

Medicine Writing Week

Betty Weston

These case notes are official PPP materials - they are not to be shared!

Occupational English Test

PPP MEDSAMPLE03

WRITING SUB-TEST: MEDICINE
TIME ALLOWED: READING TIME: 5 MINUTES
WRITING TIME: 40 MINUTES

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

Notes:

Assume that today's date is 17 June 2018

You are a doctor in the Outpatients Clinic of Northwood Hospital. You see a patient who is complaining of a painful hand.

PATIENT DETAILS:

Name: Betty Weston
Marital status: Divorced
Residence: 59 Atlantic Avenue, Northwood
DOB: 12 Feb 1964 (55 years)
Next of kin: Mother (80 years)

Social background:

Occupation: supermarket manager (job: 'v tiring':
pt. aware that obesity is aggravating factor), long hours, 'on feet all day'
Lives with mother (is caregiver) & 2 of 3 children (sons aged 23 & 25), daughter: married, lives nearby
Diet: high-fat, high-calorie, irregular meals (often binges)
Leisure: TV, reading - no sports/physical activity

Past medical history:

Type 2 diabetes mellitus (2012), hypothyroidism (2015)
Obesity
Arthrosis
Surgeries: 1999 - appendectomy
2014 – cholecystectomy (cholecystitis diag. late 2013)
Obstetric history: G3P3A0L3
Allergies: none
Non smoker
No alcohol

Outpatient clinic: 10 Jun 2018

Presenting problem:

Numbness/tingling in thumb, index & middle finger of R hand (3 wks' duration), sleep disturbed by pain (relieved by moving fingers)
Difficulty unscrewing jar tops and gripping glass/cup, objects slip from fingers
Pt. denies trauma to R hand or pain in other joints

Physical examination:

VS: BP: 132/84 mmHg, P: 78 beats/minute,
T: 36°C, RR: 32 breaths/minute
Body Mass Index (BMI): 32 kg/m²
Cardiovascular: normal heart sounds, no murmurs
R hand: no swelling, ↓grip strength
Phalen's manoeuvre & Tinel's sign: both positive

Diagnosis: Carpal tunnel syndrome

Medications: Metformin 1500mg/day PO divided q8hr with meal (diabetes mellitus)
Enalapril 20mg PO qDay (diabetes mellitus)
Levothyroxine 25mcg PO qDay (hypothyroidism)
Paracetamol 500mg PO, prn

17 Jun 2018

Review of symptoms:

Fatigue, cold intolerance, constipation

Discharge plan: Conservative management: night-time wrist splinting (for >3 weeks)

Electromyography (EMG), nerve conduction study (NCS) → stabilise severity/exclude other neurologic diagnosis

↓BMI

Refer to physical therapy for aerobic fitness & weight-loss program (avoid exercises that cause wrist strain)

Continue baseline medication

Thyroid Stimulating Hormone (TSH) blood levels: assess need to ↑Levothyroxine

Refer to occupational therapy for wrist splint (custom- made, in neutral position) & ergonomics assessment

Writing Task:

Using the information given in the case notes, write a referral letter to Ms Goody, a community occupational therapist, for further management of Betty's condition. Address the letter to Ms Alison Goody, Occupational Therapist, Northwood Community Health Centre, Northwood.

Planning

Think about the 5 questions:

- 1) Who are we writing to? **Occupational Therapist**
- 2) What do they already know? **occupations, physio, mobility, access, difficulties, physical spaces, general medical ideas / don't know the patient**
- 3) What do they need to learn? **current condition - pain/mobility, social background & medical background**
- 4) Why am I writing today? **We need help that we can't give**
- 5) Is it urgent? No

And then consider paragraph function:

