10/2019
Time of IHAP recommendation: 12:00
Deemed approval (post 72 hours)? No
Meeting audio recorded: No
Independent Health Advice Panel

Clinical Assessment

<table>
<thead>
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| **IHAP referral date/time:** | 25/10/2019  
Time: 12:53 hrs |
| **IHAP Meeting date:** | 26/10/2019  
Time: 08:00 hrs |
| **Reconvened IHAP meeting (if required):** | N/A |
| **Treating Doctor's referral received?** | Yes |
| **Was the Referring Doctor’s clinical assessment performed remotely or in person?** | Remotely |
| **Health Service Provider clinical summary received:** | Yes |

Interview with Transitory Person

- [ ] The IHAP undertook an interview.
- [ ] The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

IHAP findings:

Secretariat attending:

Following IHAP document review has been diagnosed with:
Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel noted that...  

The Panel considered...  

IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- The Panel found that...
-...
-...

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- ...
- ...

Sensitive: Personal
**Document library reviewed:** ABF Client brief – 4 pages

2. Email from MOC
3. Letter from advocate – 2 pages
4. Treating Drs referral –
   a. 
   b. 
   c. 
5. Clinical Records

**Panel members assessing:**
- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Professor Brendan Murphy
- Associate Professor Neeraj Gill

**IHAP Majority recommendation:**
- **Is the Minister’s refusal confirmed:** Yes
- **Majority (out of total members):** x/x
- **Transfer is recommended:** No

**Date of IHAP recommendation:** 26/10/2019
**Time of IHAP recommendation:** 17:15

**Deemed approval (post 72 hours)?** No
**Meeting audio recorded:** No
### Clinical Assessment

<table>
<thead>
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Time: 12:53 hrs |
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Time: 08:00 hrs |
| **Reconvened IHAP meeting (if required):** | N/A |

#### Treating Doctor’s referral received?
- Yes

#### Was the Referring Doctor’s clinical assessment performed remotely or in person?
- Remotely

#### Health Service Provider clinical summary received:
- Yes

### Interview with Transitory Person
- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:
- Secretariat attending:
- Following IHAP document review has been diagnosed with:

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.
IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

-
-
- Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- Updated provided to the Panel

Document library reviewed: ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 10/10/2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral – a.
   b.
4. Clinical Records

Panel members assessing:

Dr Antonio Di Dio (Chair)
Dr Parbodh Gogna
Professor Brendan Murphy
Associate Professor Neeraj Gill

IHAP Majority recommendation:

Is the Minister’s refusal confirmed: Yes

Majority (out of total members): 4/7

Transfer is recommended: No
<table>
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<td>Meeting audio recorded:</td>
<td>YNo</td>
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### Clinical Assessment

#### Meeting details

| IHAP referral date/time: | 31/10/2019  
| Time: 15:04 hrs |  

| IHAP Meeting date: | 1/11/2019  
| Time: 18:00 hrs |  

| Reconvened IHAP meeting (if required): | N/A |  

#### Biodata details

| Treating Doctor's referral received? | Yes |  
|Was the Referring Doctor’s clinical assessment performed remotely or in person? | Remotely |  
|Health Service Provider clinical summary received: | No |  

#### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

#### IHAP findings:

- Secretariat attending: §22(1)(a)(ii) and §22(1)(a)(ii)
- Following IHAP document review, §47F has been diagnosed with: §47F
The Panel noted that.

It is noted that.

The Panel agree that.

The Panel determined that.

•

•

The Panel are satisfied that.

IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

•

•

Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.
### Actions:
- Transfer to Australia
- Panel to be notified once transfer has occurred.

### Document library reviewed:
- ABF Client brief – 2 pages
  1. Clinical Advisory Team (MOC) Opinion dated 22/10/2019 – 1 page
  2. Letter from advocate – 2 pages
  3. Treating Drs referral –
     a. 
     b. 
  4. Clinical Records
  5. Clinical Records provided on 2 November

### Panel members assessing:
- Dr Antonio Di Dio (Chair)
- Associate Professor Neeraj Gill
- Associate Professor Michael Douglas
- Mr Guy Coffey

### IHAP Majority recommendation:
- Is the Minister’s refusal confirmed: No
- Majority (out of total members): 4/7
- Transfer is recommended: Yes
- Date of IHAP recommendation: 3/11/2019
- Time of IHAP recommendation: 0800hrs
- Deemed approval (post 72 hours)? No
- Meeting audio recorded: No

---

Sensitive: Personal
Independent Health Advice Panel

Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
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| **IHAP referral date/time:** | 31/10/2019  
Time: 15:04 hrs | $47F |
| **IHAP Meeting date:** | 1/11/2019  
Time: 18:00 hrs  
Treating Doctor’s referral received? | Yes |
| **Reconvened IHAP meeting (if required):** | N/A  
Was the Referring Doctor’s clinical assessment performed remotely or in person? | Remotely |
| **Interview with Transitory Person** |  |
| ☐ The IHAP undertook an interview. |  |
| ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier. |  |
| ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person. |  |
| **IHAP findings:** |  |
| Secretariat attending: $22(1)(a)(ii)$ and $22(1)(a)(ii)$  
Following IHAP document review $47F$ has been diagnosed with: |  |

This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.

Sensitive: Personal
The Panel noted that the members agree that. They agree that...

The Panel identified that.

The Panel agreed that.

IHAP recommendations

All IHAP Panel members agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- ...
- ...
- ...

Based on the above reason, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.

Actions:

- Transfer to Australia
- ...
- ...
- Panel to be notified once transfer has occurred.
Document library reviewed: ABF Client brief – 2 pages

   a. Clinical Advisory Team (MOC) Opinion Addendum dated 17.10.2019 – 1 pages

2. Letter from advocate – 2 pages

3. Treating Drs referral –
   a. 
   b. 

4. Clinical Records
   

Panel members assessing:

Dr Antonio Di Dio (Chair)
Associate Professor Neeraj Gill
Associate Professor Michael Douglas
Mr Guy Coffey

IHAP Majority recommendation:

Is the Minister’s refusal confirmed: No

Majority (out of total members): 4/7

Transfer is recommended: Yes

Date of IHAP recommendation: 3/11/2019

Time of IHAP recommendation: 0700hrs

Deemed approval (post 72 hours)? No

Meeting audio recorded: No
## Independent Health Advice Panel

### Clinical Assessment

<table>
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| **IHAP referral date/time:** | 04/11/2019  
Time: 17:55 hrs |  |
| **IHAP Meeting date:** | 05/11/2019  
Time: 17:00 hrs |  |
| **Reconvened IHAP meeting (if required):** | N/A |  |

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<table>
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<tr>
<th>Health Service Provider clinical summary received:</th>
<th>Yes</th>
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</table>

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- **Secretariat attending:**
- **Following IHAP document review** has been diagnosed with:

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

---

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**Sensitive: Personal**
The Panel noted that...

The Panel disagreed with this.

IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

• The Panel note that...

Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.

Actions:

• Transfer to Australia

• The Panel to be notified once transferred.

Document library reviewed: ABF Client brief – 2 pages


2. Letter from advocate – 2 pages

3. Treating Drs referral –
   a.
   b.
   c.

4. Clinical Records

Panel members assessing: Dr Antonio Di Dio (Chair) Dr Parbodh Gogna
<table>
<thead>
<tr>
<th>IHAP Majority recommendation:</th>
<th>Is the Minister’s refusal confirmed:</th>
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<tbody>
<tr>
<td></td>
<td>Majority (out of total members):</td>
<td>4/7</td>
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<td>Transfer is recommended:</td>
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## Independent Health Advice Panel

### Clinical Assessment

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| **IHAP referral date/time:** | 04/11/2019  
Time: 1755 hrs |
| **IHAP Meeting date:** | 05/11/2019  
Time: 1700 hrs |
| **Reconvened IHAP meeting (if required):** | N/A |
| **Treating Doctor’s referral received?** | Yes |
| **Was the Referring Doctor’s clinical assessment performed remotely or in person?** | Remotely |
| **Health Service Provider clinical summary received:** | Yes |

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending:

Following IHAP document review has been diagnosed with:
Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel noted that all IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

**IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

**Actions:**

- 

- The Panel will undertake a review of in one month.

**Document library reviewed:** ABF Client brief – 2 pages

- a) Clinical Advisory Team (MOC) Opinion dated 04.10.2019 – 2 pages
- b) Letter from advocate – 2 pages
- c) Treating Drs referral –
  - a. 
  - b. 
- d) Clinical Records

**Panel members assessing:**

Dr Antonio Di Dio (Chair)
Dr Parbodh Gogna
Professor Brendan Murphy
<table>
<thead>
<tr>
<th>Associate Professor Neeraj Gill</th>
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<td><strong>Is the Minister’s refusal confirmed:</strong></td>
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<td><strong>Majority (out of total members):</strong></td>
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<td><strong>Transfer is recommended:</strong></td>
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<td><strong>Date of IHAP recommendation:</strong></td>
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<tr>
<td><strong>Time of IHAP recommendation:</strong></td>
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<td><strong>Deemed approval (post 72 hours)?</strong></td>
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<td><strong>Meeting audio recorded:</strong></td>
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### Independent Health Advice Panel

#### Clinical Assessment

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</table>

| Health Service Provider clinical summary received: | |
|-----------------------------------------------------||
|                                                      | Yes |

#### Interview with Transitory Person

- [ ] The IHAP undertook an interview.
- [ ] The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

#### IHAP findings:

- Secretariat attending: 422(1)(a)(ii)
- Following IHAP document review 547F has been diagnosed with:

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel agree with the opinion expressed by the Medical Officer of the Commonwealth and believe that...

---

This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.

**Sensitive: Personal**
The Panel were unsure of [Redacted] and sought clarification in order to assist in the recommendation.

Following receipt of this advice, the Panel agreed that [Redacted] will need to be transferred to Australia now.

IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that [Redacted] transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- [Redacted]

Based on the above reasons, the Panel agreed that their recommendation is to approve [Redacted] transfer to Australia for treatment.

Actions:

- [Redacted] to be transferred to Australia.
- [Redacted]
- The Panel to be notified when [Redacted] is transferred.

Document library reviewed: ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 24.10.2019 – 1 page
2. Letter from advocate [Redacted] – 2 pages
3. Treating Drs referral –
   a. [Redacted]
   b. [Redacted]
4. Clinical Records [Redacted]

Panel members assessing:

- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Professor Brendan Murphy
- Associate Professor Neeraj Gill

IHAP Majority recommendation:

- Is the Minister’s refusal confirmed: No
- Majority (out of total members): 4/7
<p>| | |</p>
<table>
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<tr>
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### Independent Health Advice Panel

#### Clinical Assessment

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<tr>
<td></td>
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</table>

#### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

#### IHAP findings:

- Secretariat attending: s22(1)(a)(ii)
- s22(1)(a)(ii)
- s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

---

This document may contain ‘personal identifiers’ and ‘personal information’ as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.
The panel noted that [redacted].

It was noted that [redacted].

The panel advised that [redacted].

It was noted that [redacted].

The panel noted that [redacted]. It was also noted that [redacted].

[redacted]

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- [redacted]
- [redacted]
- [redacted]

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.
Actions:

- 
- 
- 

Document library reviewed: ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 22.10.2019 – 2 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

Panel members assessing:

Dr Antonio Di Dio (Chair)
Dr Parbodh Gogna
Associate Professor Susan Moloney
Associate Professor Neeraj Gill
Mr Guy Coffey

IHAP Majority recommendation:

Is the Minister’s refusal confirmed: Yes
Majority (out of total members): 5/7
Transfer is recommended: No
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## Independent Health Advice Panel

### Clinical Assessment

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<td><strong>Health Service Provider clinical summary received:</strong></td>
<td><strong>I</strong></td>
</tr>
<tr>
<td>Yes</td>
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### Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: $22(1)(a)(ii)$

Following IHAP document review $47F$ has been diagnosed with: $47F$
Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

**Actions:**

- 

Released by Department of Home Affairs under the Freedom of Information Act 1982
**Document library reviewed:** ABF Client brief – 2 pages

2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

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<tr>
<th>Panel members assessing:</th>
<th>Dr Antonio Di Dio (Chair)</th>
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<tbody>
<tr>
<td></td>
<td>Dr Parbodh Gogna</td>
</tr>
<tr>
<td></td>
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<td>Mr Guy Coffey</td>
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<tr>
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<tr>
<td>Deemed approval (post 72 hours)? No</td>
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Independent Health Advice Panel

Clinical Assessment

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</table>

Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

IHAP findings:

- Secretariat attending: [Redacted]
- Following IHAP document review [Redacted] has been diagnosed with: [Redacted]

This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.
Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The panel noted that...

The panel noted that...

The panel also noted that...

**IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that **transfer to Australia be refused**. The Panel agreed that their recommendation was based on the following factors:

- ...
- ...

Based on the above reasons, the Panel agreed that their recommendation is to refuse **transfer to Australia for treatment**.

**Actions:**

- ...
**Document library reviewed:** ABF Client brief – 3 pages

2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

**Panel members assessing:**
- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Mr Guy Coffey

**IHAP Majority recommendation:**
- Is the Minister’s refusal confirmed: Yes
- **Majority (out of total members):** 5/7
- Transfer is recommended: No

**Date of IHAP recommendation:** 9/11/2019
**Time of IHAP recommendation:** 10:09 hrs

**Deemed approval (post 72 hours)?** No
**Meeting audio recorded:** No
## Independent Health Advice Panel

### Clinical Assessment

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### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: s22(1)(a)(ii)
- Following IHAP document review s47F has been diagnosed with: s47F

---

This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.
The panel noted that...

The panel also noted that...

The panel noted that...

The panel noted that...

It was also noted that...

