

- Review
   Correct paragraphs
   <u>Homework</u>



#### Occupational English Test

WRITING SUB-TEST: NURSING

READING TIME: 5 MINUTES
WRITING TIME: 40 MINUTES

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

#### Notes:

You are the nurse in a Community Health Centre. A patient you have been monitoring is moving to another city to live with his daughter.

#### PATIENT DETAILS:

Mr Peter Dunbar DOB:

Current medication:

Metformin 500mg t.d.s (oral hypoglycaemic) Ramipril 5mg daily (anti-hypertensive, ACE inhibitor) - for hypertension

Warfarin variable 3-5mg (anti-coagulant) Sotalol 40mg daily (beta blocker)

#### Treatment record:

Ineatment record:

September 2017 Diagnosed with type 2 diabetes August 2016. Fasting blood sugar levels (BSL) = 9

GP recommended dietary management: low-fat, low-sugar, calorie restriction; limit alcohol. ~Exercise

Pt lives at home with wife. Wife cooks. Wife managing dietary requirements, but Pt likes 2-3 glasses wine with meals

December 2017 Wife deceased. Pt depressed/grieving. Referred back to GP for monitoring/medicating Fasting BSL = 9. Pt non-compliant with diet. Excessive fat, salt, sugar, alcohol (wine/beer)

GP prescribed metformin (oral hypoglycaemic agent). Now Pt cooking for self –

non-compliant with diet. Non-compliant with medication. Blames poor memory Pt appears unmotivated. Resents having to take medication: 'always been healthy'

Takes medication intermittently, encouraged to take regularly

Educated regarding need for regular medication and potential adverse effects of intermittent dosing

Discussed strategies of memory aids

Pt hospitalised (City Hospital, Newtown) with myocardial infarction (MI) following retrosternal pain, nausea/vomiting, dizziness, sweating. Confirmed by ECG

Treatment: aspirin, streptokinase infusion. Prescribed ramipril 5mg daily. Diagnosed with atrial fibrillation post MI – commenced sotalol and warfarin

June-Aug 2018 Pt attended twice weekly

October 2018 Pt now walking with a stick. Signs of diabetic neuropathy. Poor exercise tolerance. Restricted mobility

Non-compliance with diet continues. Still self-catering. Discussed alternative

e.g., community-based meal delivery service; moving in with adult children (son/daughter);

retirement village

retirement village
Had respiratory infection 2 wks ago. Amoxicillin prescribed. Pt discontinued all other medication
as felt unwell. Resumed medications but still only taking intermittently
Again provided education re importance of adherence to drug regimen

22 January 2019 Pt attended with daughter. Pt moving to Centreville to live with daughter & her husband.

Daughter will cook – requires education re Pt needs & monitoring

Daughter advises that Pt resistant to dietary alterations and medication regimen

Still misses or doubles dose – all medication. Refuses to reduce salt, sugar, alcohol, fatty food

Pt continues to require monitoring & encouragement

Letter to transfer the Pt to the care of the community health nurse in Centreville, where the Pt is moving to live with his daughter

#### Writing Task:

Using the information given in the case notes, write a letter to the Community Health Nurse in Centreville, outlining the patient's history and requesting ongoing monitoring. Address the letter to the Community Health Nurse, Eastern Community Health Centre, 465 east Street, Centreville.

#### In your answer:

- Do <u>not</u> use note form
- Use letter format



Introduction	'ongoing monitoring'
Timeline	<ul> <li>August 2016: diagnosed with type 2 diabetes</li> <li>December 2017: Wife dies and becomes non-compliant (grief?)</li> <li>March 2018: <ul> <li>a. Metformin</li> <li>b. Still non-compliant</li> <li>c. Blames poor memory</li> <li>d. Unmotivated</li> <li>e. Educated</li> <li>f. Memory aids</li> </ul> </li> <li>June 2018: hospitalised MI</li> <li>Diagnosed with atrial fibrillation after MI</li> <li>Condition worsens: signs of diabetic neuropathy</li> <li>Mobility: walking stick</li> </ul>
Current condition	<ul> <li>22 Jan: attends clinic with daughter</li> <li>Still non-compliant: missing doses and double dosing</li> <li>Refuses to reduce – salt, sugar, fat and alcohol</li> </ul>
Medication paragraph	All detail of medication
Requests	<ul> <li>'ongoing <u>monitoring</u> &amp; encouragement'</li> <li>Educate daughter</li> </ul>