Introduction	<ul style="list-style-type: none"> - patient name - general medical context - general request 	<ul style="list-style-type: none"> - Betty Weston - general medical context general request
Timeline 1	Current condition	<p>Presenting problem:</p> <p>Numbness/tingling in thumb, index & middle finger of R hand (3 wks' duration), sleep disturbed by pain (relieved by moving fingers)</p> <p>Difficulty unscrewing jar tops and gripping glass/cup, objects slip from fingers</p> <p>Pt. denies trauma to R hand or pain in other joints</p> <p style="padding-left: 40px;">R hand: no swelling, ↓grip strength</p> <p style="padding-left: 40px;">Phalen's manoeuvre & Tinel's sign: both positive</p> <p>Diagnosis: Carpal tunnel syndrome</p> <p>Paracetamol 500mg PO, prn</p>
Background 1	Medical & Social/Lifestyle	<p>Lives with mother (is caregiver) (80 years)</p> <p>Occupation: supermarket manager (job: 'v tiring')</p> <p>Leisure: TV, reading - no sports/physical activity</p> <p>Type 2 diabetes mellitus (2012), hypothyroidism (2015)</p> <p>Obesity</p>
Request	<ul style="list-style-type: none"> - expand on the purpose <p>investigations - MRI, FBC, US, X ray, endoscopy, gastroscopy</p> <p>management - monitor compliance, regular reviews, stitch removal</p>	<p>Just for information:</p> <p>Electromyography (EMG), nerve conduction study (NCS) →stabilise severity/exclude other neurologic diagnosis</p> <p>↓BMI</p> <p>Refer to physical therapy for aerobic fitness & weight-loss program (avoid exercises that cause wrist strain)</p> <p>Conservative management: night-time wrist splinting (for >3 weeks)</p> <p>wrist splint (custom- made, in neutral position) & ergonomics assessment</p>

Homework: Send Background & Request to paul@set-english.com

Introductions

- lack of purpose
- unclear purpose
- too much detail
- bad relative clause
- missing punctuation

Student	Teacher
<p>I am writing regarding Betty Weston who has been experiencing numbness and pain in her right hand and recently diagnosed with Carpal Tunnel syndrome. She requires conservative management for her pain and ergonomics assessment.</p>	<p>I am writing regarding Betty Weston, who <i>has been experiencing</i> numbness and pain in her right hand and has been <i>recently diagnosed</i> with carpal tunnel syndrome. She requires conservative management for her pain and ergonomics assessment.</p> <p>Purpose!</p>
<p>Thank you for seeing Ms Weston, a supermarket manager, who has a carpal tunnel syndrome. I am writing to refer him for further ergonomics assessment and to request a wrist splint.</p>	<p>Thank you for seeing Ms Weston, a supermarket manager, who has a carpal tunnel syndrome. I am writing to refer him her for further ergonomics assessment and to request a wrist splint.</p>
<p>Ms Alison Goody Occupational Therapist Northwood Community Health Centre Northwood</p> <p>17th June 2018</p> <p>Dear Ms Goody,</p> <p>Re: Ms Betty Weston, aged 55</p> <p>I am writing to refer Ms Weston, who presented to our clinic on the 10th of June 2018, with signs and symptoms in keeping with carpal tunnel syndrome. She now requires your further management.</p>	<p>Ms Alison Goody Occupational Therapist Northwood Community Health Centre Northwood</p> <p>17th June 2018</p> <p>Dear Ms Goody,</p> <p>Re: Ms Betty Weston, aged 55</p> <p>I am writing to refer Ms Weston, who presented to our clinic on the 10th of June 2018, with signs and symptoms that indicate carpal tunnel syndrome. She now requires your further management.</p>