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

IHAP recommendations

All IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- 
- 
-
### Document library reviewed:
ABF Client brief – 3 pages
2. Letter from advocate – 3 pages
3. Treating Drs referral –
   a.
   b.
4. Clinical Records

### Panel members assessing:
- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Associate Professor Susan Moloney
- Dr Michael Douglas
- Mr Guy Coffey

### IHAP Majority recommendation:
- **Is the Minister’s refusal confirmed:** Yes
- **Majority** (out of total members): 5/7
- **Transfer is recommended:** No

### Date of IHAP recommendation:
- 9/11/2019

### Time of IHAP recommendation:
- 15:54 hrs

### Deemed approval (post 72 hours)?
- No

### Meeting audio recorded:
- No
### Clinical Assessment

#### Meeting details

| IHAP referral date/time: | 7/11/2019  
| Time: 1000 hrs |

| IHAP Meeting date: | 9/11/2019  
| Time: 0800 hrs |

| Reconvened IHAP meeting (if required): | N/A |

#### Biodata details

| Treating Doctor’s referral received? | Yes |

| Was the Referring Doctor’s clinical assessment performed remotely or in person? | Remotely |

| Health Service Provider clinical summary received: | Yes |

#### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

#### IHAP findings:

- Secretariat attending: s22(1)(a)(ii)

- Following IHAP document review s47F has been diagnosed with:

---

This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.
The panel noted that the panel discussed and they noted that the panel noted that.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.
Actions:

- Document library reviewed: ABF Client brief – 3 pages
  1. Clinical Advisory Team (MOC) Opinion dated 29.10.2019 – 1 page
  2. Letter from advocate – 2 pages
  3. Treating Drs referral –
     a.
     b.
     c.
     d.
  4. Clinical Records

Panel members assessing:

Dr Antonio Di Dio (Chair)
Dr Parbodh Gogna
Associate Professor Susan Moloney
Dr Michael Douglas
Mr Guy Coffey
<table>
<thead>
<tr>
<th>IHAP Majority recommendation:</th>
<th>Is the Minister’s refusal confirmed:</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Majority (out of total members):</td>
<td>5/7</td>
<td></td>
</tr>
<tr>
<td>Transfer is recommended:</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Date of IHAP recommendation:</td>
<td>9/11/2019</td>
<td></td>
</tr>
<tr>
<td>Time of IHAP recommendation:</td>
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<td>Deemed approval (post 72 hours)?</td>
<td>No</td>
<td></td>
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<tr>
<td>Meeting audio recorded:</td>
<td>No</td>
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</table>
### Independent Health Advice Panel

#### Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
</tr>
</thead>
</table>
| IHAP referral date/time: | 07/11/2019  
    Time: 10:00 hrs | |
| IHAP Meeting date: | 9/11/2019  
    Time: 08:00 hrs | Treating Doctor’s referral received?  
    Yes |
| Reconvened IHAP meeting (if required): | N/A | Was the Referring Doctor’s clinical assessment performed remotely or in person?  
    Remotely |

#### Interview with Transitory Person
- ☝️ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☐ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

#### IHAP findings:
- Secretariat attending: s22(1)(a)(ii)
- Following IHAP document review s47F has been diagnosed with:  

---

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The panel noted that the individual has had no encounters with IHMS since May 2018 until August 2019 even though he was still in the community.

The panel noted that... The panel requested that...

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

**Actions:**

- 
- 

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under the Freedom of Information Act 1982

Sensitive: Personal
### Panel members assessing:

- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Dr Michael Douglas
- Mr Guy Coffey

### IHAP Majority recommendation:

<table>
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<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the Minister’s refusal confirmed?</td>
<td>Yes</td>
</tr>
<tr>
<td>Majority (out of total members):</td>
<td>5/7</td>
</tr>
<tr>
<td>Transfer is recommended?</td>
<td>No</td>
</tr>
</tbody>
</table>

| Date of IHAP recommendation: | 9/11/2019 |
| Time of IHAP recommendation: | 15:54 hrs |
| Deemed approval (post 72 hours)? | No       |
| Meeting audio recorded:     | No       |
## Independent Health Advice Panel

### Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
</tr>
</thead>
</table>
| **IHAP referral date/time:** | 07/11/2019  
Time: 10:00 hrs | |
| **IHAP Meeting date:** | 9/11/2019  
Time: 0800 hrs | |
| **Reconvened IHAP meeting (if required):** | N/A | |
| **Treating Doctor’s referral received?** | Yes | |
| **Was the Referring Doctor’s clinical assessment performed remotely or in person?** | Remotely | |
| **Health Service Provider clinical summary received:** | Yes | |

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending:
- Following IHAP document review has been diagnosed with:

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of...
interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel notes that

The Panel notes that

The Panel notes that

The Panel acknowledged that

The Panel raised concerns that

IHAP recommendations

All IHAP Panel members agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- 

- 

- 

Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.

Actions:

- to be transferred to Australia

- 

- The Panel to be notified once transferred
Document library reviewed: ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 26.10.2019 – 1 pages
2. Letter from advocate – 3 pages
3. Treating Drs referral –
   a.
   b.
   c.
   d.
4. Clinical Records

Panel members assessing:
Dr Antonio Di Dio (Chair)
Dr Parbodh Gogna
Associate Professor Susan Moloney
Associate Professor Neeraj Gill
Associate Professor Michael Douglas
Mr Guy Coffey

IHAP Majority recommendation:

<table>
<thead>
<tr>
<th>Is the Minister’s refusal confirmed:</th>
<th>No</th>
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<tbody>
<tr>
<td>Majority (out of total members):</td>
<td>6/7</td>
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<td>Transfer is recommended:</td>
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</table>

Date of IHAP recommendation: 9/11/2019

<table>
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Deemed approval (post 72 hours)?

<table>
<thead>
<tr>
<th>No</th>
</tr>
</thead>
</table>

Meeting audio recorded:

<table>
<thead>
<tr>
<th>No</th>
</tr>
</thead>
</table>
## Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
</tr>
</thead>
</table>
| IHAP referral date/time: | 07/11/2019  
Time: 10:00 hrs |
| IHAP Meeting date: | 09/11/2019  
Time: 0800 hrs |
| Reconvened IHAP meeting (if required): | N/A |
| Treating Doctor’s referral received? | Yes |
| Was the Referring Doctor’s clinical assessment performed remotely or in person? | Remotely |
| Health Service Provider clinical summary received: | Yes |

### Interview with Transitory Person

- **☐** The IHAP undertook an interview.
- **☐** The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- **☒** The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Secretariat attending:**

Following IHAP document review has been diagnosed with:

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of

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**Sensitive: Personal**
interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel notes that

The Panel acknowledged that

The Panel further noted that

**IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that transfer to Australia be **refused**.

The Panel agreed that their recommendation was based on the following factors:

- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

**Actions:**

- 
- 
- 
- 

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**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 22.10.2019 – 2 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral – a. b. 
4. Clinical Records

**Panel members assessing:**

- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Associate Professor Michael Douglas
- Mr Guy Coffey

**IHAP Majority recommendation:**

| Is the Minister’s refusal confirmed: | Yes |
| Majority (out of total members): | 6/7 |
| Transfer is recommended: | No |

**Date of IHAP recommendation:** 9/11/2019

**Time of IHAP recommendation:** 2020hrs

**Deemed approval (post 72 hours)?** No

**Meeting audio recorded:** No
# Independent Health Advice Panel

## Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
</tr>
</thead>
</table>
| **IHAP referral date/time:** | 07/11/2019  
Time: 10:00 hrs | |
| **IHAP Meeting date:** | 9/11/2019  
Time: 0800 hrs | **Treating Doctor’s referral received?:** Yes |
| **Reconvened IHAP meeting (if required):** | N/A | **Was the Referring Doctor’s clinical assessment performed remotely or in person?:** Remotely |
| | | **Health Service Provider clinical summary received:** Yes |

### Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending:

Following IHAP document review has been diagnosed with:

---

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**Sensitive: Personal**
Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel found the Panel are concerned the Panel are concerned

The Panel agreed that

IHAP recommendations

All IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- 
-
## Document library reviewed:
- ABF Client brief – 2 pages
  1. Clinical Advisory Team (MOC) Opinion dated 15.10.2019 – 2 pages
  2. Letter from advocate – 2 pages
  3. Treating Drs referral –
     a. 
     b. 
  4. Clinical Records

## Panel members assessing:
- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Associate Professor Michael Douglas
- Mr Guy Coffey

<table>
<thead>
<tr>
<th>IHAP Majority recommendation:</th>
<th>Is the Minister’s refusal confirmed:</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Majority</strong> (out of total members):</td>
<td>6/7</td>
<td></td>
</tr>
<tr>
<td><strong>Transfer is recommended:</strong></td>
<td>No</td>
<td></td>
</tr>
<tr>
<td><strong>Date of IHAP recommendation:</strong></td>
<td>9/11/2019</td>
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<td><strong>Time of IHAP recommendation:</strong></td>
<td>2020hrs</td>
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<tr>
<td><strong>Deemed approval (post 72 hours)?</strong></td>
<td>No</td>
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</tr>
<tr>
<td><strong>Meeting audio recorded:</strong></td>
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</table>
### Independent Health Advice Panel

#### Clinical Assessment

<table>
<thead>
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<th>Meeting details</th>
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</tr>
</thead>
<tbody>
<tr>
<td>IHAP referral date/time:</td>
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<tr>
<td>07/11/2019</td>
<td>Time: 10:00 hrs</td>
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<td></td>
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</tr>
<tr>
<td>IHAP Meeting date:</td>
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</tr>
<tr>
<td>9/11/2019</td>
<td>Time: 0800 hrs</td>
</tr>
<tr>
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<td>Treating Doctor's referral received?</td>
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<tr>
<td></td>
<td>Yes</td>
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<tr>
<td>Reconvened IHAP meeting</td>
<td></td>
</tr>
<tr>
<td>N/A</td>
<td>Was the Referring Doctor’s clinical</td>
</tr>
<tr>
<td>(if required):</td>
<td>assessment performed remotely or in</td>
</tr>
<tr>
<td></td>
<td>person?</td>
</tr>
<tr>
<td></td>
<td>Remotely</td>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Health Service Provider clinical</td>
</tr>
<tr>
<td></td>
<td>summary received:</td>
</tr>
<tr>
<td></td>
<td>Yes</td>
</tr>
</tbody>
</table>

#### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

#### IHAP findings:

Secretariat attending:

Following IHAP document review has been diagnosed with:

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interests.

---

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**Sensitive: Personal**
interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel noted that

The Panel expressed concern that

The Panel noted that

The Panel noted that

The Panel acknowledged that. The Panel were concerned that

IHAP recommendations

All IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- 
- 

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### Document library reviewed:

2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
   c. 
4. Clinical Records

### Panel members assessing:

- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Associate Professor Michael Douglas
- Mr Guy Coffey

### IHAP Majority recommendation:

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the Minister's refusal confirmed:</td>
<td></td>
</tr>
<tr>
<td>Majority (out of total members):</td>
<td>6/7</td>
</tr>
<tr>
<td>Transfer is recommended:</td>
<td>No</td>
</tr>
</tbody>
</table>

| Date of IHAP recommendation: | 9/11/2019 |
| Time of IHAP recommendation: | 2020hrs   |

| Deemed approval (post 72 hours)? | No |
| Meeting audio recorded:          | No |
### Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
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<tbody>
<tr>
<td><strong>IHAP referral date/time:</strong></td>
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<tr>
<td>8/11/2019</td>
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<td>Time: 17:45 hrs</td>
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<td>9/11/2019</td>
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<td>Time: 16:00hrs</td>
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<td><strong>Reconvened IHAP meeting (if required):</strong></td>
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</tr>
<tr>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td><strong>Treating Doctor’s referral received?</strong></td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Was the Referring Doctor’s clinical assessment performed remotely or in person?</strong></td>
<td>Remotely</td>
</tr>
<tr>
<td><strong>Health Service Provider clinical summary received:</strong></td>
<td>Yes</td>
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</tbody>
</table>

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

- Secretariat attending: [s22(1)(a)(ii)]
- The Panel noted [s47F]
- The Panel noted [s47F]
- The Panel agreed that [s47F]
- Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

---

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IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- 
- 
- 
- 

The Panel request a report on condition within two weeks

Document library reviewed: ABF Client brief – 2 pages

2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

Panel members assessing:

Dr Antonio Di Dio (Chair)
Dr Parbodh Gogna
Professor Brendan Murphy
Dr Michael Douglas  
Mr Guy Coffey

<table>
<thead>
<tr>
<th>IHAP Majority recommendation:</th>
<th>Is the Minister's refusal confirmed:</th>
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<tbody>
<tr>
<td></td>
<td>Majority (out of total members):</td>
<td>5/7</td>
</tr>
<tr>
<td></td>
<td>Transfer is recommended:</td>
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<tr>
<td>Date of IHAP recommendation:</td>
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<tr>
<td>Deemed approval (post 72 hours)?</td>
<td>Meeting audio recorded:</td>
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</table>
**Independent Health Advice Panel**

**Clinical Assessment**

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<tr>
<td>Treating Doctor's referral received?</td>
<td>Yes</td>
</tr>
<tr>
<td>Reconstituted IHAP meeting (if required):</td>
<td>N/A</td>
</tr>
<tr>
<td>Was the Referring Doctor’s clinical assessment performed remotely or in person?</td>
<td>Remotely</td>
</tr>
<tr>
<td>Health Service Provider clinical summary received:</td>
<td>No</td>
</tr>
</tbody>
</table>

**Interview with Transitory Person**

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings**

The Panel noted that Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

- [s22(1)(a)(ii)]
- [s47F]
- [s47F]
- [s47F]

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IHAP recommendations

All IHAP Panel members agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.

Actions:

- Transfer to Australia
- 
- 

Document library reviewed: ABF Client brief – 3 pages

2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

Panel members assessing:

Dr Antonio Di Dio (Chair)
Dr Parbodh Gogna
Professor Brendan Murphy
Dr Michael Douglas

Sensitive: Personal
<table>
<thead>
<tr>
<th>Mr Guy Coffey</th>
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<th>IHAP Majority recommendation:</th>
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<tbody>
<tr>
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<td>No</td>
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<td>Majority (out of total members):</td>
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<td>Transfer is recommended:</td>
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### Independent Health Advice Panel

#### Clinical Assessment

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<tr>
<td>Time: 17:45 hrs</td>
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<td>Health Service Provider clinical summary...</td>
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**Interview with Transitory Person**

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

- Secretariat attending: [s22(1)(a)(i)](ii) and [s22(1)(a)(ii)](ii) the Panel agree.
- The Panel notes [s47F](ii).
- The Panel agree that [s47F](ii).

---

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**IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that the transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- [Redacted]

Based on the above reasons, the Panel agreed that their recommendation is to approve the transfer to Australia for treatment.

**Actions:**

- Transfer to Australia
- The Panel to be notified once transferred.