Homework: email to <u>alain@set-english.com</u>

Questions:



Original New Example: Today, Mr Dunbar attended our clinic accompanied by his Today, Mr Dunbar attended our clinic accompanied by his daughter, who will be his main caregiver. In spite of the daughter, who will be his main caregiver. In spite of the education, he remains resistant to his dietary restrictions and education, he remains resistant to his dietary restrictions medication regimen. In addition to being reluctant to and medication regimen. In addition to being reluctant to eliminate the consumption of salt, sugar, fat and alcohol from **reduce** the consumption of salt, sugar, fat and alcohol his diet, he still misses or double doses his medications. from his diet, he still misses or double doses his medications. Regarding Mr Dunbar's current medications, he is on 500 mg Regarding Mr Dunbar's current medications, he is on of oral metformin three times a day, 3-5 mg of warfarin and 500 mg of oral metformin three times a day, 3-5 mg of 40 mg of sotalol, together with 5 mg of ramipril, the last two warfarin and 40 mg of sotalol, together with 5 mg of of which are being taken daily. ramipril, the last two of which are being taken daily. Nice example! Don't write in letters or email In 22nd of January 2019, Me Dunbar visited to our clinic On 22nd of January 2019, Mr Dunbar visited to our clinic with his daughter and she was advised regarding his with his daughter and she was advised regarding his dietary alternation and medication. He still misses or takes **dietary** modifications and <u>medication</u>. He still misses or double doses of medication as well as refused to reduce takes double doses of the later as well as refusing to salt, sugar and fatty food consumption along with taking reduce salt, sugar and fatty food consumption along alcohol. with *his* alcohol intake. In terms of Mr Dunbar's medication, he has been In terms of Mr Dunbar's medication, he has been prescribed with 500mg of metformin, three times per day, prescribed with 500mg of metformin, three times per sotalol,4mg,daily and warfarin, 3-5mg. In addition, he day, sotalol, 4mg, daily, and warfarin, 3-5mg (when?). In takes 5mg of Ramipril, once per day for hypertension. addition, he **is taking** 5mg of ramipril, once per day for hypertension. Never say 'prescribed with' Per day

A day



Verbs with 'to'
Present to / admitted to / brought to

Verbs with no 'to' Visit / attended /

Today,Mr Dunbar visited our clinic along with his daughter.His daughter reported that ,he continues to be non compliant with his dietary regimen and medication ,which was evidences by he misses or doubles the medication dosage.He also refuses to cut down salt ,sugar and fat in his diet as well as alcohol consumption

Today, Mr Dunbar visited our clinic along with his daughter due to him being <u>non-compliant</u> with his dietary regimen and medication, which *is illustrated by the fact that* he misses or doubles the medication dosage. He also refuses to cut down salt ,sugar and fat in his diet as well as alcohol consumption.

'was evidenced by' Provide evidence

Mr Dunbar is currently taking medications metformin,500mg,three times a day,ramipril,5mg,warfarin 3-5mg along with sotalol,40mg once per day

Mr Dunbar is currently taking medications: metformin, 500mg, three times a day, ramipril, 5mg, warfarin, 3-5mg along with sotalol, 40mg, once per day

Rule: always separate dosage, schedule and route with commas.

# **TIMELINE**

What feeling does this give?

In terms of Mr Dunbar's current condition, he has been non-compliant with his medication such as missing doses and double dosing. He has been refusing to reduce salt, sugar and alcohol intake. He has been attending our clinic with his daughter since the 22nd of Jan.

