



OCCUPATIONAL ENGLISH TEST

# Writing sub-test

## Medicine

March 2015

Please print in **BLOCK LETTERS**

Candidate number

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Family name

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Other name(s)

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City

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Date of test

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Candidate's signature

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**YOU MUST NOT REMOVE OET MATERIAL FROM THE TEST ROOM**

**The OET Centre**

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# OCCUPATIONAL ENGLISH TEST

**WRITING SUB-TEST: MEDICINE**

**TIME ALLOWED: READING TIME: 5 MINUTES**  
**WRITING TIME: 40 MINUTES**

Read the case notes below and complete the writing task which follows.

## **Notes:**

Your patient, an 81-year-old woman, recently had a right total knee replacement (R.TKR) on 25/02/2015. She is being discharged today.

**Patient:** Ms Betty Johnson  
**Address:** 12 Merry Street, Stillwater  
**Marital Status:** Widowed  
**Past Medical History:** Aortic valve replacement & pacemaker 2010  
Osteoarthritis since 2011 — pain & immobility ↑ past 3yrs  
For R.TKR Feb 2015: full blood work, typing & cross matching, X-rays, ECG etc.

### **Regular Medication (25/2/15):**

Paracetamol 665mg 2 tabs tds  
Warfarin 3mg mane — ceased 5 days preoperatively, started Clexane (enoxaparin sodium — anticoagulant)

**Social Background:** Widowed 1986. Lives alone. 4 children

### **Post Op:**

**25/02/15 11:30am** Returned to ward following R. TKR.  
Vital signs — BP 115/70, P 82, R 16, T 36.9°C.  
Circulation observation good, knee ↑ on pillow.  
Hb 80g/l → IVT Transfusion.  
IV cephalothin 1g qid for 24 hours.  
Increase regular oral paracetamol (1g qds).  
Patient Controlled Analgesia (PCA) — morphine ✓ effective.  
Wound — nil ooze.

**26/02/15** Wound — good, sponged.  
Restart warfarin 5mg today.  
s/c Clexane 80mg given for anticoagulation.  
Cease PCA. Start oxycodone 5 – 10mg prn.  
Pathology: FBE, U&Es, Liver Function Tests (LFTs), Hb.  
Path results ✓, Hb 100g/l → commence Feratab (iron sulphate) 300mg mane.

**27/02/15** s/c Clexane 80mg.  
Start warfarin 5mg nocte.  
Removal of (R/O) dressing, wound good, R/O alt. clips on 03/03/15.

**28/02/15** Crutches, short walks. Wound good, afebrile.  
s/c Clexane 80mg given.

01/03/15	s/c Clexane 80mg given.
02/03/15	X-rays, bloods ✓, INR — 3.0, Hb 111g/l, ECG – no abnormalities. Managing w/ min assistance. Cease Clexane.
03/03/15–05/03/15	Wound clean, R/O alt clips tomorrow. Mobility good. Obs ✓.
06/03/15	R/O remaining clips. Pathology ✓. Transfer to rehab today.
<b>Rehab:</b>	
07/03/15	Admission complete – stable. Circ ✓. Mobility, crutches good.
08/03/15–13/03/15	Mobility, frame use, trial stick, pool, gentle exercises = good. Showering w/ min assistance. Path & X-ray.
14/03/15	Path ✓, INR — 3.8. ↓ warfarin 4mg nocte, Hb — 112g/l, ↓ Feratab 150mg mane.
15/03/15–19/03/15	Uneventful – gradually ↑ independence. Wound good. Obs ✓. Physio exercises good. Home list provided.
21/03/15	No cardiac issues.  Discharged w/ home nursing assistance (personal hygiene, home care). Wound exposed, shower w/ min assist. Stick / frame prn.  Discharge medication: warfarin 4mg nocte, Feratab 150mg mane, paracetamol 1g qds, oxycodone 5–10mg prn.  Rehab appt in 2 weeks.  Advised to see local doctor in 1 week, referral for local doctor — suggest repeat FBE, INR.

### **Writing Task:**

Using the information given in the case notes, write a letter of referral to Ms Johnson's local doctor, Dr Tony Jones, to update him on her condition following her recent surgery and discharge from rehab. Address the letter to Dr Tony Jones, Private Practice, 12 New Street, Stillwater.

**In your answer:**

- **Expand the relevant notes into complete sentences**
- **Do not use note form**
- **Use letter format**

**The body of the letter should be approximately 180–200 words.**