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 29/10/2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. [Redacted]
   b. [Redacted]
4. Clinical Records

**Panel members assessing:**

- Antonio Di Dio
- Professor Brendan Murphy
- Associate Professor Susan Moloney (Meeting Chair)
- Associate Professor Michael Douglas
- Mr Guy Coffey

**IHAP Majority recommendation:**

- Is the Minister's refusal confirmed: No
- Majority (out of total members): 5/7
- Transfer is recommended: Yes

**Date of IHAP recommendation:** 10/11/2019

**Time of IHAP recommendation:** 2239hrs

**Deemed approval (post 72 hours)?** No

**Meeting audio recorded:** No
## Independent Health Advice Panel

### Clinical Assessment

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Time: 17:45 hrs | [s47F] |
| **IHAP Meeting date:** | 10/11/2019  
Time: 17:00hrs | Treating Doctor’s referral received?  
Yes |
| **Reconvened IHAP meeting (if required):** | N/A | Was the Referring Doctor’s clinical assessment performed remotely or in person?  
Remotely |

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending [s22(1)(a)(ii)] and [s22(1)(a)(ii)]
- The Panel note [s47F] and also acknowledge [s47F]
- The Panel note that [s47F] and note [s47F]
- The Panel recommend that [s47F]
- The Panel note [s47F]
IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- 
- 
- 
- 

Document library reviewed: ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 6.11.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

Panel members assessing:

Dr Antonio Di Dio
Professor Brendan Murphy
Associate Professor Susan Moloney (Meeting Chair)
Associate Professor Michael Douglas
Mr Guy Coffey

IHAP Majority recommendation:

Is the Minister’s refusal confirmed: Yes
Majority (out of total members): 5/7
Transfer is recommended: No
## Date of IHAP recommendation:

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### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: s22(1)(a)(ii) and s22(1)(a)(i)
- The Panel note s47F.
- The Panel note s47F. The Panel note s47F.

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**IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- [Reason 1]
- [Reason 2]

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

**Actions:**

- [Action 1]
- [Action 2]
- [Action 3]

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 6.11.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral –  
   a.  
   b.  
   c.  
   d.  
4. Clinical Records

**Panel members assessing:**

- Dr Antonio Di Dio
- Professor Brendan Murphy
- Associate Professor Susan Moloney (Meeting Chair)
- Associate Professor Michael Douglas
- Mr Guy Coffey

**IHAP Majority recommendation:**

- Is the Minister’s refusal confirmed: Yes
- Majority (out of total members): 5/7
- Transfer is recommended: No
- Date of IHAP recommendation: 10/11/2019
- Time of IHAP recommendation: 2239hrs
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**Clinical Assessment**

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### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: [s22(1)(a)(ii)] and [s22(1)(a)(ii)]
- The Panel agree that [s47F]. They note [s47F].
- The Panel agree that [s47F].
- The Panel note that [s47F].

---

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**Sensitive: Personal**
### IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

### Actions:

- 

### Document library reviewed:

- ABF Client brief – 3 pages
- 1. Clinical Advisory Team (MOC) Opinion dated 01.11.2019 – 2 pages
- 2. Letter from advocate – 2 pages
- 3. Treating Drs referral –
  - a. 
  - b. 
- 4. Clinical Records

### Panel members assessing:

- Dr Antonio Di Dio
- Professor Brendan Murphy
- Associate Professor Susan Moloney (Meeting Chair)
- Associate Professor Michael Douglas
- Mr Guy Coffey

### IHAP Majority recommendation:

- **Is the Minister’s refusal confirmed:** Yes
- **Majority (out of total members):** 5/7
- **Transfer is recommended:** No

### Date of IHAP recommendation:

- 10/11/2019
- **Time of IHAP recommendation:** 2239hrs

### Deemed approval (post 72 hours)?

- No
- **Meeting audio recorded:** No
## Independent Health Advice Panel

### Clinical Assessment

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<tr>
<th>Meeting details</th>
<th>Biodata details</th>
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| IHAP referral date/time: | 8/11/2019  
Time: 17:45 hrs | |
| IHAP Meeting date: | 9/11/2019  
Time: 16:00hrs | Treating Doctor’s referral received? |
| Reconvened IHAP meeting (if required): | N/A | Was the Referring Doctor’s clinical assessment performed remotely or in person?  
Remotely |
| Health Service Provider clinical summary received: | Yes |

**Interview with Transitory Person**

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: s22(1)(a)(ii)
- The Panel noted that s47F
- The Panel noted that s47F
- The Panel agreed that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

---

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**Sensitive: Personal**
IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- 
- 

Document library reviewed: ABF Client brief – 4 pages

1. Clinical Advisory Team (MOC) Opinion dated 28/10/2019 – 2 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
   c. 
   d. 
4. Clinical Records

Released by Department of Home Affairs under the Freedom of Information Act 1982
| Panel members assessing:                        | Dr Antonio Di Dio (Chair) |
|                                                | Dr Parbodh Gogna         |
|                                                | Professor Brendan Murphy |
|                                                | Dr Michael Douglas       |
|                                                | Mr Guy Coffey            |

## IHAP Majority recommendation:

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<tr>
<th>Is the Minister's refusal confirmed:</th>
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<tr>
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<td>5/7</td>
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<tr>
<td>Transfer is recommended:</td>
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| Date of IHAP recommendation:        | 10/11/2019 |
| Time of IHAP recommendation:        | 13:56      |
| Deemed approval (post 72 hours)?    | No         |
| Meeting audio recorded:             | No         |
## Independent Health Advice Panel

### Clinical Assessment

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| **IHAP referral date/time:** | 8/11/2019  
Time: 17:45 hrs |
| **IHAP Meeting date:** | 9/11/2019  
Time: 16:00hrs |
| **Reconvened IHAP meeting (if required):** | N/A |
| **Treating Doctor’s referral received?** | Yes |
| **Was the Referring Doctor’s clinical assessment performed remotely or in person?** | Remotely |
| **Health Service Provider clinical summary received:** | Yes |

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: ☒

Following IHAP document review ☒ has been diagnosed with: ☒

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel noted that ☒.  
It was noted that ☒.
It was noted that, the Panel has concerns, the Panel recommended.

IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- 
- 

Released by Department of Home Affairs under the Freedom of Information Act 1982
Document library reviewed: ABF Client brief – 3 pages

2. Letter from advocate – 2 pages
3. Treating Drs referral –
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4. Clinical Records

Panel members assessing:

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IHAP Majority recommendation:

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**Independent Health Advice Panel**

**Clinical Assessment**

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**Interview with Transitory Person**

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

- Secretariat attending: s22(1)(a)(ii) s22(1)(a)(i)
- Following IHAP document review s47F has been diagnosed with:
- s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

The Panel noted that s47F and that the MOC has recommended transfer to Australia in this submission.

---

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The Panel agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.

**Actions:**

- Transfer to Australia as soon as possible.
- 

Released by Department of Home Affairs under the Freedom of Information Act 1982
1. Clinical Advisory Team (MOC) Opinion dated 01/11/2019 – 2 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
   c. 
   d. 
4. Clinical Records

Panel members assessing:
Dr Antonio Di Dio (Chair)
Dr Parbodh Gogna
Associate Professor Neeraj Gill
Dr Michael Douglas
Mr Guy Coffey

IHAP Majority recommendation:
Is the Minister's refusal confirmed: No
Majority (out of total members): 5/7
Transfer is recommended: Yes
Date of IHAP recommendation: 9/11/2019
Time of IHAP recommendation: 20:40 hrs
Deemed approval (post 72 hours)? No
Meeting audio recorded: No
Independent Health Advice Panel

Clinical Assessment

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Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

IHAP findings:

Secretariat attending: s22(1)(a)(ii)

The panel noted s47F

The panel noted that s47F

The panel also noted that s47F

It is noted that s47F

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Sensitive: Personal
IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- The panel agreed that

- The panel also agreed that

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

Document library reviewed: ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 1.11.2019 – 2 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

Panel members assessing:

Dr Antonio Di Dio
Professor Brendan Murphy
Associate Professor Susan Moloney (Meeting Chair)
Associate Professor Michael Douglas
Mr Guy Coffey

IHAP Majority recommendation:

Is the Minister’s refusal confirmed: Yes
Majority (out of total members): 5/7
|                                | Transfer is recommended: | Date of IHAP recommendation: 10/11/2019 | Time of IHAP recommendation: 2239hrs | Deemed approval (post 72 hours)? No | Meeting audio recorded: No |
**Independent Health Advice Panel**

**Clinical Assessment**

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<tr>
<td><strong>Time:</strong></td>
<td>17:45 hrs</td>
</tr>
<tr>
<td><strong>IHAP Meeting date:</strong></td>
<td>10/11/2019</td>
</tr>
<tr>
<td><strong>Time:</strong></td>
<td>17:00 hrs</td>
</tr>
<tr>
<td><strong>Reconvened IHAP meeting (if required):</strong></td>
<td>N/A</td>
</tr>
</tbody>
</table>

- **Treating Doctor's referral received?** Yes
- **Was the Referring Doctor's clinical assessment performed remotely or in person?** Remotely
- **Health Service Provider clinical summary received:** Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Secretariat attending:** s22(1)(b)(ii)

- The panel noted s47F
- They also noted s47F
- The panel also noted s47F

- The panel also noted s47F

---

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**IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- The panel agreed that...
- ...

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

**Actions:**

- ...
- ...
- ...

**Document library reviewed:** ABF Client brief – 4 pages

1. Clinical Advisory Team (MOC) Opinion dated 05/11/2019 – 1 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. ...
   b. ...
4. Clinical Records

**Panel members assessing:**

- Dr Antonio Di Dio
- Professor Brendan Murphy
- Associate Professor Susan Moloney (Meeting Chair)
- Associate Professor Michael Douglas
- Mr Guy Coffey

**IHAP Majority recommendation:**

<table>
<thead>
<tr>
<th>Is the Minister’s refusal confirmed:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
</tr>
</tbody>
</table>

Sensitive: Personal
<table>
<thead>
<tr>
<th>Sensitive: Personal</th>
</tr>
</thead>
</table>

| **Majority (out of total members):** | 5/7 |
| **Transfer is recommended:** | No |
| **Date of IHAP recommendation:** | 10/11/2019 |
| **Time of IHAP recommendation:** | 2239hrs |
| **Deemed approval (post 72 hours)?** | No |
| **Meeting audio recorded:** | No |
## Independent Health Advice Panel

### Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
</tr>
</thead>
</table>
| **IHAP referral date/time:** | 8/11/2019  
Time: 17:45 hrs |  |
| **IHAP Meeting date:** | 10/11/2019  
Time: 17:00hrs | Treating Doctor's referral received?  
Yes |
| **Reconvened IHAP meeting (if required):** | N/A | Was the Referring Doctor's clinical assessment performed remotely or in person?  
Remotely |
|  |  | Health Service Provider clinical summary received:  
Yes |

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: s22(1)(a)(ii)
- The panel noted s47F. The panel also noted s47F.
- The panel also made note of s47F. It was noted that s47F.

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IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- 
- 
- 
- 

Document library reviewed: ABF Client brief – 5 pages

1. Clinical Advisory Team (MOC) Opinion dated 2.11.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

Panel members assessing:

Dr Antonio Di Dio
Professor Brendan Murphy
Associate Professor Susan Moloney (Meeting Chair)
Associate Professor Michael Douglas
Mr Guy Coffey
<table>
<thead>
<tr>
<th>IHAP Majority recommendation:</th>
<th>Is the Minister's refusal confirmed:</th>
<th>Yes</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Majority (out of total members):</td>
<td>5/7</td>
</tr>
<tr>
<td></td>
<td>Transfer is recommended:</td>
<td>No</td>
</tr>
<tr>
<td>Date of IHAP recommendation:</td>
<td>10/11/2019</td>
<td></td>
</tr>
<tr>
<td>Time of IHAP recommendation:</td>
<td>2239hrs</td>
<td></td>
</tr>
<tr>
<td>Deemed approval (post 72 hours)?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Meeting audio recorded:</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>
## Independent Health Advice Panel

### Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>IHAP referral date/time:</strong></td>
<td>D/N</td>
</tr>
<tr>
<td>8/11/2019</td>
<td></td>
</tr>
<tr>
<td>Time: 17:45 hrs</td>
<td></td>
</tr>
<tr>
<td><strong>IHAP Meeting date:</strong></td>
<td>Treating Doctor’s referral received?</td>
</tr>
<tr>
<td>10/11/2019</td>
<td>Yes</td>
</tr>
<tr>
<td>Time: 17:00hrs</td>
<td></td>
</tr>
<tr>
<td><strong>Reconvened IHAP meeting (if required):</strong></td>
<td>Was the Referring Doctor’s clinical assessment performed remotely or in person?</td>
</tr>
<tr>
<td>N/A</td>
<td>Remotely</td>
</tr>
<tr>
<td><strong>Interview with Transitory Person</strong></td>
<td>Health Service Provider clinical summary received:</td>
</tr>
<tr>
<td>☐ The IHAP undertook an interview.</td>
<td>Yes</td>
</tr>
<tr>
<td>☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.</td>
<td></td>
</tr>
<tr>
<td>☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.</td>
<td></td>
</tr>
</tbody>
</table>

### IHAP findings:

- Secretariat attending: s22(1)(a)(ii)
- The panel noted s47F
  - The panel noted that s47F
- The panel also noted s47F
**IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

**Actions:**

- 
- 
- 
- 

**Document library reviewed:** ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 06/11/2019 – 2 page
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
   c. 
4. Clinical Records

**Panel members assessing:**

Dr Antonio Di Dio  
Professor Brendan Murphy  
Associate Professor Susan Moloney (Meeting Chair)  
Associate Professor Michael Douglas  
Mr Guy Coffey

**IHAP Majority recommendation:**

Is the Minister’s refusal confirmed: Yes  
Majority (out of total members): 5/7  
Transfer is recommended: No
<table>
<thead>
<tr>
<th>Date of IHAP recommendation:</th>
<th>10/11/2019</th>
<th>Time of IHAP recommendation:</th>
<th>2239hrs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deemed approval (post 72 hours)?</td>
<td>No</td>
<td>Meeting audio recorded:</td>
<td>No</td>
</tr>
</tbody>
</table>

**Date of IHAP recommendation:** 10/11/2019  
**Time of IHAP recommendation:** 2239hrs  
**Deemed approval (post 72 hours)?** No  
**Meeting audio recorded:** No

Released by Department of Home Affairs under the Freedom of Information Act 1982
## Independent Health Advice Panel

### Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
</tr>
</thead>
</table>
| **IHAP referral date/time:** | 8/11/2019  
Time: 17:45 hrs |
| **IHAP Meeting date:** | 9/11/2019  
Time: 16:00 hrs |
| **Reconvened IHAP meeting (if required):** | N/A |

| Treating Doctor's referral received? | Yes |
| Was the Referring Doctor’s clinical assessment performed remotely or in person? | Remotely |
| Health Service Provider clinical summary received: | Yes |

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: s22(1)(a)(ii)
- Following IHAP document review s47F has been diagnosed with:

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.
The Panel noted that [redacted]...

It was noted [redacted]...

It was noted that [redacted]...

**IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that [redacted] transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- [redacted]
- [redacted]

Based on the above reasons, the Panel agreed that their recommendation is to refuse [redacted] transfer to Australia for treatment.