In terms of Mr Dunbar's current condition, he *continues to be* non-compliant with his medication, missing doses and double dosing. He has been refusing to reduce salt, sugar and his alcohol intake. He has been attending our clinic with his daughter since the 22nd of Jan.

Regarding Mr Dundar's current medication, he has been prescribed metformin,500mg, , three times a day, ramipril 5mg, daily, and warfarin variable 3-5mg, as well as sotalol 40mg, daily.

Regarding Mr Dunbar's current medication, he has been prescribed metformin, 500mg, three times a day, ramipril 5mg, daily, and warfarin variable, 3-5mg, as well as sotalol 40mg, daily.

Nice para

On 22nd January 2019, Mr Dunbar is due to move in order to live with his daughter, who will look after him and do tasks such as cooking and monitoring his medication

On 22nd January 2019, attended out clinic?

Mr Dunbar is due to move in order to live with his daughter, who will look after him and do tasks such as cooking and monitoring his medication regimen, for



regimen, for which she needs to be educated about all his needs. Despite having been instructed about the importance of taking his medication on time, as well as reducing his intake of salt, sugar, alcohol and fatty food, he is still reluctant to comply with this. Please note both Mr Dunbar and his daughter require encouragement and advice about the aforementioned.

**MEDICATION** 

In terms of Mr Dunbar's medication, he is on metformin, 500mg, orally, three times a day, due to diabetes, ramipril, 5 mg, daily, due to hypertension, warfarin 3-5 mg, variable and Stalol, 40mg, daily due to atrial fibrillation.

On 22 January 2019, Mr.Dunbar attended our clinic with his daughter and there it was noticed that he is still mismanaging his medication such as taking intermittent doses and double <a href="doses.in">doses.in</a> addition to that, he refuses to avoid diet which included salt, sugar and fat, as well as alcohol consumption.

In terms of his medication history, he is currently taking Metformin,500mg, three times a day, Ramipril,5mg, once a day, warfarin,3to 5 mg, and Sotalol,40mg, once a day.

On 22nd January 2019, Mr Dunbar visited the clinic together with his daughter and decided to live with her in Centreville. During this time, he is still non-compliant with his diet regimen and medication.

In terms of his medication, Mr Dunbar is currently taking metformin, 500mg, three times a day, ramipril, 5mg, once a day, warfarin, 3-5mg, and 40 mg of sotalol, once a day.

which she needs to be educated about all his needs. Despite having been instructed about the importance of taking his medication on time, as well as reducing his intake of salt, sugar, alcohol and fatty food, he is still reluctant to comply with this. Please note both Mr Dunbar and his daughter require encouragement and advice about the aforementioned.

In terms of Mr Dunbar's medication, he is on metformin, 500mg, orally, three times a day, due to diabetes, ramipril, 5 mg, daily, due to hypertension, warfarin 3-5 mg, variable and Stalol, 40mg, daily due to atrial fibrillation.

Good – is it necessary to say 'due to' here for this reader? A nurse?

On 22 January 2019, Mr Dunbar attended our clinic with his daughter and there it was noticed that he is still mismanaging his medication such as taking intermittent doses and double dosing. In addition to that, he refuses to modify his diet, which includes salt, sugar and fat, as well as alcohol consumption.

In terms of his medication history, he is currently taking metformin,500mg, three times a day, ramipril,5mg, once a day, warfarin, 3 to 5 mg, and sotalol,40mg, once a day.

On 22nd January 2019, Mr Dunbar visited the clinic together with his daughter and decided to live with her in Centreville. During this time, he is still noncompliant with his diet regimen and medication.

When did he decide? In the clinic? What about his diet? Details are appropriate for the reader here.

In terms of his medication, Mr Dunbar is currently taking metformin, 500mg, three times a



day, ramipril, 5mg, once a day, warfarin, 3-5mg, and 40 mg of sotalol, once a day.

