SET English

# OET Nursing Writing Week

## Yutaka Ito

The task is: *Write a letter to a healthcare professional requesting **continuation of care** for a patient.*

*Spend 10-15 minutes preparing your letter.*

Planning

10 - 15 minutes:

- Find the **purpose**
- Identify the **case notes** you will use
- Organise the case notes into **logical paragraphs**

General Paragraph Purposes

| Introduction | • Name<br>• General medical context<br>• General request<br>• (urgency) |
|---|---|
| Timeline 1 | • Beginning of this medical context up to the present. (Sometimes includes the present) |
| Timeline 2 | • Current condition / Today's presentation |
| Background – Medical | • Related medical information that is not part of this medical context/timeline |
| Background - Social | • lifestyle / smoking / family / work / exercise |
| Request | • Expands the purpose/request – tasks, updates |

Identifying Purpose & Choosing Case Notes:

Ask yourself these questions about Yutaka Ito case notes:

| Question | Answer |
| --- | --- |
| 1. Who is the reader? | district nurse |
| 2. What is the reader's task? | follow up care |
| 3. Does the reader know the patient? | no |
| 4. Does the writer have any tasks? | TWOC / Education |
| 5. Why am I writing today? | Patient is ready for discharge |
| 6. Is it urgent? | No |

# Test 4 Writing (45 minutes)

**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 18 September 2019.**

You are a nurse in a hospital urology unit and an elderly patient is due for discharge.

**PATIENT DETAILS:**

| | |
|---|---|
| **Name:** | Yutaka Ito (Mr) |
| **DOB:** | 1 June 1949 (70 y.o.) |
| Address: | 22 High Street, Newtown |
| **Social background:** | Retired fire officer<br>Widower since 2011, lives alone<br>Son overseas<br>Interests: golf, reading, walking (30 mins/day) |
| **Past medical history:** | April 2016 hypertension diag. (Ramipril 5mg 1x/day) |
| **Family doctor appt record:** | October 2018: nocturia (↑nocturnal urination), L groin pain<br>Diag. benign prostatic hyperplasia (BPH) w inguinal hernia (L) →silodosin 8 mg 1x/day<br>August 2019: BPH ↑size, nocturia controlled, pt. requests silodosin cessation – prefers "permanent" solution<br>Referral →hospital: elective robotic-assisted laparoscopic prostatectomy (RALP)<br>Pt. concerned about incontinence →pelvic floor exercises leaflet given |
| **Hospital treatment record:** | |
| **Presenting factors:** | Elective RALP |
| **11 August 2019:** | Pre-op assessment:<br>FBC, LFTs (liver function tests), UEs (urea & electrolytes), MSU, chest<br>X-ray, ECG – all normal<br>Pt. still worried about incontinence (compliant w exercises) |
| **15 September 2019:** | Admission for RALP |
| **Nursing treatment record** | |
| **16 September 2019**: | BP: 128/80, PR: 70/min, temp: 36.7°C (normal)<br>Education re catheter (part of RALP) |

**17 September 2019:** RALP (successful)
Anti-embolism stockings
IV fluids, analgesia
Post-op vitals normal

**18 September 2019:** Sitting upright, gently mobilising
Slight pain (inguinal hernia)

**Medication:** Stool softener lactulose (10 mls 2x/day x 30 days)
Ibuprofen (400 mgs 3x/day) or p.r.n. (not >3200 mg/24 hrs)
Co-codamol 15 mgs/500mg p.r.n. (not >8 tabs/24 hrs)
Dalteparin 5000I Us 1x/day sub-cutaneously × 30 days (anticoagulant)
Omeprazole 20 mgs (2x/day)

**Date of discharge:** 18 September

**Discharge plan:** Pt. educated:

- Foley catheter & meatal care
- Self-adminstration w pre-filled syringe (dalteparin): Pt. confident – 30-day supply given
- No driving 1 wk, gradually ↑walking
- No vigorous activity 6 wks
- Only showers till wound heals
- Soft food until 1st bowel movement →normal diet as tolerated

Refer to district nurse:
Ensure pt. managing catheter
Catheter leakage: perform wash-out - contact urology ward if unsuccessful (reinsertion required) &/or bladder spasms
Reinforce continence advice
Encourage doctor appt. if issues post-catheter removal

**Note:** TWOC (trial without catheter) Outpatients Clinic – 28 September

**Plan:** Write to district nurse

**Writing Task:**

Using the information in the case notes, write a letter of referral to Ms Andrews, the district nurse, summarising the patient's relevant medical history and outlining his care needs after discharge. Address your letter to Ms Maria Andrews, District Nursing Team, 4 Hadley Close, Newtown.

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Letter Plan

<table>
<tr><td>Introduction</td><td>Patient name:<br>General Medical Context:<br>General request:</td></tr>
<tr><td>Timeline</td><td>Heavily summarised: admission – today<br><br>Pt. educated:<br>• Foley catheter & meatal care<br>• Self-adminstration w pre-filled syringe (dalteparin): Pt. confident – 30-day supply given<br>• No driving 1 wk, gradually ↑walking<br>• No vigorous activity 6 wks<br>• Only showers till wound heals<br>• Soft food until 1st bowel movement →normal diet as tolerated</td></tr>
<tr><td>Background</td><td>• lives alone<br>• hypertension / ramipril<br>•<br>• Continence – compliant with exercises – still worried</td></tr>
<tr><td>Request</td><td>Refer to district nurse:<br>Ensure pt. managing catheter<br>Catheter leakage: perform wash-out - contact urology ward if unsuccessful (reinsertion required) &/or bladder spasms<br>Reinforce continence advice<br>Encourage doctor appt. if issues post-catheter removal<br><br>TWOC (trial without catheter) Outpatients Clinic – 28 September</td></tr>
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**Write introduction:** send to paul@set-english.com