**Actions:**

- [redacted]
- [redacted]

Document library reviewed: ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 04/11/2019 – 2 pages
2. Letter from advocate [redacted] – 3 pages
3. Treating Drs referral –
   a. [redacted]
   b. [redacted]
<table>
<thead>
<tr>
<th>Panel members assessing:</th>
<th>Dr Antonio Di Dio (Chair)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Dr Parbodh Gogna</td>
</tr>
<tr>
<td></td>
<td>Associate Professor Neeraj Gill</td>
</tr>
<tr>
<td></td>
<td>Dr Michael Douglas</td>
</tr>
<tr>
<td></td>
<td>Mr Guy Coffey</td>
</tr>
<tr>
<td>IHAP Majority recommendation:</td>
<td>Is the Minister’s refusal confirmed: Yes</td>
</tr>
<tr>
<td></td>
<td>Majority (out of total members): 5/7</td>
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<td>Transfer is recommended: No</td>
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<td>Date of IHAP recommendation:</td>
<td>09/11/2019</td>
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<td>Time of IHAP recommendation:</td>
<td>20:40</td>
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<td>Meeting audio recorded:</td>
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## Independent Health Advice Panel

### Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
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</thead>
<tbody>
<tr>
<td><strong>IHAP referral date/time:</strong></td>
<td>07/11/2019</td>
</tr>
<tr>
<td></td>
<td>Time: 10:00 hrs</td>
</tr>
<tr>
<td><strong>IHAP Meeting date:</strong></td>
<td>9/11/2019</td>
</tr>
<tr>
<td></td>
<td>Time: 0800 hrs</td>
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<td><strong>Reconvened IHAP meeting (if required):</strong></td>
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<td><strong>Treating Doctor’s referral received?</strong></td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Was the Referring Doctor’s clinical assessment performed remotely or in person?</strong></td>
<td>Remotely</td>
</tr>
<tr>
<td><strong>Health Service Provider clinical summary received:</strong></td>
<td>Yes</td>
</tr>
</tbody>
</table>

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: s22(1)(a)(ii)
- Following IHAP document review s47F has been diagnosed with:

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The panel discussed [REDACTED] and noted that the following:

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

[REDACTED], the panel noted that [REDACTED]. They noted that [REDACTED].

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that [REDACTED] transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- [REDACTED]
- [REDACTED]

Based on the above reasons, the Panel agreed that their recommendation is to refuse [REDACTED] transfer to Australia for treatment.

**Actions:**

- [REDACTED]
## Document library reviewed:
- ABF Client brief – 3 pages
  2. Letter from advocate – 3 pages
  3. Treating Drs referral –
     a. 
     b. 
  4. Clinical Records

## Panel members assessing:
- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Dr Michael Douglas
- Mr Guy Coffey

## IHAP Majority recommendation:
- Is the Minister’s refusal confirmed: Yes
- Majority (out of total members): 5/7
- Transfer is recommended: No
- Date of IHAP recommendation: 09/11/2019
- Time of IHAP recommendation: 15:54
- Deemed approval (post 72 hours)? No
- Meeting audio recorded: No
## Meeting details

| IHAP referral date/time: | 11/11/2019  
Time: 16:26 hrs |
|-------------------------|-----------------|

| IHAP Meeting date: | 13/11/2019  
Time: 08:00 hrs |
|-------------------|-----------------|

<table>
<thead>
<tr>
<th>ReconvnIHAP meeting (if required):</th>
<th>N/A</th>
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</table>

<table>
<thead>
<tr>
<th>Treating Doctor’s referral received?</th>
<th>Yes</th>
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</table>

<table>
<thead>
<tr>
<th>Was the Referring Doctor’s clinical assessment performed remotely or in person?</th>
<th>Remotely</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Health Service Provider clinical summary received:</th>
<th>Yes</th>
</tr>
</thead>
</table>

## Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

## IHAP findings

| Secretariat attending: | ☑  
Note: 82(1)(b)(ii) |
|------------------------|-----------------|

- Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of

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interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.

**Actions:**

- Transfer to Australia
- Notify the Panel when has been transferred.

**Document library reviewed:** ABF Client brief – 2 pages

2. Letter from advocate – 3 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

**Panel members assessing:**

- Dr Parbodh Gogna (Meeting Chair)
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Associate Professor Michael Douglas

**IHAP Majority recommendation:** Is the Minister’s refusal confirmed: No
<table>
<thead>
<tr>
<th></th>
<th>Majority (out of total members):</th>
<th>4/7</th>
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</thead>
<tbody>
<tr>
<td>Transfer is recommended:</td>
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<td>Yes</td>
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<tr>
<td>Date of IHAP recommendation:</td>
<td>13/11/2019</td>
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<td>Time of IHAP recommendation:</td>
<td>13:38 hrs</td>
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<td>Deemed approval (post 72 hours)?</td>
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<tr>
<td>Meeting audio recorded:</td>
<td></td>
<td>No</td>
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</table>
## Independent Health Advice Panel

### Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
</tr>
</thead>
</table>
| **IHAP referral date/time:** | 11/11/2019  
Time: 16:26 hrs | S47F |
| **IHAP Meeting date:** | 13/11/2019  
Time: 08:00 hrs | Treating Doctor’s referral received? |
| **Reconvened IHAP meeting (if required):** | N/A | Was the Referring Doctor’s clinical assessment performed remotely or in person? |
| | | Remotely |
| | | Health Service Provider clinical summary received: |
| | | Yes |

### Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: S22(1)(a)(ii)

The Panel noted S47F. The panel noted S47F.

The Panel noted S47F. The Panel expressed their concerns.

S47F. the Panel recommended S47F.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.
IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- 
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.

Actions:

- Transfer to Australia
- The Panel to be notified once transferred.

Document library reviewed: ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 07.11.2019 – 2 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
   c. 
4. Clinical Records

Panel members assessing:

Dr Parbodh Gogna (Meeting Chair)
Associate Professor Susan Moloney
Associate Professor Neeraj Gill
Dr Michael Douglas

IHAP Majority recommendation:

Is the Minister’s refusal confirmed: No

Majority (out of total members): 4/7
<table>
<thead>
<tr>
<th><strong>Sensitive: Personal</strong></th>
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</thead>
<tbody>
<tr>
<td><strong>Transfer is recommended:</strong> Yes</td>
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<tr>
<td><strong>Date of IHAP recommendation:</strong> 13/11/2019</td>
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<tr>
<td><strong>Deemed approval (post 72 hours)?</strong> No</td>
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Date of IHAP recommendation: 13/11/2019

Time of IHAP recommendation: 11:46 hrs

Deemed approval (post 72 hours)? No

Meeting audio recorded: No
# Independent Health Advice Panel

## Clinical Assessment

<table>
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<tbody>
<tr>
<td><strong>IHAP referral date/time:</strong></td>
<td>11/11/2019</td>
</tr>
<tr>
<td>Time: 16:26 hrs</td>
<td></td>
</tr>
<tr>
<td><strong>IHAP Meeting date:</strong></td>
<td>12/11/2019</td>
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<tr>
<td>Time: 08:00 hrs</td>
<td></td>
</tr>
<tr>
<td><strong>Treating Doctor’s referral received?</strong></td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Was the Referring Doctor’s clinical assessment performed remotely or in person?</strong></td>
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</tr>
<tr>
<td><strong>Health Service Provider clinical summary received:</strong></td>
<td>Yes</td>
</tr>
</tbody>
</table>

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: s22(1)(a)(ii)
- The Panel note s47F
- The Panel note that s47F
- The Panel acknowledge that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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**IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

-  
-  

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

**Actions:**

-  
-  

**Document library reviewed:** ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 07.11.2019 – 2 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a.  
   b.  
4. Clinical Records

**Panel members assessing:**

- Dr Parbodh Gogna (Meeting Chair)
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Dr Michael Douglas

**IHAP Majority recommendation:**

- **Is the Minister’s refusal confirmed:** Yes
- **Majority (out of total members):** 4/7
- **Transfer is recommended:** No

**Date of IHAP recommendation:** 13/11/2019  
**Time of IHAP recommendation:** 13:53 hrs

**Deemed approval (post 72 hours)?** No  
**Meeting audio recorded:** No
# Independent Health Advice Panel

## Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
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</thead>
</table>
| **IHAP referral date/time:** | 11/11/2019  
Time: 16:26 hrs | Dr/F |
| **IHAP Meeting date:** | 13/11/2019  
Time: 08:00 hrs | Treating Doctor’s referral received?  
Yes |
| **Reconvened IHAP meeting (if required):** | N/A | Was the Referring Doctor’s clinical assessment performed remotely or in person?  
Remotely |

## Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

## IHAP findings:

Secretariat attending: s22(1)(c)(ii)

The Panel note that s47F

The Panel note that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.
IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- Document library reviewed:
  - ABF Client brief – 2 pages
  - Clinical Advisory Team (MOC) Opinion dated 07.11.2019 – 2 pages
  - Letter from advocate – 3 pages
  - Treating Drs referral – 4. Clinical Records

Panel members assessing:

- Dr Parbodh Gogna (Meeting Chair)
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Dr Michael Douglas

IHAP Majority recommendation:

- Is the Minister’s refusal confirmed: Yes
- Majority (out of total members): 4/7
- Transfer is recommended: No
- Date of IHAP recommendation: 13/11/2019
- Time of IHAP recommendation: 13:53hrs
- Deemed approval (post 72 hours)? No
- Meeting audio recorded: No

Sensitive: Personal
Independent Health Advice Panel

Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>IHAP referral</strong>&lt;br&gt;date/time:</td>
<td><strong>$47F$</strong>&lt;br&gt;</td>
</tr>
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<td><strong>IHAP Meeting date:</strong></td>
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</tr>
<tr>
<td>13/11/2019&lt;br&gt;Time: 08:00 hrs</td>
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<tr>
<td><strong>Reconvened IHAP meeting (if required):</strong></td>
<td>Was the Referring Doctor’s clinical assessment performed remotely or in person?&lt;br&gt;Remotely</td>
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<tr>
<td>N/A</td>
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<tr>
<td><strong>Health Service Provider clinical summary received:</strong></td>
<td>Yes</td>
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</table>

**Interview with Transitory Person**

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

Secretariat attending: $s22(1)(a)(ii)$

The Panel note $s47F$.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:
- 

Document library reviewed: ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 07.11.2019 – 1 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral – a. 
   b. 
4. Clinical Records

Panel members assessing:

Dr Parbodh Gogna (Meeting Chair)
Associate Professor Susan Moloney
Associate Professor Neeraj Gill
Dr Michael Douglas

IHAP Majority recommendation:

Is the Minister's refusal confirmed: Yes
Majority (out of total members): 4/7
Transfer is recommended: No

Date of IHAP recommendation: 13/11/2019
Time of IHAP recommendation: 11:46 hrs
Deemed approval (post 72 hours)? No
Meeting audio recorded: No
Sensitive: Personal
## Independent Health Advice Panel

### Clinical Assessment

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<td>11/11/2019</td>
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<tr>
<td><strong>Health Service Provider clinical summary received:</strong></td>
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### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: s22(1)(a)(ii)
- The Panel note that s47F
- The Panel note that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.
IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be **refused**. The Panel agreed that their recommendation was based on the following factors:

- Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

### Actions:

Document library reviewed: ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 01.11.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

### Panel members assessing:

- Dr Parbodh Gogna (Meeting Chair)
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Dr Michael Douglas

### IHAP Majority recommendation:

- Is the Minister’s refusal confirmed: Yes
- Majority (out of total members): 4/7
- Transfer is recommended: No

- Date of IHAP recommendation: 13/11/2019
- Time of IHAP recommendation: 13:38 hrs
- Deemed approval (post 72 hours)? No
- Meeting audio recorded: No
### Independent Health Advice Panel

#### Clinical Assessment

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<td>9/11/2019 Time: 16:00hrs</td>
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<th>Health Service Provider clinical summary received?</th>
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<td>Remotely</td>
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##### Interview with Transitory Person

- [ ] The IHAP undertook an interview.
- [ ] The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

##### IHAP findings:

1. **Secretariat attending:**
   - *s22(1)(e)(ii)*
2. **The Panel noted that:**
   - *s47F*
3. **The Panel were concerned that:**
   - *s47F*
4. **Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.**

---

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**Sensitive: Personal**
IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- 

Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.

Actions:

- Transfer to Australia

- The Panel to be informed once transfer has occurred

Document library reviewed: ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 05/11/2019 – 2 pages
2. Letter from advocate – 3 pages
3. Treating Drs referral –
   a.
   b.
   c.
4. Clinical Records

Panel members assessing:

Dr Antonio Di Dio (Chair)
Dr Parbodh Gogna
Professor Brendan Murphy
Is the Minister’s refusal confirmed: No

Majority (out of total members): 5/7

Transfer is recommended: Yes

Date of IHAP recommendation: 10/11/2019

Time of IHAP recommendation: 13:56

Deemed approval (post 72 hours)? No

Meeting audio recorded: No
### Clinical Assessment

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</table>

- **Treating Doctor’s referral received?** Yes
- **Was the Referring Doctor’s clinical assessment performed remotely or in person?** Remotely
- **Health Service Provider clinical summary received:** Yes

#### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

#### IHAP findings:

- Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.
IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- 
- 
- The Panel receive fortnightly reports

Document library reviewed: ABF Client brief – 3 pages

2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
   c. 
4. Clinical Records

Panel members assessing: Dr Antonio Di Dio (Chair) Dr Parbodh Gogna
| IHAP Majority recommendation: | Professor Brendan Murphy  
Dr Michael Douglas  
Mr Guy Coffey |
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>Is the Minister's refusal confirmed:</td>
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<td>Majority (out of total members):</td>
<td>5/7</td>
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<td>Transfer is recommended:</td>
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<td>Date of IHAP recommendation:</td>
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Time: 17:45 hrs |
| **IHAP Meeting date:** | 10/11/2019  
Time: 17:00hrs |
| **Reconvened IHAP meeting (if required):** | N/A |
| **Treating Doctor’s referral received?** | Yes |
| **Was the Referring Doctor’s clinical assessment performed remotely or in person?** | Remotely |
| **Health Service Provider clinical summary received:** | Yes |

**Interview with Transitory Person**

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

- Secretariat attending: $s22(1)(b)(i)$
- The panel noted $s47F$. The panel noted that...
- The panel also noted $s47F$
IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- The Panel agreed that...