On 22nd January,he visits the clinic with his daughter,she reports non compliant with his medication,and sometimes he misses and double the doses.He refuses to reduce salt,sugar and fat as well as alcohol intake.He has been prescribed metformin,500mg,three times a day,and ramipril,5mg,once a day,as well as warfarin variable,3-5mg.

On 22nd January, he visits the clinic with his daughter, she reports that he is non compliant with his medication, and sometimes he misses and double the doses. He refuses to reduce salt, sugar and fat as well as his alcohol intake. He has been prescribed metformin, 500mg, three times a day, and ramipril,5mg, once a day, as well as warfarin (variable: 3-5mg).

Why visits? This is an action in the past that is finished! He is not in the clinic now is he? And even if he was still there you should not use Present Simple because we use this for facts and routines.

In terms of his medications, he is currently taking sotalol, 40mg, daily and warfarin, 3-5 mg after being diagnosed with MI. His diabetes is being managed by metformin,500mg, three times a day and for hypertension he is commenced on ramipril,5mg,daily.

Today, Mr Dunbar attended to our clinic with his daughter and has requested to move to Centervillie to live with his daughter. She will be now helping him with cooking but she may require some guidance regarding his diets and monitoring. In addition to that, he still misses and double doses his medications by being non-compliance and has refuse to reduce salt, sugar and fatty food along with alcohol intake.

In terms of his medications, he is currently taking sotalol, 40mg, daily and warfarin, 3-5 mg after being diagnosed with MI. His diabetes is being managed by metformin,500mg, three times a day and for hypertension he is commenced on ramipril, 5mg, daily.

Today, Mr Dunbar attended to our clinic with his daughter and has requested to move to Centervillie to live with his daughter. She will be now helping him with cooking but she may require some guidance regarding his diet; and monitoring. In addition to that, he still misses and double doses his medications by being non-compliance and has refuse to reduce salt, sugar and fatty food along with alcohol intake.

Compliant



# What makes a good Introduction paragraph?

- Purpose must be clear
- It must be concise (short & clear)
- SET: who, where, why
- SET: sentence 2: *letter type & purpose*

Nurse-in-Charge
District Nursing Service
Greenville Community Health Centre
80 Highto React, Greenville
Dear Sir/Maam,
Rei Ms Margaret Heten Martin, 81 years old

I de writing regarding Ms Margaret Helen Martin, who underwent repeated analogistasty, following an angina. She is due to be discharged to morrow and requires angoing care and support.

In view of the above, it would be greatly appreciated it you could be write ongoing care and apport. Please note that the requirer a regular monitoring on her clickary regimen, under the approxision of a clichian, and kinetly assist, her light exercize, which are monitored by a physioherapist. Please be arbite of the fact that the needs to avoid heavy. Utiling for 12 weeks, and please note that the requirer regular monitoring on her wound site by bruites or in fathas. In addition, it is important to note that the needs a regular visits from her family in order



	15th July 2017
	are the acceptance and are about an equiparty programmed by not declar, a distribution and.
	Nurse-in-Charge
	District Nursing Service
	Greenville Community Health Centre
	Activates and
	Dear Sir/Maam,
	Re: Ms Margaret Helen Martin, 81 years old
	I am writing regarding Ms Margaret Helen Martin, who underwent repeated
\	angioplasty following an angina. She is due to be discharged tomorrow and requires
What	ongoing care and support.
the reader will do?	
Expand the purpose	In view of the above, it would be greatly appreciated if you could provide ongoing care and support. Please note that she requires a regular monitoring on her dictary regimen, under the supervision of a dichitan, and kindly assist, her light exercises, which are monitored by a physiotherapist. Please be awaive of the fact that she needs to avoid heavy lifting for 12 weeks, and please note that she requires regular monitoring on her wound site for bruires or infections. In addition, it is important to note that she needs a regular visits from her family in order



