

- 1 Review
- 2 Look at para 3
- 3 Next assignment

Molly Smith / 3 years old / scolding / she was discharged / and then... possible infection / sepsis

STEP 1:	STEP 2:	STEP 3:		
<p>Comprehension questions:</p>	<p>How do I choose?</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th style="text-align: center;">Content</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;"> <p>Content is <b>appropriate</b> to intended reader and addresses what is <b>needed</b> to continue care (key information is included; no important details missing); content from case notes is accurately represented</p> </td> </tr> </tbody> </table> <p>OET say that 'relevant' means:</p> <ul style="list-style-type: none"> <li>• <b>appropriate</b>: useful, helpful, etc. - <b>SOME</b></li> <li>• <b>needed</b>: essential - <b><u>ALL</u></b></li> </ul> <p>This helps us in the exam because we can RELAX about relevance.</p>	Content	<p>Content is <b>appropriate</b> to intended reader and addresses what is <b>needed</b> to continue care (key information is included; no important details missing); content from case notes is accurately represented</p>	<p>In general, how do I organise...</p> <p><b>Introduction para:</b> Task (evaluate, manage, etc.)</p> <p><b>2 – Injury &amp; hospital</b></p> <p><b>3 - Current Condition (2 days)</b></p> <p><b>Requests:</b> tell the reader the Task &amp; any extra details</p> <p>Do not confuse reader</p>
Content				
<p>Content is <b>appropriate</b> to intended reader and addresses what is <b>needed</b> to continue care (key information is included; no important details missing); content from case notes is accurately represented</p>				

**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 10 July 2020.

You are a family doctor at Hightown Medical Clinic where a mother has brought in her young child to see you.

**PATIENT DETAILS:**

**Name:** Molly Smith (Miss)  
**DOB:** 23 June 2017 (3 y.o.)  
**Address:** 1001 Hightown Way, Hightown  
**Medical history:** All vaccines up to date  
 Eczema: flexor surfaces, arms & legs (occasional, treatment = topical corticosteroid cream)  
**Family History:** Nil significant  
**Social Background:** Mother = homemaker  
 Father = plumber  
 2 older sisters (5 y.o. & 7 y.o.)  
 Cared for by maternal grandmother 2x/wk (mother needs support)  
**Allergies:** No known allergies

**Hospital Treatment Record:**

**Presentation at ED:**

**3 July 2020** Mother reported: pt pulled tablecloth, pot w hot water fell & scolded her  
**Diagnosis:**  
 2nd degree partial thickness burns, 18% of TBSA (total body surface area): face, hands, arms & trunk  
**Treatment:**  
 Admssion to ICU  
 IV fluid & pain relief  
 Move to burns unit (further management)

**Burns Unit:**

**5 July 2020** **Progress:** pain level reported = 8/10  
 FBC: sepsis ruled out  
**Treatment:** surgical debridement & grafting to ↓mortality  
**8 July 2020** Healing well  
 Pain level reported = 4/10  
 Pt ready for discharge  
 Requires pressure garments, sponge bath, no swimming  
 Paracetamol 5 ml oral suspension 4x/day  
 Note: outpatient clinic appt 13 July (dressing change)

**Presentation at Hightown Medical Clinic:**

**9 July 2020** Pt & mother attend: mother reports pt's general lethargy & some distress  
 Pain reported as 5/10  
 Mother compliant w. discharge plan (pressure garments, sponge bath, medication)  
 Asked to return if symptoms persist  
**10 July 2020** Subjective: ↑pain (6/10), itchiness at burns site  
 Mother reports: worsening overnight, disorientation, unsteadiness on feet (trip hazards)  
 pt fell over dog →bleeding at burns site  
**Objective:** temp 38.5°C, burns site red & warm to touch  
 Topical antiseptic applied, burns site redressed  
 Antibiotics prescribed  
 ?infection  
 ?sepsis  
**Plan:** Urgent referral to hospital burns unit

**Writing Task:**

Using the information in the case notes, write a letter of referral to Dr Mayfield, Plastic Surgeon, outlining your concerns about the patient and requesting urgent investigation, definitive diagnosis and further management. Address the letter to Dr Scarlett Mayfield, Plastic Surgeon, Outpatient Burns Unit, Hightown Hospital, 123 High Street, Hightown.