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:


Document library reviewed: ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 6.11.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral – a. b.
4. Clinical Records

Panel members assessing:

Dr Antonio Di Dio
Professor Brendan Murphy
Associate Professor Susan Moloney (Meeting Chair)
Associate Professor Michael Douglas
Mr Guy Coffey

IHAP Majority recommendation: Is the Minister’s refusal confirmed: Yes
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## Independent Health Advice Panel

### Clinical Assessment

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<td>14/11/2019</td>
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<td></td>
<td>performed remotely or in person?</td>
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<td></td>
<td>Health Service Provider clinical summary received:</td>
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<td></td>
<td>Yes</td>
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</table>

**Interview with Transitory Person**

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

- Secretariat attending: \( s^{22}(1)(d)(i) \)
- The Panel noted that \( s^{47}F \)
- Panel noted \( s^{47}F \)
- The panel noted \( s^{47}F \)

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.
IHAP recommendations

All IHAP Panel members agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.

Actions:

- Transfer To Australia
- The Panel to be notified once transferred.

Document library reviewed: ABF Client brief – 4 pages

1. Clinical Advisory Team (MOC) Opinion dated 7.11.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
   c. 
   d. 
4. Clinical Records
| Panel members assessing: | Dr Parbodh Gogna (Chair)  
|                        | Associate Professor Susan Moloney  
|                        | Associate Professor Neeraj Gill  
|                        | Professor Paul Kelly |
| IHAP Majority recommendation: | Is the Minister’s refusal confirmed: No |
|                          | Majority (out of total members): 4/7 |
|                          | Transfer is recommended: Yes |
| Date of IHAP recommendation: | 15/11/2019 |
| Time of IHAP recommendation: | 10:05 hrs |
| Deemed approval (post 72 hours)? | No |
| Meeting audio recorded: | No |
## Independent Health Advice Panel

### Clinical Assessment (Attachment A.1)

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<td>IHAP Meeting date: 30/09/2019 07:00 hrs</td>
<td>Treating Doctor’s referral received? Yes</td>
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<tr>
<td>Reconvened IHAP meeting (if required): N/A</td>
<td>Was the Referring Doctor’s clinical assessment performed remotely or in person? Remotely</td>
</tr>
<tr>
<td>Health Service Provider clinical summary received:</td>
<td>Yes</td>
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</table>

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Initial meeting:** Attended by: 
Secretariat attending:

Following IHAP document review has been diagnosed with:

---

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Sensitive: Personal
The Panel found that

### IHAP recommendations

The Panel recommended that

**Actions:**

- 
- 
-
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<thead>
<tr>
<th>Document library reviewed:</th>
<th>ABF Client brief – 3 pages</th>
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<tr>
<td>2. Letter from [REDACTED] – 2 pages</td>
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<td>a. [REDACTED]</td>
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<td>b. [REDACTED]</td>
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<td>4. Clinical Records</td>
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<table>
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<th>Panel members assessing:</th>
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<tbody>
<tr>
<td>Dr Antonio Di Dio (Chair)</td>
</tr>
<tr>
<td>Associate Professor Susan Moloney</td>
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<td>Associate Professor Neeraj Gill</td>
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<td>Professor Paul Kelly</td>
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<td>Mr Guy Coffey</td>
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<tbody>
<tr>
<td>Is the Minister’s refusal confirmed:</td>
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<tr>
<td>Majority (out of total members):</td>
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<tr>
<td>Transfer is recommended:</td>
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| Date of IHAP recommendation: | 30/09/2019 |
| Time of IHAP recommendation: | 14:26 |
| Deemed approval (post 72 hours)? | No |
| Meeting audio recorded: | No |
### Independent Health Advice Panel

#### Clinical Assessment

<table>
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<th>Biodata details</th>
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| **IHAP referral date/time:** | 13/11/2019  
Time: 18:18 hrs | **s47F** |
| **IHAP Meeting date:** | 14/11/2019  
Time: 18:00 hrs | **Treating Doctor’s referral received?**  
Yes |
| **Reconvened IHAP meeting (if required):** | N/A | **Was the Referring Doctor’s clinical assessment performed remotely or in person?**  
Remotely |
| **Health Service Provider clinical summary received:** | Yes |

#### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

#### IHAP findings:

- Secretariat attending: s22(1)(a)(ii)
- The Panel noted s47F
- The Panel noted that s47F
- The Panel expressed their concerns.
- The Panel noted that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.
## IHAP recommendations

All IHAP Panel members agreed that their recommendation was that transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- Transfer to Australia.

Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.

## Actions:

- Transfer to Australia.
- Notify panel once transferred.

## Document library reviewed:

- ABF Client brief – 4 pages
- Clinical Advisory Team (MOC) Opinion dated 30.10.2019 – 2 pages
- Letter from advocate – 6 pages
- Treating Drs referral –
  - a.
  - b.
  - c.
- Clinical Records

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*Sensitive: Personal*
| Panel members assessing: | Dr Parbodh Gogna (Chair)  
|                         | Associate Professor Susan Moloney  
|                         | Associate Professor Neeraj Gill  
|                         | Professor Paul Kelly |
| IHAP Majority recommendation: | Is the Minister’s refusal confirmed: No |
|                           | Majority (out of total members): 4/7 |
|                           | Transfer is recommended: Yes |
| Date of IHAP recommendation: | 15/11/2019 |
| Time of IHAP recommendation: | 10:26 hrs |
| Deemed approval (post 72 hours)? | No |
| Meeting audio recorded: | No |
**Independent Health Advice Panel**

**Clinical Assessment (Attachment A.1)**

<table>
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<td><strong>Health Service Provider clinical summary received:</strong></td>
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**Interview with Transitory Person**

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

**Initial meeting:** Tuesday 13 August 2019 at 1700 hrs attended by 7 IHAP Panel members.

**Secondary meeting:** Wednesday 14 August 2019 at 1715 hrs attended by 5 IHAP Panel members. (Final recommendation supported by all 7 IHAP Panel members).

**Secretariat attending:** [Redacted]

(has been referred to the Independent Health Advice Panel by the Minister for clinical assessment following a notification having been received from two physicians that [Redacted] is a relevant transitory person.)

The treating doctors have put forward the following diagnoses:

---

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**Sensitive: Personal**
The Panel accept that. The Panel note that. The Panel noted that. The Panel note that.
The Panel note the report by the Medical Officer of the Commonwealth (MOC).
The Panel agreed that. The Panel agree and note. The Panel also notes.
The Panel agreed that. The Panel agreed that.
The Panel agreed that. The Panel were uncertain if.
The Panel questioned.
The Panel noted that Dr Parbodh Gogna’s name was listed in the patient’s notes on the chest x-ray and blood screening results taken when the patient first arrived on Christmas Island. Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.
IHAP recommendations

All seven IHAP members present agreed that their recommendation is that transfer to Australia for medical treatment be refused. This recommendation is based on the following reasons:

1. 
2. 
3. 
4. 
5. 
6. 

The Panel agreed that their recommendation that not be transferred to Australia is based on the above factors.

Actions:

1. Inform the IHAP Panel, via the Outcomes Tracker, when.
2. Provide the IHAP Panel with an updated.

Document library reviewed: ABF Client brief – 3 pages

2. Letter from – 5 pages
3. Treating Drs referral – 13 pages
   a. 
   b. 
4. Clinical Records

Released by Department of Home Affairs under the Freedom of Information Act 1982
## Panel members assessing:

- Dr Parbodh Gogna (Chair)
- Professor Brendan Murphy
- Dr Antonio Di Dio
- Associate Professor Susan Moloney
- Dr Neeraj Gill
- Dr Michael Douglas
- Mr Guy Coffey

## IHAP Majority recommendation:

- **Is the Minister’s refusal confirmed:** Yes
- **Majority** (out of total members): 7/7
- **Transfer is recommended:** No

### IHAP recommendation details:

- **Date of IHAP recommendation:** 15/08/2019
- **Time of IHAP recommendation:** 09:30 hrs
- **Deemed approval (post 72 hours)?** No
- **Meeting audio recorded:** No
## Independent Health Advice Panel

### Clinical Assessment

#### Meeting details

| IHAP referral date/time: | 13/11/2019  
Time: 18:18 hrs |  
| Biodata details |
|---|---|

| IHAP Meeting date: | 14/11/2019  
Time: 18:00 hrs | Treating Doctor’s referral received? | Yes |
|---|---|---|---|

<table>
<thead>
<tr>
<th>Reconstituted IHAP meeting (if required):</th>
<th>N/A</th>
<th>Was the Referring Doctor’s clinical assessment performed remotely or in person?</th>
<th>Remotely</th>
</tr>
</thead>
</table>

| Health Service Provider clinical summary received: | Yes |

#### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

#### IHAP findings:

- Secretariat attending: s22(1)(b)(ii)

- The Panel noted s47F

- the Panel recommended s47F

- The Panel was concerned s47F

- The Panel noted that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.
IHAP recommendations

All IHAP Panel members agreed that their recommendation was to refuse transfer to Australia. The Panel agreed that their recommendation was based on the following factors:

- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- 
- 
- 
- 
- Provide the Panel with an update.

Document library reviewed: ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 07.11.2019 – 2 pages
2. Letter from advocate – 3 pages
3. Treating Drs referral –
   a. 
   b. 
   c. 
   d. 
4. Clinical Records

FOI reference: FA 20/02/01088
### Panel members assessing:
- Dr Parbodh Gogna (Chair)
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Professor Paul Kelly

### IHAP Majority recommendation:
<table>
<thead>
<tr>
<th><strong>Is the Minister’s refusal confirmed:</strong></th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Majority (out of total members):</strong></td>
<td>4/7</td>
</tr>
<tr>
<td><strong>Transfer is recommended:</strong></td>
<td>No</td>
</tr>
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</table>

<table>
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<tr>
<th><strong>Date of IHAP recommendation:</strong></th>
<th>15/11/2019</th>
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<tbody>
<tr>
<td><strong>Time of IHAP recommendation:</strong></td>
<td>10:51 hrs</td>
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<tr>
<td><strong>Deemed approval (post 72 hours)?</strong></td>
<td>No</td>
</tr>
<tr>
<td><strong>Meeting audio recorded:</strong></td>
<td>No</td>
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</table>
Independent Health Advice Panel

Clinical Assessment (Attachment A.1)

<table>
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<th>Meeting details</th>
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<tbody>
<tr>
<td>IHAP referral date/time:</td>
<td>25/09/2019 Time: 1051 hrs</td>
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<tr>
<td>IHAP Meeting date:</td>
<td>26/09/2019 1730 hrs</td>
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<tr>
<td>Reconstituted IHAP meeting (if required):</td>
<td>N/A</td>
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</table>

Treating Doctor’s referral received?: Yes

Was the Referring Doctor’s clinical assessment performed remotely or in person?: Remotely

Health Service Provider clinical summary received?: Yes

Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

IHAP findings:

Initial meeting: Thursday, 26 September 2019 at 1730 hrs

Attended by: Dr Antonio Di Dio, Dr Parbodh Gogna, Dr Susan Moloney, A/Prof. Michael Douglas, Mr Guy Coffey

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

s47F

This document may contain 'personal identifiers' and 'personal information' as defined under the Migration Act 1958 or Australian Citizenship Act 2007, and can only be used for purposes under these Acts.
The Panel considered the treating doctors’ reports and the MOC opinion.

The Panel discussed and noted:

- 
- 
- 

The Panel noted that. The Panel noted that.

The Panel agreed that.

The Panel also noted that.

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

**IHAP recommendations**

All five IHAP Panel members agreed that their recommendation is to **refuse** the transfer of Australia for treatment. The Panel agreed that their recommendation is based on the following factors:

1. The Panel agree.

2. The Panel agree that.

The Panel agree that their recommendation to refuse transfer is based on the above reasons.
### Actions:

1. [s47F] be transferred [s47F]
2. [s47F]
3. [s47F]
4. [s47F]
5. [s47F]
6. The Panel be notified via the Outcomes Tracker when [s47F] is transferred [s47F]. The Panel also needs to be advised [s47F].

### Document library reviewed:

1. Clinical Advisory Team (MOC) Opinion dated 18.09.2019 – 1 pages
2. Letter from [s47F] – 7 pages
3. Treating Drs referral –
   a. [s47F]
   b. [s47F]
4. Clinical Records [s47F]

### Panel members assessing:

- Dr Antonio Di Dio (Chair)
- Dr Parbodh Gogna
- Associate Professor Susan Moloney
- Dr Michael Douglas
- Mr Guy Coffey

### IHAP Majority recommendation:

- Is the Minister’s refusal confirmed: Yes
- Majority (out of total members): 5/5
- Transfer is recommended: No
- Date of IHAP recommendation: 27/09/2019
- Time of IHAP recommendation: 1405 hrs
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<th>Deemed approval (post 72 hours)?</th>
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<tbody>
<tr>
<td>Meeting audio recorded:</td>
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</table>
**Independent Health Advice Panel**

### Clinical Assessment

#### Meeting details

<table>
<thead>
<tr>
<th>IHAP referral date/time:</th>
<th>14/11/2019</th>
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<tbody>
<tr>
<td>Time: 09:45 hrs</td>
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#### Biodata details

<table>
<thead>
<tr>
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<tr>
<td>Time: 18:00 hrs</td>
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<table>
<thead>
<tr>
<th>Treating Doctor’s referral received?</th>
<th>Yes</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Reconvnied IHAP meeting (if required):</th>
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<table>
<thead>
<tr>
<th>Was the Referring Doctor’s clinical assessment performed remotely or in person?</th>
<th>Remotely</th>
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</table>

<table>
<thead>
<tr>
<th>Health Service Provider clinical summary received:</th>
<th>No</th>
</tr>
</thead>
</table>

### Interview with Transitory Person

- ☑️ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒️ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: 
- The Panel note that
- The Panel note that
- The Panel note that

---

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IHAP recommendations

All IHAP Panel members agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- 
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.