Original	Improved
I am writing to introduce Mr Dunbar, who is moving to Centreville to live with his daughter and is being transferred to you for ongoing monitoring of his medication and diabetic diet.	I am writing to introduce Mr Dunbar, who is moving to Centreville to live with his daughter and is being transferred to you for ongoing monitoring of his medication and diabetic diet.
I am writing regarding Mr Dunbar, who has been under our care due to being non-compliant with his diabetic regimen. He is moving to Centreville to live with her daughter and requires your ongoing care and monitoring.	I am writing regarding Mr Dunbar, who has been under our care due to being non-compliant with his diabetic regimen. He is moving to Centreville to live with his daughter and requires your ongoing care and monitoring.
Reff: Peter Dunbar. D.O.B: 18th march 1932.	RE: Peter Dunbar, D.O.B: 18th March 1932
Dear Sir/Madam,	Dear Sir/Madam,
I am writing regarding Mr Dunmbar, who visited our clinic due to being diabetic. He is scheduled to be transferred to your facility and now requires ongoing monitoring.	I am writing regarding Mr Dunbar, who has been visiting our clinic over the past <b>3 years</b> due to being diabetic. He is scheduled to be transferred to <u>your facility</u> and now requires ongoing monitoring.
	will live there?
	Better: 'into your care'
Thanks for seeing Mr Dunbar, who was monitoring due to being non-compliance with medication and diet as well as having poor memory. He is scheduled to change his residence to your community health area, and requires ongoing monitoring and encouragement.	Thank you for seeing Mr Dunbar, who was being monitored due to being non-compliant with his medication and diet as well as having poor memory. He is scheduled to change his residence to your community health area, and requires ongoing monitoring.



I am writing to introduce Mr Dunbar, who is due to moved to another city in order to live with his daughter, and requires ongoing care and monitoring at your facility.

Or

I am writing to introduce Mr Dunbar, who is due to moving to another city in order to live with his daughter, and requires ongoing care and monitoring <u>at</u> your facility.

14/02/2022 Community Health Nurse, Eastern community health center, 456 East Street, Centreville.

Dear madam/ sir,

Re: Mr. Peter Dunbar. DOB: 18/03/1953.

I am writing regarding Mr. Peter Dunbar who is being managed for type 2 diabetes with medication noncompliance, he requires your care assistance and education of his daughter on his diet modification.

Redundant – with a job

I am writing to introduce Mr Dunbar, who is due to moved to another city in order to live with his daughter, and requires ongoing care and monitoring.

or

I am writing to introduce Mr Dunbar, who **is moving** to another city in order to live with his daughter, and requires ongoing care and monitoring from your facility.

At = living in the facility From = coming from the facility

14th February 2022

Community Health Nurse Eastern Community Health Center, 456 East Street, Centreville

Dear Sir or Madam,

Re: Mr Peter Dunbar, DOB: 18th March 1953

I am writing regarding Mr Peter Dunbar, who is being managed for type 2 diabetes **due to** medication noncompliance. He **now** requires your care **and** assistance.

Could be a problem?

I like cheese, yet I saw a movie.



I am writing regarding Mr Dunbar, who has been non- compliant with his medication regimen. He is moving to another city to live with his daughter and now requires ongoing monitoring.	I am writing regarding Mr Dunbar, who has been non-compliant with his medication regimen. He is moving to another city to live with his daughter and now requires ongoing monitoring.
I am writing regarding Mr Peter Dunbar, who is non-complaint with his medication and diet. He is moving to Centreville to live with his daughter and requires your ongoing monitoring.	I am writing regarding Mr Peter Dunbar, who is non-complaint with his medication and diet. He is moving to Centreville to live with his daughter and requires your ongoing monitoring.
I am writing regarding Mr Dunbar, who is moving to live with his daughter. He is being transferred into your care and now requires your ongoing monitoring.	I am writing regarding Mr Dunbar, who is moving to live with his daughter. He is being transferred into your care and now requires your
	ongoing monitoring.