<p>Thank you for seeing Mrs Weston, who has been diagnosed with carpal tunnel syndrome. She is being referring to your care for further management of her condition.</p>	
<p>I'm writing to refer Mrs Weston, who presented to our clinic and was diagnosed with carpal tunnel syndrome. She now requires your further management and ergonomics assessment.</p>	
<p>This Mr Betty Weston,55y old supermarket manager, who was recently diagnosed to have Right hand Carpal tunnel syndrome.I referred him to you, occupational therapy for wrist splint and ergonomics assessment.</p>	<p>Thank you for seeing Ms Betty Weston, a 55-year-old supermarket manager, who was recently diagnosed with carpal tunnel syndrome. I am referring her to you for a wrist splint and ergonomics assessment.</p> <p>- be careful about including specific details about request! In this case it's ok but avoid unnecessary repetition</p>
<p>I am writing regarding Ms Weston, who was admitted to our hospital due to carpal tunnel syndrome. She is being referred to your facility and now requires further management of her condition.</p>	<p>I am writing regarding Ms Weston, who was admitted to our hospital due to carpal tunnel syndrome. She is being referred to you and now requires further management of her condition.</p>
<p>I am writing regarding Mrs Weston, who was diagnosed with carpal tunnel syndrome. She is being referred to your facility and she requires further management , including wrist splint with ergonomics assessment.</p>	<p>I am writing regarding Mrs Weston, who has been diagnosed with carpal tunnel syndrome. She is being referred to you and she requires further management, including a wrist splint with ergonomics assessment.</p>
<p>I am writing regarding Betty Weston, who has been admitted to our facility several times due to her complaints of a painful hand. She has been diagnosed with Carpal Tunnel Syndrome last week. She is now being referred to your clinic and requires further management.</p>	<p>I am writing regarding Betty Weston, who has been admitted to our facility twice and was diagnosed with carpal tunnel syndrome last week. She is now being referred to your clinic and requires further management.</p>
<p>I am writing regarding Mr Weston who visited our clinic recently due to pain in his right hand associated with carpal tunnel syndrome. He is being referred to you and requires your further assessment and management.</p>	<p>I am writing regarding Ms Weston, who visited our clinic recently due to pain in her right hand, associated with carpal tunnel syndrome. She is being referred to you and requires your further assessment and management.</p>
<p>I am writing regarding Ms Betty Weston, who visited our clinic recently due to carpal tunnel</p>	

<p>syndrome. She is being referred to you and now requires a wrist splint and ergonomics assessment.</p>	
<p>Ms Alison Good Occupational therapist Northwood community health Centre Northwood</p> <p>17/June/2018</p> <p>Dear Ms. Alison</p> <p>I would like to refer Ms Betty Weston to you who has been diagnosed with carpal tunnel syndrome on 10/7/2018 after presenting with right hand numbness and tingling , for wrist splinting and ergonomic assessment.</p>	<p>Ms Alison Goody</p> <p>Occupational therapist Northwood community health Centre Northwood</p> <p>17/June/2018</p> <p>Dear Ms. Alison</p> <p>Re line?</p> <p>I would like to refer Ms Betty Weston, who has been diagnosed with carpal tunnel syndrome, for wrist splinting and ergonomic assessment.</p> <p>Leave dates and symptoms for timeline</p>
<p>I am writing to refer Betty Weston who is diagnosed with Carpal tunnel syndrome on her right wrist. She requires wrist splint and ergonomics assesment.</p>	<p>I am writing to refer Betty Weston, who has been diagnosed with carpal tunnel syndrome in her right wrist. She requires a wrist splint and ergonomics assessment.</p>
<p>I am writing to refer Ms Betty Weston, who presented to our clinic recently due to numbness and tingling in her thumb, middle, and index finger of right hand for three weeks. In addition to that, she has been experiencing difficulty in sleep due to pain. Now she requires assessment for further management.</p>	<p>Too much information here - keep it brief</p>
<p>I am writing to refer Betty Weston, a 55 year old, supermarket manager. She was diagnosed with carpal tunnel syndrome, and now requires your further assessment and treatment.</p>	
<p>Dr.Alison Goody Occupational Therapist Northwood community health center Northwood</p> <p>17 June 2018</p> <p>Dear Dr goody,</p>	<p>Dr.Alison Goody Occupational Therapist Northwood community health center Northwood</p> <p>17 June 2018</p> <p>Dear Dr Goody,</p>

<p>Thank you for seeing Ms Weston, 55 year old patient, presented with pain in her fingers with possible diagnose of carpal tunel syndrom one weeks ago. I am reffering Ms weston to you for further managment and physical therapy if required.</p>	<p>RE line?</p> <p>Thank you for seeing Ms Weston, a 55 year old patient with the possible diagnosis of carpal tunnel syndrome. I am referring Ms Weston to you for further managment and physical therapy if required.</p> <p>Purpose - the OT will not provide physical therapy</p>
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Timeline Paragraph