Actions:

- Transfer to Australia for.
- The Panel to be notified once transferred

Document library reviewed: ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 4.11.2019 – 1 page
2. Letter from advocate – 5 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

Panel members assessing:

| Associate Professor Susan Moloney (Chair) |
| Professor Paul Kelly                     |
| Dr Michael Douglas                       |
| Mr Guy Coffey                            |

IHAP Majority recommendation:

- Is the Minister’s refusal confirmed: No
- Majority (out of total members): 4/7
- Transfer is recommended: Yes

Date of IHAP recommendation: 15/11/2019

Time of IHAP recommendation: 22:13hrs

Deemed approval (post 72 hours)? No

Meeting audio recorded: No
**Independent Health Advice Panel**

**Clinical Assessment**

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
</tr>
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</table>
| **IHAP referral date/time:** | 14/11/2019  
Time: 09:45 hrs |  |
| **IHAP Meeting date:** | 15/11/2019  
Time: 18:00 hrs | |
| **Reconvened IHAP meeting (if required):** | N/A | |

**Interview with Transitory Person**

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

- Secretariat attending: s22(1)(a)(i)
- The Panel noted that s47F commented on the s47F.
- The Panel were concerned with s47F
- The Panel noted s47F
- The Panel agreed that s47F
- The Panel requested s47F

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IHAP recommendations

All IHAP Panel members present agreed that their recommendation was to refuse transfer to Australia. The Panel agreed that their recommendation was based on the following factors:

- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- 
- The Panel be provided with an update

Document library reviewed: ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 7.11.2019 – 2 pages
2. Letter from advocate – 3 pages
3. Treating Drs referral –
   a. 
   b. 
   c. 
   d. 
4. Clinical Records

Panel members assessing:

Associate Professor Susan Moloney (Chair)
Professor Paul Kelly
Dr Michael Douglas
<table>
<thead>
<tr>
<th>IHAP Majority recommendation:</th>
<th>Mr Guy Coffey</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the Minister's refusal confirmed:</td>
<td>Yes</td>
</tr>
<tr>
<td>Majority (out of total members):</td>
<td>4/7</td>
</tr>
<tr>
<td>Transfer is recommended:</td>
<td>No</td>
</tr>
<tr>
<td>Date of IHAP recommendation:</td>
<td>15/11/2019</td>
</tr>
<tr>
<td>Time of IHAP recommendation:</td>
<td>22:13hrs</td>
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<tr>
<td>Meeting audio recorded:</td>
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</table>
# Independent Health Advice Panel

## Clinical Assessment

<table>
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<th>Biodata details</th>
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</thead>
<tbody>
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<tr>
<td>14/11/2019</td>
<td></td>
</tr>
<tr>
<td>Time: 09:45 hrs</td>
<td></td>
</tr>
<tr>
<td><strong>IHAP Meeting date:</strong></td>
<td></td>
</tr>
<tr>
<td>15/11/2019</td>
<td>Treating Doctor’s referral received?</td>
</tr>
<tr>
<td>Time: 18:00 hrs</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Reconvened IHAP meeting (if required):</strong></td>
<td></td>
</tr>
<tr>
<td>N/A</td>
<td>Was the Referring Doctor’s clinical assessment performed remotely or in person?</td>
</tr>
<tr>
<td></td>
<td>Remotely</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Interview with Transitory Person</strong></th>
<th></th>
</tr>
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<tbody>
<tr>
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<td></td>
</tr>
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<td></td>
</tr>
<tr>
<td>☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.</td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th><strong>IHAP findings:</strong></th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Secretariat attending: s22(1)(a)(i)(ii)</td>
<td></td>
</tr>
<tr>
<td>The Panel noted that s47F</td>
<td></td>
</tr>
<tr>
<td>The Panel also notes s47F</td>
<td></td>
</tr>
<tr>
<td>The panel noted that s47F</td>
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</tbody>
</table>

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**Sensitive: Personal**
IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- The panel noted but agreed that
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- 
- 
- 

Document library reviewed: ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 11.11.2019 – 1 pages
2. Letter from advocate – 7 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

Panel members assessing:

- Associate Professor Susan Moloney (Chair)
- Dr Michael Douglas
- Mr Guy Coffey
- Professor Paul Kelly
<table>
<thead>
<tr>
<th>IHAP Majority recommendation:</th>
<th>Is the Minister’s refusal confirmed:</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Majority (out of total members):</td>
<td>4/7</td>
</tr>
<tr>
<td></td>
<td>Transfer is recommended:</td>
<td>No</td>
</tr>
<tr>
<td>Date of IHAP recommendation:</td>
<td>15/11/2019</td>
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<tr>
<td>Time of IHAP recommendation:</td>
<td>22:13hrs</td>
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<tr>
<td>Deemed approval (post 72 hours)?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Meeting audio recorded:</td>
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### Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
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<tr>
<td>IHAP Meeting date:</td>
<td>15/11/2019&lt;br&gt;Time: 18:00 hrs&lt;br&gt;Treating Doctor’s referral received? Yes</td>
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<td>N/A&lt;br&gt;Was the Referring Doctor’s clinical assessment performed remotely or in person? Remotely</td>
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</table>

#### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

Secretariat attending: 

The Panel noted: 

The Panel noted that: 

This recommendation is in line with the recommendation from the medical Officer of the Commonwealth.

---

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**Sensitive: Personal**
**IHAP recommendations**

All IHAP Panel members agreed that their recommendation was that transfer to Australia be **approved**. The Panel agreed that their recommendation was based on the following factors:

- 

Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.

**Actions:**

- Transfer to Australia.
- The Panel to be notified once transferred.

**Document library reviewed:** ABF Client brief – 4 pages

1. Clinical Advisory Team (MOC) Opinion dated 07.08.2019 – 2 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

**Panel members assessing:**

- Associate Professor Susan Moloney (Chair)
- Professor Paul Kelly
- Dr Michael Douglas
- Mr Guy Coffey

---

<table>
<thead>
<tr>
<th><strong>IHAP Majority recommendation:</strong></th>
<th><strong>Is the Minister’s refusal confirmed:</strong></th>
<th><strong>Majority</strong> (out of total members):</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No</td>
<td>4/7</td>
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</table>

<table>
<thead>
<tr>
<th><strong>Transfer is recommended:</strong></th>
<th><strong>Date of IHAP recommendation:</strong></th>
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<tr>
<td>Yes</td>
<td>15/11/2019</td>
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<tr>
<th><strong>Deemed approval (post 72 hours)?</strong></th>
<th><strong>Meeting audio recorded:</strong></th>
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<tbody>
<tr>
<td>No</td>
<td>No</td>
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</table>
### Independent Health Advice Panel

**Clinical Assessment**

<table>
<thead>
<tr>
<th>Meeting details</th>
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<tbody>
<tr>
<td><strong>IHAP referral date/time:</strong> 14/11/2019</td>
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<td><strong>Reconvened IHAP meeting (if required):</strong> N/A</td>
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<tr>
<td><strong>Treating Doctor’s referral received?</strong> Yes</td>
<td></td>
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<tr>
<td><strong>Was the Referring Doctor’s clinical assessment performed remotely or in person?</strong> Remotely</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Health Service Provider clinical summary received:</strong> Yes</td>
<td></td>
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</table>

**Interview with Transitory Person**

- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

**IHAP findings:**

- Secretariat attending: [s22(1)(a)(i)]

- [s47F] The Panel note that

- [s47F] The Panel notes that

- [s47F] The Panel note
IHAP recommendations

All IHAP Panel members agreed that their recommendation was to refuse transfer to Australia. The Panel agreed that their recommendation was based on the following factors:

- [SENSITIVE]

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- The Panel notes that [SENSITIVE]
- The Panel requests [SENSITIVE]

Document library reviewed:

1. Clinical Advisory Team (MOC) Opinion dated 5.11.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. [SENSITIVE]
   b. [SENSITIVE]
   c. [SENSITIVE]

Panel members assessing:

- Associate Professor Susan Moloney (Chair)
- Professor Paul Kelly
- Dr Michael Douglas
- Mr Guy Coffey

IHAP Majority recommendation:

- Is the Minister's refusal confirmed: Yes
- Majority (out of total members): 4/7
- Transfer is recommended: No

Sensitive: Personal
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<tr>
<th>Date of IHAP recommendation:</th>
<th>15/11/2019</th>
<th>Time of IHAP recommendation:</th>
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<tr>
<td>Deemed approval (post 72 hours)?</td>
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Date of IHAP recommendation: 15/11/2019
Time of IHAP recommendation: 22:13hrs
Deemed approval (post 72 hours)? No
Meeting audio recorded: No
Independent Health Advice Panel

Clinical Assessment

<table>
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<th>Meeting details</th>
<th>Biodata details</th>
</tr>
</thead>
</table>
| IHAP referral date/time: | 14/11/2019  
Time: 09:45 hrs |  |
| IHAP Meeting date: | 15/11/2019  
Time: 18:00 hrs | Treating Doctor’s referral received?  
Yes |
| Reconvened IHAP meeting (if required): | N/A | Was the Referring Doctor’s clinical assessment performed remotely or in person?  
Remotely |

**Interview with Transitory Person**

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

Secretariat attending: s22(1)(a)(ii)

Following IHAP document review s47F has been diagnosed with:

The panel noted s47F

The panel also noted s47F . The panel also

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IHAP recommendations

All IHAP Panel members agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- [REDACTED]
- [REDACTED]

The panel noted [REDACTED]

Based on the above reasons, the Panel agreed that their recommendation is to approve [REDACTED] transfer to Australia for treatment.

Actions:

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

- The Panel to be notified once [REDACTED] is transferred to Australia.

Document library reviewed: ABF Client brief – 4 pages

1. Clinical Advisory Team (MOC) Opinion dated 8.11.2019 – 1 page
2. Letter from advocate – 3 pages
3. Treating Drs referral –
   a. [REDACTED]
   b. [REDACTED]
4. Clinical Records

Panel members assessing:

Professor Brendan Murphy
Associate Professor Susan Moloney (Chair)
Mr Guy Coffey
Professor Paul Kelly
<table>
<thead>
<tr>
<th>IHAP Majority recommendation:</th>
<th>Is the Minister’s refusal confirmed:</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Majority (out of total members):</td>
<td>4/7</td>
<td></td>
</tr>
<tr>
<td>Transfer is recommended:</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Date of IHAP recommendation:</td>
<td>15/11/2019</td>
<td></td>
</tr>
<tr>
<td>Time of IHAP recommendation:</td>
<td>22:13hrs</td>
<td></td>
</tr>
<tr>
<td>Deemed approval (post 72 hours)?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Meeting audio recorded:</td>
<td>Yes</td>
<td></td>
</tr>
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</table>
### Independent Health Advice Panel

#### Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>IHAP referral date/time:</strong></td>
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<td><strong>IHAP Meeting date:</strong></td>
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<td>Time: 18:00 hrs</td>
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<td><strong>Reconvened IHAP meeting (if required):</strong></td>
<td><strong>Was the Referring Doctor’s clinical assessment performed remotely or in person?</strong></td>
</tr>
<tr>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td><strong>Health Service Provider clinical summary received:</strong></td>
<td>Yes</td>
</tr>
</tbody>
</table>

#### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

#### IHAP findings:

- Secretariat attending: s22(1)(a)(ii)
- The panel noted that s47F
- The panel also noted that s47F
- The panel noted that s47F
- The panel also noted that s47F
- The panel noted that s47F
IHAP recommendations

All IHAP Panel members agreed that their recommendation was that transfer to Australia be refused.

The Panel agreed that their recommendation was based on the following factors:

- Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

Document library reviewed: ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 29.10.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b.
4. Clinical Records

Panel members assessing:

Associate Professor Susan Moloney (Chair)
Dr Michael Douglas
Associate Professor Neeraj Gill
<table>
<thead>
<tr>
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<th>Mr Guy Coffey</th>
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# Independent Health Advice Panel

## Clinical Assessment

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<tr>
<td><strong>Reconvened IHAP meeting (if required):</strong></td>
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**Treating Doctor’s referral received?** Yes

**Was the Referring Doctor’s clinical assessment performed remotely or in person?** Remotely

**Health Service Provider clinical summary received:** Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

- Secretariat attending: [s22(1)(a)(ii)]
- The panel noted [s47F]
- The panel noted [s47F]
- The panel also noted that [s47F]

---

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All IHAP Panel members agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.

Actions:

- The Panel to be notified once is transferred to Australia.

Document library reviewed: ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 7.11.2019 – 2 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

Panel members assessing:

- Associate Professor Susan Moloney (Chair)
- Dr Michael Douglas
- Mr Guy Coffey
- Professor Paul Kelly

IHAP Majority recommendation:

Is the Minister’s refusal confirmed: No

Majority (out of total members): 4/7
<table>
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<tr>
<th><strong>Date of IHAP recommendation:</strong></th>
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# Independent Health Advice Panel

## Clinical Assessment

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</table>
| IHAP referral date/time: | 14/11/2019  
Time: 12:00 hrs |  |
| IHAP Meeting date: | 16/11/2019  
Time: 08:00 hrs | Treating Doctor’s referral received?  
Yes |
| Reconstituted IHAP meeting (if required): | N/A  
Was the Referring Doctor’s clinical assessment performed remotely or in person?  
Remotely | Health Service Provider clinical summary received:  
Yes |

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: s22(1)(a)(ii)
- The Panel noted that s47F.
- The Panel noted that s47F.
- The Panel also recommended s47F.
- The Panel recommend transfer to Australia.

---

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IHAP recommendations

All IHAP Panel members agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- 
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.

Actions:

- Transfer to Australia.
- The Panel to be notified once transferred.

Document library reviewed: ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 09.11.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a.
   b.
4. Clinical Records

Panel members assessing:

Dr Antonio Di Dio
Professor Paul Kelly
Associate Professor Susan Moloney (Chair)
Dr Michael Douglas
Mr Guy Coffey

IHAP Majority recommendation:

Is the Minister's refusal confirmed: No
Majority (out of total members): 5/7
Transfer is recommended: Yes
Date of IHAP recommendation: 16/11/2019
Time of IHAP recommendation: 1127hrs
| **Deemed approval (post 72 hours)?** | No | **Meeting audio recorded:** | No |

Deemed approval (post 72 hours)?

Meeting audio recorded: No
# Independent Health Advice Panel

## Clinical Assessment

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<th>Meeting details</th>
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| **IHAP referral date/time:** | 14/11/2019  
Time: 12:00 hrs | N/A |
| **IHAP Meeting date:** | 16/11/2019  
Time: 08:00 hrs | **Treating Doctor's referral received:**  Yes |
| **Reconvened IHAP meeting (if required):** | N/A | **Was the Referring Doctor’s clinical assessment performed remotely or in person:** Remotely |
| **Health Service Provider clinical summary received:** | Yes | |

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: [s22(1)(a)(ii)]
- The Panel noted that [s47F]
- The Panel noted that [s47F]
- The Panel noted that [s47F]
- The Panel noted that [s47F]

---

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**Sensitive: Personal**
IHAP recommendations

All IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- The Panel request

Document library reviewed: ABF Client brief – 4 pages

1. Clinical Advisory Team (MOC) Opinion dated 06.11.2019 – 2 pages
2. Letter from advocate – 3 pages
3. Treating Drs referral –
   a. 
   b. 
   c. 
4. Clinical Records

Panel members assessing:

- Dr Antonio Di Dio
- Professor Paul Kelly
- Associate Professor Susan Moloney (Chair)
- Dr Michael Douglas
- Mr Guy Coffey

IHAP Majority recommendation: Is the Minister's refusal confirmed: Yes

Sensitive: Personal
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<tbody>
<tr>
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<tr>
<td>Date of IHAP recommendation:</td>
<td>16/11/2019</td>
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<tr>
<td>Time of IHAP recommendation:</td>
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<tr>
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<td>Meeting audio recorded:</td>
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### Independent Health Advice Panel

#### Clinical Assessment

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| IHAP referral date/time: | 14/11/2019  
Time: 12:00 hrs | |
| IHAP Meeting date: | 16/11/2019  
Time: 08:00 hrs | |
| Reconvened IHAP meeting (if required): | N/A | |

| Treating Doctor's referral received? | Yes |
| Was the Referring Doctor's clinical assessment performed remotely or in person? | Remotely |

| Health Service Provider clinical summary received: | Yes |

#### Interview with Transitory Person

- [☐] The IHAP undertook an interview.
- [☐] The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- [☒] The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

#### IHAP findings:

- Secretariat attending: \[s22(1)(a)(ii)\]
- The Panel considered \[s47F\] case and noted that \[s47F\]

- The Panel agreed that \[s47F\]

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IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that [redacted] transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

1. 
2. 