I am writing to introduce Mr Peter Dunbar, who requires ongoing monitoring and further education regarding medication and dietary compliance for Diabetes Mellitus.He is being transferred to your community area ,to stay with his daughter.

I am writing to introduce Mr Peter Dunbar, who requires ongoing monitoring and further education regarding medication and dietary compliance for Diabetes Mellitus.He is being transferred to your community area ,to stay with his daughter.

Community Health Nurse Eastern Community Health Centre 456 East Street Centreville

Community Health Nurse Eastern Community Health Centre 456 East Street Centreville

14th February 2022

14th February 2022

Re: Mr Peter Dunbar; DOB: 18th March 1932

Re: Mr Peter Dunbar; DOB: 18th March 1932

Dear Nurse,

Dear Nurse.

I am writing regarding Mr Dunbar, who presented to our clinic due to issues with his medication compliance. He is due to be transferred to your facility after moving to his daughter's house and will require ongoing monitoring.

I am writing regarding Mr Dunbar, who presented to our clinic due to issues with his medication compliance. He is due to be transferred to your facility after moving to his daughter's house and will require ongoing monitoring.

22 January 2019 Community Health Nurse Eastern Community Centre 456 East Street Centreville

Dear Nurse

D.O.B: 18.03.1932 Mr Peter Dunbar

I am writing regarding Mr Dunabar, who has been in our care and now he is going to be transfer to your community,

22 January 2019 Community Health Nurse Eastern Community Centre 456 East Street Centreville

Dear Nurse

D.O.B: 18.03.1932 Mr Peter Dunbar

I am writing regarding Mr Dunabar, who has been in our care and now he is going to be transfer to your community,



to live with his daughter in Centreville and now requires to live with his daughter in Centreville and now requires ongoing care and monitoring. ongoing care and monitoring. Community Health Nurse Community Health Nurse Eastern Community Health Center Eastern Community Health Center 456 East Street 456 East Street Centreville Centreville 22 January 2019 22 January 2019 Re: Mr. Peter Dunbar, DOB: 18 th February 1932 Re: Mr. Peter Dunbar, DOB: 18 th February 1932 I am writing regarding Mr. Peter Dunbar, who has been I am writing regarding Mr. Peter Dunbar, who has been visiting our clinic since 2017 and is being transferred to visiting our clinic since 2017 and is being transferred to you for ongoing monitoring due to his moving to his you for ongoing monitoring due to his moving to his daughter's place in Centerville. daughter's place in Centerville. I am writing regarding Mr. Peter Dunbar, who has been I am writing regarding Mr. Peter Dunbar, who has been monitored our center since 2017. He is scheduled to be monitored our center since 2017. He is scheduled to be transferred to your facility and requires continuous transferred to your facility and requires continuous monitoring. monitoring.



The Community Health Nurse Eastern Community Health Centre 456 East Street Centreville

22nd January 2019

**Dear Nurse** 

Re: Mr Peter Dunber DOB: 18.03.1932

I am writing regarding Mr Peter Dunber, who is moving to Centreville to live with his daughter. He is into your care for regular

monitoring

and encouragement.

Date: 15 FEB 2022 Community Health Nurse Eastern community Health center, 456 East Street, Centreville

RE: MR Peter Dunbar (D.O.B. 18, March, 1932) To whom it may concern,

I am writing regarding Mr. Dunbar, who visited our clinic due to being Diabetes .He is schedule to be transfer to your community health center and requires further care and assessment .

Community Health Nurse Eastern Community Health Centre 456 East Street Centreville

22nd January 2019

The Community Health Nurse Eastern Community Health Centre 456 East Street Centreville

22nd January 2019

Dear Nurse

Re: Mr Peter Dunber DOB: 18.03.1932

I am writing regarding Mr Peter Dunber, who is moving to Centreville

to live with his daughter. He is into your care for regular monitoring

and encouragement.