<p>Timeline 1</p>	<p>Current condition</p>	<p>Presenting problem: Numbness/tingling in thumb, index & middle finger of R hand (3 wks' duration), sleep disturbed by pain (relieved by moving fingers) Difficulty unscrewing jar tops and gripping glass/cup, objects slip from fingers Pt. denies trauma to R hand or pain in other joints</p> <p>R hand: no swelling, ↓grip strength Phalen's manoeuvre & Tinel's sign: both positive</p> <p>Diagnosis: Carpal tunnel syndrome</p> <p>Paracetamol 500mg PO, prn</p>
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Student	Teacher
<p>On 10th june 2018, Ms Betty visited the outpatient clinic with complaints of pain and tingling in her thumb, index and middle finger of her right hand. She has been experiencing difficulty in performing basic tasks at home such as opening a jar's lid or holding objects and the pain interrupts her sleep as well. However, she is certain that she did not injure her right hand in the past few weeks and the pain is limited to her right hand only. On physical examination, she had decreased grip strength with both Phlalen's manoeuvre and Tinel's sign positive confirming the diagnosis of carpal tunnel syndrome.</p>	<p>On 10th June 2018, Ms Weston visited the outpatient clinic with complaints of pain and tingling in her thumb, index and middle finger of her right hand. She had been experiencing difficulty in performing basic tasks at home such as opening jars or holding objects, and the pain interrupts her sleep. However, she is certain that she has not injured her right hand in the past few weeks and the pain is limited to her right hand only. On physical examination, she had decreased grip strength with both Phlalen's manoeuvre and Tinel's sign positive, confirming the diagnosis of carpal tunnel syndrome.</p>
<p>On 10th June, Ms Weston reported that she had been experiencing numbness, tingling and pain in her thumb, index and middle fingers, and, additionally, strength and coordination in her fingers had decreased. Following the examination, Phalen's manoeuvre and Tinel's sign were positive, and grip strength decreased,</p>	<p>On 10th June, Ms Weston reported that she had been experiencing numbness, tingling and pain in her thumb, index and middle fingers, and, additionally, strength and coordination in her fingers had decreased. Following the examination, Phalen's manoeuvre and Tinel's sign were positive, and her grip strength was</p>

<p>although no swelling was observed. As a result, carpal tunnel syndrome was diagnosed.</p>	<p>weaker, although no swelling was observed. As a result, carpal tunnel syndrome was diagnosed.</p> <ul style="list-style-type: none"> - Direct and well written - do be careful in the future not to over-summarise
<p>She has been experiencing numbness and tingling in her thumb, index and middle finger for three weeks. In addition, her rest has been disturbed by the pain, which was relieved by moving fingers. Daily live activities like unscrewing jar tops have become difficult because of the pain. Ms Weston denies any trauma to her hand or pain in other joints. The physical examination revealed no swelling and decreased grip strength. Moreover, Phalen’s manouvre and Tinel’s sing were both positive. All these symptoms are suggestive of carpal tunnel syndrome. She was prescribed with paracetamol for pain control.</p>	<p>Ms Weston has been experiencing numbness and tingling in her thumb, index and middle finger for four weeks. In addition, her rest has been disturbed by the pain, which was relieved by moving her fingers. Daily activities like unscrewing jar tops have become difficult because of the pain. Ms Weston denies any trauma to her hand or pain in her other joints. The physical examination revealed no swelling , and decreased grip strength. Additionally, Phalen’s manoeuvre and Tinel’s sign were both positive. All these symptoms are suggestive of carpal tunnel syndrome. She was prescribed with paracetamol for pain control.</p> <ul style="list-style-type: none"> - it does feel like you’re convincing the OT that it is carpal tunnel syndrome
<p>On 10 th June 2018, Ms Weston presented with a numbness and tingling in the 3th,4th ,5th finger of her right hand, which disturbed her sleep and relieved by moving her fingers. Having a decreased gripping strength and positive Phalen’s manoeuvre and Tinel’s sign, she was diagnosed with carpal tunnel syndrome and commenced on paracetamol. Today, Ms Weston is scheduled. Additionally, her EMG and nerve conduction study were ordered to exclude other neurologic diagnosis.</p>	<p>On 10th June 2018, Ms Weston presented with numbness and tingling in the 3th,4th ,5th finger of her right hand, which disturbed her sleep and was relieved by moving her fingers. Having a decreased gripping strength and positive Phalen’s manoeuvre and Tinel’s sign, she was diagnosed with carpal tunnel syndrome and commenced on paracetamol. Today, Ms Weston is scheduled for discharge. Additionally, her EMG and nerve conduction study were ordered to exclude other neurologic diagnosis.</p> <ul style="list-style-type: none"> - not incorrect to put the diagnosis and EMG together but it’s a good habit to keep all future actions in the request paragraph.
<p>Last week Ms Weston presented to me due to a pain in right hand’s first three fingers which was accompanied with numbness and tingling sensation. She reported that this problem had affected her routine daily activities over the past 3 weeks and she denied trauma history or</p>	<p>On the 10th June Ms Weston presented due to a pain in the first three fingers of her right hand, which was accompanied with numbness and a tingling sensation. She reported that this problem had affected her daily activities over the past 3 weeks and she denied trauma history</p>