Based on the above reasons, the Panel agreed that their recommendation is to approve [redacted] transfer to Australia for treatment.

Actions:

- Transfer [redacted] to Australia [redacted]

Document library reviewed: ABF Client brief – 3 pages

2. Letter from advocate [redacted] – 2 pages
3. [redacted]
4. Treating Drs referral –
   a. [redacted]
   b. [redacted]
5. Clinical Records [redacted]

Panel members assessing:

Dr Antonio Di Dio
Professor Paul Kelly
Associate Professor Susan Moloney (Chair)
| IHAP Majority recommendation: | Dr Michael Douglas  
|                            | Mr Guy Coffey |
| Is the Minister’s refusal confirmed: | Yes |
| Majority (out of total members): | 5/7 |
| Transfer is recommended: | Yes |
| Date of IHAP recommendation: | 16/11/2019 |
| Time of IHAP recommendation: | 1127hrs |
| Deemed approval (post 72 hours)? | No |
| Meeting audio recorded: | No |
Independent Health Advice Panel

Clinical Assessment

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</table>

Treating Doctor’s referral received? Yes

Was the Referring Doctor’s clinical assessment performed remotely or in person? Remotely

Health Service Provider clinical summary received: Yes

Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

IHAP findings:

Secretariat attending:  

The Panel discussed the treating doctors reports and and noted that  

, the Panel recommended . The Panel note that  

the panel recommend transfer to Australia .
IHAP recommendations

All IHAP Panel members agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- [Reasons for approval]

Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.

Actions:

- Transfer to Australia
- The panel to be notified once transferred.

Document library reviewed:
ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 08.11.2019 – 1 page
2. Letter from advocate – 3 pages
3. Treating Drs referral –
   a. 
4. Clinical Records

Panel members assessing:

Dr Antonio Di Dio
Professor Paul Kelly
Associate Professor Susan Moloney (Chair)
Dr Michael Douglas
Mr Guy Coffey

IHAP Majority recommendation:

<table>
<thead>
<tr>
<th>Is the Minister's refusal confirmed:</th>
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<tbody>
<tr>
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Sensitive: Personal
### Date of IHAP recommendation:

<table>
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</table>

### Time of IHAP recommendation:

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### Deemed approval (post 72 hours)?

<table>
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### Meeting audio recorded:

<table>
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**Sensitive: Personal**

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**Released by Department of Home Affairs under the Freedom of Information Act 1982**

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## Independent Health Advice Panel

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<td><strong>Reconvened IHAP meeting (if required):</strong></td>
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</table>

- **Treating Doctor’s referral received:** Yes
- **Was the Referring Doctor’s clinical assessment performed remotely or in person:** Remotely
- **Health Service Provider clinical summary received:** Yes

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- **Secretariat attending:**
- The Panel note that

- The panel agreed that
- The Panel recommend
  - The Panel further

---

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IHAP recommendations

All IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- 
- 
- 
- 
- Full report to be provided to the Panel

Document library reviewed: ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 04.11.2019 – 2 pages
2. Letter to Minister - Notice of Submission – 8 pages
3. Clinical Records
4. Clinical Records

Panel members assessing:

Dr Antonio Di Dio
Professor Paul Kelly
Associate Professor Susan Moloney (Chair)
Dr Michael Douglas
Mr Guy Coffey

IHAP Majority recommendation:

Is the Minister’s refusal confirmed: Yes

Majority (out of total members): 5/7

Transfer is recommended: No
### Date of IHAP recommendation:
- **Date:** 16/11/2019

### Time of IHAP recommendation:
- **Time:** 1127hrs

### Deemed approval (post 72 hours)?
- **Approval:** No

### Meeting audio recorded?
- **Recorded:** No
Independent Health Advice Panel

Clinical Assessment

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Treating Doctor’s referral received? Yes

Was the Referring Doctor’s clinical assessment performed remotely or in person? Remotely

Health Service Provider clinical summary received: Yes

Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

IHAP findings:

Secretariat attending: s22(1)(a)(ii)...

The Panel noted that s47F...

The Panel noted that s47F...

The Panel noted that s47F...

The Panel noted that s47F...

The Panel agreed that s47F...

The Panel noted that s47F...

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IHAP recommendations

All IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

1. 
2. 
3. 

Document library reviewed: ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 5.11.2019 – 2 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

Panel members assessing: Dr Antonio Di Dio
Professor Paul Kelly
| IHAP Majority recommendation: | Associate Professor Susan Moloney (Chair)  
Dr Michael Douglas  
Mr Guy Coffey |
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### Interview with Transitory Person

- The IHAP undertook an interview.

- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- The Panel noted such and such. The Panel noted such and such.
- The Panel noted such and such. The Panel noted such and such.
- The Panel noted such and such. The Panel noted such and such.
- The Panel noted such and such. The Panel noted such and such.
- The Panel noted such and such.
IHAP recommendations

All IHAP Panel members agreed that their recommendation was that \[\text{transfer to Australia be approved}\]. The Panel agreed that their recommendation was based on the following factors:

- \[\text{Reason 1}\]
- \[\text{Reason 2}\]

Based on the above reasons, the Panel agreed that their recommendation is to approve \[\text{transfer to Australia for treatment}\].

Actions:

1. \[\text{be transferred to Australia}\]

Document library reviewed: ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 04.11.2019 – 1 page
2. Notice of ‘relevant transitory person’ under s198E (25.10.19)
3. Treating Drs referral –
   a. \[\text{Reason a}\]
   b. \[\text{Reason b}\]
   c. \[\text{Reason c}\]
4. Clinical Records

Panel members assessing:

Dr Antonio Di Dio
Professor Paul Kelly
Associate Professor Susan Moloney (Chair)
| IHAP Majority recommendation: | Dr Michael Douglas  
Mr Guy Coffey |
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>Is the Minister’s refusal confirmed:</td>
<td>No</td>
</tr>
<tr>
<td>Majority (out of total members):</td>
<td>5/7</td>
</tr>
<tr>
<td>Transfer is recommended:</td>
<td>Yes</td>
</tr>
<tr>
<td>Date of IHAP recommendation:</td>
<td>16/11/2019</td>
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<tr>
<td>Time of IHAP recommendation:</td>
<td>11:25</td>
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<tr>
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<td>Meeting audio recorded:</td>
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### Independent Health Advice Panel

#### Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
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| **IHAP referral date/time:** | 14/11/2019  
Time: 12:00 hrs |
| **IHAP Meeting date:** | 16/11/2019  
Time: 08:00 hrs |
| **Reconvened IHAP meeting (if required):** | N/A |

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<th>Treating Doctor’s referral received?</th>
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<tr>
<td>Was the Referring Doctor’s clinical assessment performed remotely or in person?</td>
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</tr>
<tr>
<td>Health Service Provider clinical summary received:</td>
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</tr>
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</table>

#### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

#### IHAP findings:

- Secretariat attending: [s22(1)(a)(ii)]
- The Panel noted that [s47F]
- The Panel noted that [s47F]
- The Panel agreed that [s47F]

---

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IHAP recommendations

All IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

1. 
2. 
3. 

Document library reviewed: ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 8.11.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
   c. 
4. Clinical Records

Panel members assessing: Dr Antonio Di Dio
Professor Paul Kelly
<table>
<thead>
<tr>
<th>IHAP Majority recommendation:</th>
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<tr>
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<tr>
<td><strong>Health Service Provider</strong>&lt;br&gt;clinical summary received:</td>
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#### Interview with Transitory Person

- [ ] The IHAP undertook an interview.
- [ ] The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

#### IHAP Findings:

- Secretariat attending: s22(1)(a)(ii)
- The Panel noted that.
- The Panel noted that.
- The Panel noted that.
- The Panel noted that.
- The Panel agreed that.

---

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IHAP recommendations

All IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

1. 
2. 
3. 
4. 

Document library reviewed: ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 29.10.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

Panel members assessing:

Professor Paul Kelly
Associate Professor Susan Moloney (Chair)
Dr Michael Douglas
Mr Guy Coffey

IHAP Majority recommendation: Is the Minister’s refusal confirmed: Yes
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# Independent Health Advice Panel

## Clinical Assessment

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<td><strong>IHAP referral date/time:</strong></td>
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<td>Time: 15:45 hrs</td>
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</table>

| IHAP Meeting date:               | 17/11/2019      |
| Time: 16:00 hrs                  |                 |

| Reconvened IHAP meeting            | N/A             |
| (if required)                     |                 |

| Treating Doctor’s referral received? | Yes             |

<table>
<thead>
<tr>
<th>Was the Referring Doctor’s clinical assessment performed remotely or in person?</th>
<th>Remotely</th>
</tr>
</thead>
</table>

| Health Service Provider clinical summary received: | Yes |

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

Secretariat attending: s22(1)(a)(i)

Following IHAP document review s47F has been diagnosed with:

- The panel noted s47F. They noted s47F
- The panel noted s47F. They also noted that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

---

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IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- 
- 
- 
- 

Document library reviewed: ABF Client brief – 3 pages

2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

Panel members assessing: Dr Antonio Di Dio
                               Dr Parbodh Gogna
                               Professor Brendan Murphy
<table>
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<tr>
<th>IHAP Majority recommendation:</th>
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<tr>
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<td></td>
<td>Transfer is recommended:</td>
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<tr>
<td>Date of IHAP recommendation:</td>
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<tr>
<td>Deemed approval (post 72 hours)?</td>
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<td>No</td>
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### Independent Health Advice Panel

#### Clinical Assessment

<table>
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<th>Biodata details</th>
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| **IHAP referral date/time:** | 14/11/2019  
Time: 09:45 hrs | |
| **IHAP Meeting date:** | 15/11/2019  
Time: 18:00 hrs | |
| **Reconvened IHAP meeting (if required):** | N/A | |
| **Treating Doctor’s referral received?** | Yes | |
| **Was the Referring Doctor’s clinical assessment performed remotely or in person?** | Remotely | |
| **Health Service Provider clinical summary received:** | No | |

**Interview with Transitory Person**

☑ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

- Secretariat attending: s22(1)(a)(ii)
- Following IHAP document review s47F has been diagnosed with:
  - The panel noted s47F
  - The panel also noted s47F
  - The panel also noted s47F
IHAP recommendations

All IHAP Panel members agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.

Actions:

- The Panel to be notified once is transferred to Australia.

Document library reviewed: ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 31 OCT 2019 – 2 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

Panel members assessing:

Associate Professor Susan Moloney (Chair)
Dr Michael Douglas
Mr Guy Coffey
Professor Paul Kelly

IHAP Majority recommendation:

Is the Minister’s refusal confirmed: No
Majority (out of total members): 4/7
Transfer is recommended: Yes
### Date of IHAP recommendation:
15/11/2019

### Time of IHAP recommendation:
22:13hrs

---

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FOI reference: FA 20/02/01088

FOI Document #136

Released by Department of Home Affairs under the Freedom of Information Act 1982
## Independent Health Advice Panel

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<td>IHAP Meeting date:</td>
<td>Treating Doctor’s referral received?</td>
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<td>17/11/2019</td>
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<tr>
<td>Reconvened IHAP meeting (if required):</td>
<td>Was the Referring Doctor’s clinical assessment performed remotely or in person?</td>
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<td>N/A</td>
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<td></td>
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### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: s22(1)(a)(ii)
- The Panel note that s47F.
- The Panel note that s47F. The Panel recommend s47F.
- Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

---

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Sensitive: Personal
IHAP recommendations

All IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- The Panel to be provided with a report
- The Panel to be provided with a report as soon as possible and no later than one week

Document library reviewed: ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 11.11.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a.
   b.
4. Clinical Records

Panel members assessing:

- Dr Antonio Di Dio
- Dr Parbodh Gogna
- Professor Brendan Murphy
- Associate Professor Susan Moloney (Chair)
- Associate Professor Neeraj Gill
- Dr Michael Douglas

IHAP Majority recommendation:

<table>
<thead>
<tr>
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Transfer is recommended: No

Sensitive: Personal
## Clinical Assessment

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- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

## IHAP findings:
- Secretariat attending: [s22(1)(a)(ii)]
- The panel noted [s47F]. They noted that [s47F].
- The panel also noted [s47F].
- The panel also noted that [s47F].

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.
IHAP recommendations

All IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- The panel noted

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- 
- 
- 
- 

Document library reviewed:  ABF Client brief – 2 pages

1. Clinical Advisory Team (MOC) Opinion dated 11.11.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

Panel members assessing:  

Dr Antonio Di Dio
Dr Parbodh Gogna
<table>
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Independent Health Advice Panel

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**Interview with Transitory Person**
- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**
- Secretariat attending: s22(1)(a)(ii)
- The panel noted that s47F
- Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.
IHAP recommendations

All IHAP Panel members agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- The panel noted that
- The panel also noted that

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- 
- 
- 

Document library reviewed: ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 08.11.2019 – 2 pages
2. Letter from advocate – 3 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

Panel members assessing: Dr Antonio Di Dio
Dr Parbodh Gogna
<table>
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Time: 15:20 hrs |
| **IHAP Meeting date:** | 23/11/2019  
Time: 16:00 hrs |
| **Reconvened IHAP meeting (if required):** | N/A |
| **Interview with Transitory Person** | |
| ☐ The IHAP undertook an interview. | |
| ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier. | |
| ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person. | |
| **IHAP findings:** | |
| Secretariat attending: | |
| The Panel noted that | |

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.
IHAP recommendations
All IHAP Panel members present agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:
- 
- 
- 

Document library reviewed:
ABF Client brief – 2 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

Panel members assessing:
Dr Antonio Di Dio (Chair)
Professor Brendan Murphy
Associate Professor Susan Moloney
Associate Professor Neeraj Gill

IHAP Majority recommendation:
Is the Minister’s refusal confirmed: Yes
Majority (out of total members): 4/7
Transfer is recommended: No
## Date of IHAP recommendation:

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## Deemed approval (post 72 hours)?