Date: 15 FEB 2022 Community Health Nurse Eastern community Health center, 456 East Street, Centreville

RE: MR Peter Dunbar (D.O.B. 18, March, 1932) To whom it may concern,

I am writing regarding Mr. Dunbar, who visited our clinic due to being Diabetes .He is schedule to be transfer to your community health center and requires further care and assessment .

Community Health Nurse Eastern Community Health Centre 456 East Street Centreville

22nd January 2019



Dear Nurse

Re: Mr Peter Dunbar: D.O.B 18th March 1932.

I am writing regarding Mr Dunbar, who has been a client in our care, moving to live with his daughter in Centreville. He is due to be transferred to you, and now requires an ongoing monitoring. Dear Nurse

Re: Mr Peter Dunbar: D.O.B 18th March 1932.

I am writing regarding Mr Dunbar, who has been a client in our care, moving to live with his daughter in Centreville. He is due to be transferred to you, and now requires an ongoing monitoring.



# **SPEAKING CLUB**

Translation for SET students:

Ī	Criteria	Meaning
	D1	Active listening [uh hu, etc.] & avoid interruption
Ī	D2	Open to Closed questions
	D3	No 2 questions at same time / No questions suggesting an answer
	D4	Make patient statements clear: "What do you mean by"
	D5	Summarise back to a patient when they give complex information

Why is it so hard for students to do this?

- 1. Timing of questions (when to do it)
- 2. Grammar



# Grammar

<b>Open Questions:</b>	Grammar of open question:
Question you don't usually answer with yes or no	1. Wh- What / why / etc.  S you/he/she/they  verb [usually] feel/not take/etc.
	2. Can you tell me Can you please tell me a bit more about your pain?
	Could you tell me [small amount more polite] Could you tell me where the pain is?
<b>Quantitative</b>	
(half open / half closed)	1. How what / why / etc. S you/he/she/they verb [usually] feel/not take/etc.
You are asking for numbers / place	How long – after 'how long' this auxiliary  How much – after 'how much' you need the thing you asking about  How many – after 'how many' you need the thing you are asking about
Close questions	aux. S verb [usually] do / have / be you/he/she/they feel/not take/etc.
	Are you? / Is there? / Is your pain radiating?  Have you?  Do you?

Would you = permission



### **DOCTORS**

Setting: Suburban General Practice

**Doctor**: Your patient is a 24-year-old who was recently diagnosed with Addison's disease (the adrenal glands underproduce hormones causing general fatigue and life-threatening hypotension when very stressed). They were competing in a local Basketball team before being diagnosed. Currently they are prescribed Florinef (Fludrocortisone).

### Task:

- Find out how well the patient has been managing their condition (e.g. medication compliance, reduction of stress etc.).
- Reassure the patient. Discuss the possibility of slowly and gradually increasing physical activity.
- Advise the patient of the dangers of drastically increasing activity (i.e. hypotension, hospitalisation, etc.).
- Explain the importance of medication (e.g. Addison's is a chronic condition and the adrenal glands need support). The medication is why the patient is feeling better and it needs to be continued.



### **NURSES**

Setting: Secondary School

**Nurse:** Your patient is an 18-year-old high school student who is about to commence final year exams. They are finding the exam period very stressful, and their main coping mechanism is to eat sweet foods to feel better.

# Task:

- Find out how the patient currently feels about their diet and what changes they would like to make.
- Find out what else the patient has tried to reduce stress besides eating sweet foods.
- Make some suggestions to help improve the patient's diet (e.g. add higher protein snacks like eggs or nuts to help you feel fuller).
- Encourage the patient to work towards eliminating processed sugary snacks. Note that the sugar in fruit is nutritious and has fibre, whereas highly sugary processed foods have little nutritional value.
- Reassure the patient that there are healthy ways to maintain a healthy weight (e.g. practice mindful eating eat slowly; control portion sizes; eat more fruit)