<p>any other additional symptom about her hand. Following examination, which revealed a positive Phalen’s maneuver and Tinel’s sign, a provisional diagnosis of carpal tunnel syndrome was made and she was commenced on painkillers.</p>	<p>or any other additional symptoms about her hand. Following examination, which revealed a positive Phalen’s manoeuvre and Tinel’s sign, a provisional diagnosis of carpal tunnel syndrome was made and she was commenced on painkillers PRN.</p> <ul style="list-style-type: none"> - be careful with Content accuracy: pain/joints not symptoms/hand / Painkillers - PRN
<p>On 10th June 2018, Mrs. Weston reported that she has been experiencing a numbness and tingling in the thumb, index, and middle finger of his right hand for 3 weeks, and her sleep was disturbed by pain and was relieved by moving her fingers, although he had any trauma to her right hand had any pain in other joints. On physical examination, her right hand had no swelling but her grip strength was reduced. In addition, her Phalen's manoeuvre and Tinel's sign were both positive. As a result of that, she was diagnosed with carpal tunnel syndrome and was commenced on paracetamol, 500 mg, post meridiem.</p>	<p>On 10th June 2018, Mrs. Weston reported that she had been experiencing numbness and tingling in the thumb, index, and middle finger of his right hand for 3 weeks, and her sleep was disturbed by pain and was relieved by moving her fingers. Additionally, she denied having trauma to her right hand or pain in her other joints. On physical examination, her right hand had no swelling but her grip strength was reduced. In addition, her Phalen's manoeuvre and Tinel's sign were both positive. As a result of that, she was diagnosed with carpal tunnel syndrome and was commenced on paracetamol, 500 mg, PRN.</p>
<p>On 10th June 2018, Ms Weston presented to our clinic, having been experiencing a pain in her right hand. In addition to that, she complained of having difficulty to unscrew jar tops and grip glass cups. During her physical examination, both Phalen's manoeuvre and Tinel's sign were positive, as a result of which, she was diagnosed with carpal tunnel syndrome, and subsequently, commenced on oral paracetamol.</p>	<p>On 10th June 2018, Ms Weston presented to our clinic, having been experiencing a pain in her right hand. In addition to that, she complained of having difficulty with unscrewing jar tops and gripping glass cups. During her physical examination, both Phalen's manoeuvre and Tinel's sign were positive, and as a result of which, she was diagnosed with carpal tunnel syndrome, and subsequently, commenced on oral paracetamol PRN.</p>
<p>On 10 June Mrs Weston presented to our hospital complained of numbness, tingling, and pain in the first 3 fingers of her right hand. She reported that these symptoms have been started 3 weeks ago, and the pain was causing her sleep deprivation. She noted that the pain is relieved by moving fingers. Despite no hand trauma, her right hand functionality is decreased and this is affecting her daily activity. Her general examination was unremarkable, but on local examination was noted right hand grip strength was low intensity compared with the left hand, Phalen’s maneuver, and Tinel’s</p>	<p>On 10 June Mrs Weston presented to our hospital complaining of a three-week history of numbness, tingling, and pain in the first 3 fingers of her right hand, which was causing sleep deprivation. She noted that the pain is relieved by moving fingers. Despite no hand trauma, her right hand grip strength is decreased and this is affecting her daily activities. Phalen’s manoeuvre, and Tinel’s sign were positive for the right side. All signs and symptoms were suggestive of carpal tunnel syndrome. Paracetamol when needed was prescribed for her.</p>