**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.

Introduction	<ul style="list-style-type: none"> <li>Investigation, diagnosis, management</li> </ul>
Current Visits	<p>Today...(10<sup>th</sup>)</p> <ul style="list-style-type: none"> <li>Increased pain (6/10) – due to – recent injury</li> <li>Itchy at site</li> <li>Disorientation</li> <li>Bleed after fall</li> <li>Antibiotics</li> </ul> <p>Objective: temp 38.5°C, burns site red &amp; warm to touch Topical antiseptic applied, burns site redressed</p> <p>Worsened since yesterday (9<sup>th</sup>):</p> <ul style="list-style-type: none"> <li>Pain 5/10</li> </ul> <p>Pt &amp; mother attend: mother reports pt's general lethargy &amp; some distress Pain reported as 5/10 Mother compliant w. discharge plan (pressure garments, sponge bath, medication) (Asked to return if symptoms persist)</p>
Timeline	<p>Initially...</p> <p><u>Presentation at ED:</u> 3 July 2020 Mother reported: pt pulled tablecloth, pot w hot water fell &amp; scolded her <b>Diagnosis:</b> 2nd degree partial thickness burns, 18% of TBSA (total body surface area): face, hands, arms &amp; trunk <b>Treatment:</b> Admission to ICU IV fluid &amp; pain relief Move to burns unit (further management)</p> <p><b>Burns Unit:</b> 5 July 2020 <b>Progress:</b> pain level reported = 8/10 FBC: sepsis ruled out <b>Treatment:</b> surgical debridement &amp; grafting to ↓mortality</p> <p>8 July 2020 Healing well Pain level reported = 4/10 Pt ready for discharge Requires pressure garments, sponge bath, no swimming Paracetamol 5 ml oral suspension 4x/day Note: outpatient clinic appt 13 July (dressing change)</p> <p>Practicing summarising... What is that?</p> <ul style="list-style-type: none"> <li>The aforementioned symptoms</li> </ul>
Requests	<ul style="list-style-type: none"> <li>Investigation, diagnosis, management</li> </ul>

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On 9 July 2020, Mrs Smith reported that her daughter had experienced pain (5/10) and general lethargy, along with some distress despite following the discharge plan. Today,

Original	Corrected & comments
<p>On 3rd July, Molly Smith was admitted to Hightown hospital in ICU with 2nd degree partial thickness burns 18% of TBSA. Following her treatment, she was moved to burns unit where, she had surgical debridement and grafting. After having a good recovery she was discharged on 8 July with paracetamol and given advice.</p> <p>On 3rd July, Molly Smith was admitted to the hospital due to second-degree partial thickness burns and was treated appropriately in the ICU. On 5th July, sepsis was excluded, and surgical debridement along with grafting were performed to reduce the mortality rate. During her hospitalization, she had made good progress and was discharged with a discharge plan. Regarding her medical history, Molly has no known allergies and she has an eczema.</p> <p>Initially, Molly Smith was taken to ED by her mother, where she was diagnosed with 2nd-degree partial thickness burn, 18% TBSA. Mrs Smith reported that Molly pulled a tablecloth and a pot with hot water fall and scolded her. She was admitted to the ICU, treated with IV fluid and pain relief, then moved to the burns unit for further management. On 5th July, a report from the burn unit exhibited that Molly's pain level was 8/10, sepsis ruled out and she</p>	<p>On 3rd July, Molly Smith was admitted to Hightown <b>Hospital in the</b> ICU with 2nd degree partial thickness burns <b>on</b> 18% of TBSA. Following her treatment, she was moved to the Burns <b>Unit</b>, where she had surgical debridement and grafting. After having a good recovery, she was discharged on 8<sup>th</sup> July with paracetamol and her mother was given advice.</p> <p>If it not <u>practical</u> to use the full phrase you can use TBSA</p> <p><b>Very nice summarising.... Is too much?</b> On 3rd July, Molly Smith was admitted to <b>your hospital</b> due to second-degree partial thickness burns and was treated appropriately in the ICU. On 5th July, sepsis was excluded, and surgical debridement along with grafting were performed <b>to reduce the mortality rate</b>. During her hospitalization, she <b>had made</b> good progress and was discharged with a discharge plan <b>on the 8th</b>. Regarding her medical history, Molly has no known allergies and she has eczema.</p> <p>Style:</p> <p><b>Reader awareness:</b></p> <p><b>‘teaching your grandmother to suck eggs’</b></p> <p>Initially, on 3rd, Molly Smith was taken to the ED by her mother, where she was diagnosed with 2nd-degree partial thickness burns, 18% <b>of her</b> TBSA. Mrs Smith reported that Molly <b>had been scalded</b> her. She treated accordingly. On 5th July, Molly's pain level was <b>reported to be</b> 8/10, sepsis <b>was</b> ruled out and she underwent surgical debridement and grafting to decrease chances of mortality. On 8th July. Molly's health improved, and she was discharged with a</p>

followed surgical debridement and grafting to decrease chances of mortality.

On 8th July Molly's health improved and she was discharged with a prescription of paracetamol 5ml oral suspension 4 times a day and with an appointment to outpatient clinic on 13th July.

3rd July Mollay Smith was admitted to Emergency department because she had 2nd-degree and partial thickness burns. After IV fluid and pain relief, she was referred to burns unit for further management. However, the pain level had been reported as 8/10 and a full blood count ruled out sepsis on 5 July. Additionally, she had good progress and she was discharged with paracetamol for 4 days on 8 July.

paracetamol and with an appointment **for an your** outpatient clinic on 13th July.

On 3rd July, ~~Mollay~~ **Molly** Smith was admitted to **your** Emergency department **with** 2nd-degree and partial thickness burns. After IV fluid and pain relief, she was referred to **the** burns unit for further management. The pain level ~~had been~~ was reported as 8/10 and a full blood count ruled out sepsis on 5 July. Additionally, she had **made** good progress and she was discharged with paracetamol for 4 days on 8 July.

Okay why 'had been'? Remember there must be 2 past dates: past of past. So is this before referral?