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## Independent Health Advice Panel

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<td><strong>IHAP referral date/time:</strong></td>
<td><strong>447F</strong></td>
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<td>18/11/2019</td>
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<td>Time: 16:53 hrs</td>
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<tr>
<td><strong>IHAP Meeting date:</strong></td>
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</tr>
<tr>
<td>20/11/2019</td>
<td>Yes</td>
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<td>Time: 08:00 hrs</td>
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<td><strong>Reconvened IHAP meeting (if required):</strong></td>
<td><strong>Was the Referring Doctor’s clinical assessment performed remotely or in person?</strong></td>
</tr>
<tr>
<td>N/A</td>
<td>Remotely</td>
</tr>
<tr>
<td><strong>Health Service Provider clinical summary received:</strong></td>
<td>No</td>
</tr>
</tbody>
</table>

### Interview with Transitory Person

- ☐ The IHAP undertook an interview.
- ☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- ☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

**Secretariat attending:** s22(1)(a)(ii)

The Panel considered the case and noted the recommendation from the Medical Officer of the Commonwealth. The Panel noted that s47F

The Panel discussed s47F. The Panel agreed that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.
IHAP recommendations

All IHAP Panel members agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- the Panel recommend transfer to Australia

Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.

Actions:

- to be transferred to Australia
- The Panel to be notified once transferred.

Document library reviewed: ABF Client brief – 5 pages

1. Clinical Advisory Team (MOC) Opinion dated 1.11.2019 – 1 page
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

Panel members assessing:

Dr Antonio Di Dio (Chair)
Dr Parbodh Gogna
Associate Professor Susan Moloney
Associate Professor Neeraj Gill
Dr Michael Douglas
<table>
<thead>
<tr>
<th>IHAP Majority recommendation:</th>
<th>Is the Minister’s refusal confirmed:</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Majority (out of total members):</td>
<td>5/7</td>
</tr>
<tr>
<td></td>
<td>Transfer is recommended:</td>
<td>Yes</td>
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<tr>
<td>Date of IHAP recommendation:</td>
<td>Time of IHAP recommendation:</td>
<td>10:00 hrs</td>
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<tr>
<td>21/11/2019</td>
<td></td>
<td></td>
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<tr>
<td>Deemed approval (post 72 hours)?</td>
<td>Meeting audio recorded:</td>
<td>No</td>
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</table>

Date of IHAP recommendation: 21/11/2019

Time of IHAP recommendation: 10:00 hrs

Deemed approval (post 72 hours)? No

Meeting audio recorded: No
## Independent Health Advice Panel

### Clinical Assessment

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<td><strong>IHAP Meeting date:</strong></td>
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<td>27/11/2019</td>
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<td>Time: 07:00 hrs</td>
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<td><strong>Reconvened IHAP meeting (if required):</strong></td>
<td>Treating Doctor's referral received?</td>
</tr>
<tr>
<td>N/A</td>
<td></td>
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<tr>
<td><strong>Interview with Transitory Person</strong></td>
<td></td>
</tr>
<tr>
<td>☐ The IHAP undertook an interview.</td>
<td></td>
</tr>
<tr>
<td>☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.</td>
<td></td>
</tr>
<tr>
<td>☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.</td>
<td></td>
</tr>
</tbody>
</table>

**IHAP findings:**

The panel noted S47F  
The panel notes that S47F  
The panel noted that S47F  
The panel also noted S47F  
The panel noted that S47F  

---

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IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- The panel agrees that these items can be addressed in Port Moresby.

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

Document library reviewed: ABF Client brief – 3 pages

2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records
### Panel members assessing:
- Dr Antonio Di Dio (Chair)
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill
- Mr Guy Coffey

### IHAP Majority recommendation:
- **Is the Minister's refusal confirmed:** Yes
- **Majority (out of total members):** 4/7
- **Transfer is recommended:** No

<table>
<thead>
<tr>
<th>Date of IHAP recommendation:</th>
<th>27/11/2019</th>
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<tbody>
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<td>Time of IHAP recommendation:</td>
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<td>No</td>
</tr>
<tr>
<td>Meeting audio recorded:</td>
<td>No</td>
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</table>
**Independent Health Advice Panel**

**Clinical Assessment**

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
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<td><strong>IHAP referral date/time:</strong></td>
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<td>29/11/2019  &lt;br&gt; Time: 0700 hrs</td>
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<tr>
<td><strong>Reconvened IHAP meeting (if required):</strong></td>
<td>N/A</td>
</tr>
</tbody>
</table>

- **Treating Doctor’s referral received?**  Yes
- **Was the Referring Doctor’s clinical assessment performed remotely or in person?**  Remotely
- **Health Service Provider clinical summary received:**  Yes

**Interview with Transitory Person**

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

- Secretariat attending: 822(1)(a)(ii)

- The panel noted 847F

  The panel also noted 847F

- The panel noted 847F

  The panel agreed that 847F
IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- 
- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

- 
- 
- 

Document library reviewed: ABF Client brief – 4 pages

2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records
| Panel members assessing: | Dr Antonio Di Dio  
Associate Professor Susan Moloney (Chair)  
Associate Professor Neeraj Gill  
Mr Guy Coffey |
|--------------------------|----------------------------------|
| IHAP Majority recommendation: | Is the Minister’s refusal confirmed: Yes  
Majority (out of total members): 4/7  
Transfer is recommended: No |
| Date of IHAP recommendation: | 29/11/2019  
Time of IHAP recommendation: 08:00 hrs |
| Deemed approval (post 72 hours)? | No  
Meeting audio recorded: No |
# Independent Health Advice Panel

## Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
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</thead>
<tbody>
<tr>
<td><strong>IHAP referral date/time:</strong></td>
<td>S47F</td>
</tr>
<tr>
<td>02/12/2019</td>
<td>Time: 16:20 hrs</td>
</tr>
<tr>
<td><strong>IHAP Meeting date:</strong></td>
<td>Treating Doctor's referral received?</td>
</tr>
<tr>
<td>04/12/2019</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Reconvened IHAP meeting (if required):</strong></td>
<td>Was the Referring Doctor's clinical assessment performed remotely or in person?</td>
</tr>
<tr>
<td>N/A</td>
<td>Remotely</td>
</tr>
<tr>
<td><strong>Interview with Transitory Person</strong></td>
<td>Health Service Provider clinical summary received:</td>
</tr>
<tr>
<td>☐ The IHAP undertook an interview.</td>
<td>Yes</td>
</tr>
<tr>
<td>☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.</td>
<td></td>
</tr>
<tr>
<td>☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.</td>
<td></td>
</tr>
</tbody>
</table>

### IHAP findings:

- Secretariat attending: S22(1)(a)(ii)
- The Panel considered S47F
- The Panel noted S47F
- The Panel noted S47F
- The panel note that S47F
- The Panel do not have confidence that S47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.
IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.

Actions:

- should be transferred to Australia for medical treatment; and
- The Panel be notified once this has occurred.

Document library reviewed: ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 22.11.2019 – 2 pages
2. Letter from advocate – 2 pages
3. Treating Drs referral –
   a.
   b.
   c.
4. Clinical Records

Panel members assessing:

Dr Parbodh Gogna (Chair)
Associate Professor Neeraj Gill
Dr Michael Douglass
Mr Guy Coffey

IHAP Majority recommendation:

Is the Minister’s refusal confirmed: No
Majority (out of total members): 4/7
Transfer is recommended: Yes

Date of IHAP recommendation: 4/12/2019
Time of IHAP recommendation: 1912hrs
| Deemed approval (post 72 hours)? | No | Meeting audio recorded: | No |

Deemed approval (post 72 hours)?

Meeting audio recorded:

No
Independent Health Advice Panel

Clinical Assessment

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
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</table>
| IHAP referral date/time: 02/12/2019  
Time: 16:20 hrs |  |
| IHAP Meeting date: 04/12/2019  
Time: 18:00 hrs | Treating Doctor’s referral received? Yes |
| Reconvened IHAP meeting (if required): N/A | Was the Referring Doctor’s clinical assessment performed remotely or in person? Remotely |

Interview with Transitory Person

☐ The IHAP undertook an interview.

☐ The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.

☒ The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

IHAP findings:

Secretariat attending: s22(1)(a)(ii)  
s47F

☐ The Panel agree that s47F

Dr Gogna advised that he was the Area Medical Director on Christmas Island during 2012/2013 and all arrivals had his name listed on the pathology and chest x-ray requests. The Panel noted the potential/perceived conflict of interest and as the Dr Gogna was not the treating doctor on Christmas Island allowed Dr Gogna to continue in the discussion.

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IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.

Actions:

- be transferred to Australia
- The Panel be notified once transfer has occurred.

Document library reviewed: ABF Client brief – 3 pages

2. Letter from advocate – 6 pages
3. Treating Drs referral –
   a.
   b.
4. Clinical Records

Panel members assessing:

Dr Parbodh Gogna (Chair)
Associate Professor Neeraj Gill
Dr Michael Douglas
Mr Guy Coffey

IHAP Majority recommendation:

Is the Minister’s refusal confirmed: No
Majority (out of total members): 4/7
Transfer is recommended: Yes
Date of IHAP recommendation: 4/12/2019
Time of IHAP recommendation: 1912hrs
Deemed approval (post 72 hours)? No
Meeting audio recorded: No
**Independent Health Advice Panel**

**Clinical Assessment**

<table>
<thead>
<tr>
<th>Meeting details</th>
<th>Biodata details</th>
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<tr>
<td><strong>IHAP referral date/time:</strong></td>
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<tbody>
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<td>29/11/2019</td>
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<th><strong>Health Service Provider clinical summary received:</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>No</td>
</tr>
</tbody>
</table>

**Interview with Transitory Person**

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

**IHAP findings:**

- Secretariat attending.
- The Panel noted the notes of the treating doctors, and the recommendation of the Medical Officer of the Commonwealth.
- The Panel expressed concern that.
- The Panel noted.
- The Panel noted.
- The Panel noted.

---

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IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be approved. The Panel agreed that their recommendation was based on the following factors:

- 
- 

Based on the above reasons, the Panel agreed that their recommendation is to approve transfer to Australia for treatment.

Actions:

- transfer be transferred to Australia
- The Panel be informed once this transfer is complete.

Document library reviewed: ABF Client brief – 4 pages

1. Clinical Advisory Team (MOC) Opinion dated 19.11.2019 – 1 pages
2. Letter from advocate – 3 pages
3. Treating Drs referral – a. b.
4. Clinical Records

Panel members assessing:
Dr Antonio Di Dio (Chair)
Professor Brendan Murphy
Associate Professor Neeraj Gill
Mr Guy Coffey

IHAP Majority recommendation:

<table>
<thead>
<tr>
<th>Is the Minister's refusal confirmed:</th>
<th>No</th>
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<tbody>
<tr>
<td>Majority (out of total members):</td>
<td>4/7</td>
</tr>
<tr>
<td>Transfer is recommended:</td>
<td>Yes</td>
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Released by Department of Home Affairs
under the Freedom of Information Act 1982
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<tr>
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<th>30/11/2019</th>
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<td>Deemed approval (post 72 hours)?</td>
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Date of IHAP recommendation: 30/11/2019
Time of IHAP recommendation: 11:41am
Deemed approval (post 72 hours)? No
Meeting audio recorded: No
# Independent Health Advice Panel

## Clinical Assessment

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| **IHAP referral date/time:** | 28/11/2019  
Time: 10:21 hrs |  

| **IHAP Meeting date:** | 29/11/2019  
Time: 18:00 hrs | **Treating Doctor’s referral received?** | Yes |
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<tbody>
<tr>
<td><strong>Reconvened IHAP meeting (if required):</strong></td>
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<td><strong>Was the Referring Doctor’s clinical assessment performed remotely or in person?</strong></td>
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<tr>
<td><strong>Treating Doctor’s referral received?</strong></td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- Secretariat attending: s22(1)(a)(ii)
- The Panel noted s47F.
- The Panel recommends s47F.
- The Panel strongly believes s47F.

---

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IHAP recommendations
All IHAP Panel members present agreed that their recommendation was that **refused** transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- **Refused** transfer to Australia for treatment.

Based on the above reasons, the Panel agreed that their recommendation is to refuse **refused** transfer to Australia for treatment.

Actions:

- **Refused**
- 
- 

Document library reviewed: ABF Client brief – 3 pages

2. Letter from advocate – 2 pages
3. Treating Drs referral –
   - a.
   - b.
   - c.
4. Clinical Records

Panel members assessing:
Dr Antonio Di Dio (Chair)
Professor Brendan Murphy
Associate Professor Neeraj Gill
Mr Guy Coffey

IHAP Majority recommendation:

<p>| Is the Minister’s refusal confirmed: | Yes |
| Majority (out of total members):    | 4/7 |
| Transfer is recommended:            | No  |</p>
<table>
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<tr>
<th>Date of IHAP recommendation:</th>
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### Independent Health Advice Panel

#### Clinical Assessment

<table>
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<th>Biodata details</th>
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| **IHAP referral date/time:** | 29/11/2019  
Time: 1600 hrs |
| **IHAP Meeting date:** | 30/11/2019  
Time: 16:00 hrs |
| **Reconvened IHAP meeting (if required):** | N/A |

- **Treating Doctor's referral received?** Yes
- **Was the Referring Doctor's clinical assessment performed remotely or in person?** Remotely
- **Health Service Provider clinical summary received:** Yes

### Interview with Transitory Person

- The IHAP undertook an interview.
- The IHAP attempted to conduct an interview but was unable to do this due to lack of capability/capacity/logistics/consent/other barrier.
- The IHAP determined that it was not appropriate to conduct an interview because of risk of harm to the person.

### IHAP findings:

- **Secretariat attending:**
- **The Panel noted that**

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IHAP recommendations

All IHAP Panel members present agreed that their recommendation was that transfer to Australia be refused. The Panel agreed that their recommendation was based on the following factors:

- Based on the above reasons, the Panel agreed that their recommendation is to refuse transfer to Australia for treatment.

Actions:

-
-

Document library reviewed: ABF Client brief – 3 pages

1. Clinical Advisory Team (MOC) Opinion dated 22.11.2019 – 2 pages
2. Letter from advocate – 3 pages
3. Treating Drs referral –
   a. 
   b. 
4. Clinical Records

Panel members assessing:

- Dr Antonio Di Dio (Chair)
- Professor Brendan Murphy
- Associate Professor Susan Moloney
- Associate Professor Neeraj Gill

IHAP Majority recommendation:

<table>
<thead>
<tr>
<th>Is the Minister's refusal confirmed:</th>
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<tbody>
<tr>
<td>Majority (out of total members):</td>
<td>4/7</td>
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