<p>sign were positive for the right side. All signs and symptoms were suggestive of carpal tunnel syndrome. Paracetamol when is needed was prescribed for her.</p>	
<p>Ms Weston presented with numbness and tingling in the right hand. She reported having difficulty in unscrewing jar tops, catching the objects tightly in his fingers, and gripping glass. Her physical examination revealed a reduced grip strength without having swelling, and Phalen's manoeuvre, and Tinel's sign were positive. Consequently, he was diagnosed with carpal tunnel syndrome, for which paracetamol 500 mg PO was prescribed.</p>	<p>Ms Weston presented with numbness and tingling in the right hand. She reported having difficulty in unscrewing jar tops, catching objects tightly in her fingers, and gripping glass. Her physical examination revealed a reduced grip strength without swelling, and Phalen's manoeuvre, and Tinel's sign were positive. Consequently, she was diagnosed with carpal tunnel syndrome, for which paracetamol 500 mg PO was prescribed.</p> <p>Some small errors - but really good!</p>
<p>On10th June2018, Ms Weston presented with numbness and tingling in her thumb, index and middle finger of right hand. She also reported difficulty in sleeping due to pain. There is no history of trauma in right hand. There is no swelling in right hand, however, Phanlen's manoeuvre and Tinel's sign are positive.</p>	<p>On10th June2018, Ms Weston presented with numbness and tingling in her thumb, index and middle finger of her right hand. She also reported difficulty in sleeping due to pain. There is no history of trauma in right hand. There is no swelling in her right hand. However, Phalen's manoeuvre and Tinel's sign are positive.</p> <p>This is very direct - and over-summarised. There's no <i>diagnosis/grip strength</i>. Also, the two sentences with 'There is... ' sounds repetitive - possibly use addition linker?</p>
<p>Ms Betty presented to out patient department one week back.She has been suffering from numbness,tingling in the thumb,index and middle finger of right hand for 3 week duration.It's been associated with sleep disturbance as well.Because of this problem her daily activities has restricted. Same time she has been noticed difficulty in unscrewing jar tops , gripping glass and cups,object slips from fingers. Ms Bretty denies trauma to right hand or pain in other joints.On examination found positive Phalen's manoeuvre and Tinel's sing.</p>	<p>Ms Betty presented to outpatient department on the 10th June. She had been suffering from numbness, tingling in the thumb, index and middle finger of right hand for 3 weeks, associated with sleep disturbance. Because of this problem her daily activities have been restricted, unscrewing jar tops and gripping objects. Ms Weston denies any trauma to her right hand or pain in her other joints. On examination Phalen's manoeuvre and Tinel's sign were positive.</p> <p>- Repetition and grammar issues make this a difficult passage to read. Also, no diagnosis.</p>
<p>On 10.08.2018, Ms Weston presented with a 3-week history of numbness and tingling sensation in her right thumb,index and middle fingers.Her sleep has been disturbed due to the pain which relieved by moving fingers.It is</p>	<p>On 10.08.2018, Ms Weston presented with a 3-week history of numbness and tingling sensation in her right thumb, index and middle fingers. Her sleep has been disturbed due to the pain which is relieved by moving fingers. It</p>

important to be aware that she has been having difficulty in unscrewing jar tops and gripping glass or cups. She also stated that objects slip from her fingers. There was no trauma to right hand ,and no pain in other joints. On physical examination, there was no swelling in right hand ,but the grip strength was decreased. Both Phalen's manoeuvre and Tinel's sign were positive. Therefore, the diagnosis of carpal tunnel syndrome was established.

is important to be aware that she has been having difficulty in unscrewing jar tops and gripping glass or cups. She also stated that objects slip from her fingers. There was no trauma to **her** right hand ,and no pain in other joints. On physical examination, there was no swelling in **her** right hand, but **her** grip strength was decreased. Both Phalen's manoeuvre and Tinel's sign were positive. Therefore, the diagnosis of carpal tunnel syndrome was established.

- Excellent content and organisation of information. Some small issues. Well done.