

- 1 Review
- 2 Look at your writing
- 3 Example paragraph 3 – written by Alain

## 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 10 November 2019.

You are a family doctor and have been caring for a young patient following his discharge from hospital.

### PATIENT DETAILS:

**Name:** Andreas Smith (Mr)  
**DOB:** 23 Oct 1991 (29 y.o.)  
**Address:** Apartment 1 (ground floor), 194 Springhall Parade, Newtown

**Social Background:** Lawyer (graduated in Jan 2018)  
Girlfriend of 3 yrs, supportive, visits 2-3x/wk  
Parents, supportive, visit 1x/wk  
Non-smoker  
Alcohol intake approx. 12 units/wk (mainly beer)  
Interests: reading, music, TV

**Allergies:** Nil

**Family History:** Mother – osteoarthritis  
Father – gout  
Maternal grandmother – bipolar disorder, died 80 y.o. (stroke)  
Maternal grandfather – died 75 y.o. (heart attack)  
Paternal grandmother & grandfather – unknown

**Past medical history:** Childhood chickenpox & measles  
1993 hyperopia, glasses given  
2015 L Rotator cuff injury

### Hospital treatment record:

**16 March 2019:** Arrival at ED  
MVA (motor vehicle accident): neurologic lesion of spinal cord at T12, resulting in paraplegia (wheelchair required)  
Neurogenic bladder – intermittent urinary catheter  
Colostomy for neurogenic bowel → Baclofen pump (change 4x/yr)  
Transfer to general ward for recovery

**20 March 2019:** Good progress  
Medications: corticosteroids, NSAIDs, anticonvulsants, mild opioids, antispasmodics, muscle relaxants  
Mild infection at incision site → antibiotics

**13 April 2019:** Ready for discharge  
Discharge plan: continue opioids & NSAIDs 2 months (to be reviewed by family doctor)  
OT & physio visits (↑mobility, weight bearing exercises) & wheelchair (unable to ambulate)  
Community Nurse – help w ADLs

### General practice appointment record:

**12 June 2019:** Medication review  
Pain well managed  
Continue opioids & NSAIDs prn  
Baclofen pump changed  
Pt coping well  
Reviews w dr approx. 1x/month

**8 July 2019:** Community transport arranged for appt – pt. refused, parents brought pt & attended appt w him  
Pain well managed  
Note: pt ↑isolated (won't allow girlfriend/friends to visit)

**4 August 2019:** Pt missed appt, rescheduled Sept.

**6 September 2019:** Telephone consultation (pt request)  
Fear & anxiety at thought of leaving home

**8 October 2019:** Missed appt, rescheduled Nov.




**10 November 2019:** Missed face-to-face appt – pt admits ↑anxiety at leaving home → panic attack in transit  
Telephone consultation conducted instead  
?diagnosis: agoraphobia (pt. requests referral to psychiatrist, 'I want some social life back')  
**Plan:** Refer to psychiatrist

### Writing Task:

Using the information in the case notes, write a letter of referral to Dr Besson, psychiatrist, outlining your concerns about the patient and requesting definitive diagnosis and further management. Address the letter to Dr Lucy Besson, Psychiatrist, Newtown Hospital, 111 High Street, Newtown.

Write an Introduction:  
[alain@set-english.com](mailto:alain@set-english.com)



<b>Introduction</b>	<ul style="list-style-type: none"> <li>• Provide definitive diagnosis / further treatment</li> </ul>
<b>Timeline</b> (short):  	<ul style="list-style-type: none"> <li>• Admission to discharge</li> <li>• Heavily <u>summarised</u></li> </ul> <p style="text-align: center;">           Make shorter: Focusing <b>main ideas</b>          Only important info       </p>
<b>More recent Timeline</b>  	<p>8 July 2019: Community transport arranged for appt – pt. refused, parents brought pt &amp; attended appt w him          Pain well managed          Note: pt <u>isolated</u> (won't allow girlfriend/friends to visit)</p> <p>4 August 2019: Pt missed appt, rescheduled Sept.</p> <p>6 September 2019: Telephone consultation (pt request)  <u>Fear &amp; anxiety</u> at thought of leaving home</p> <p>8 October 2019: Missed appt, rescheduled Nov.</p> <p>10 November 2019: Missed face-to-face appt – pt admits ↑ anxiety at leaving home → panic attack in transit          Telephone consultation conducted instead          ?diagnosis: agoraphobia (pt. requests referral to psychiatrist, 'I want some social life back')</p> <p>Plan: Refer to psychiatrist</p>
<b>Background:</b>  mix	<ul style="list-style-type: none"> <li>• Lawyer</li> <li>• Girlfriend <u>supportive</u> – 3 year relationship</li> <li>• Parents – <u>supportive</u></li> <li>• Alcohol</li> <li>• Bipolar – grandmother</li> <li>• Interests</li> </ul>
<b>Request</b>	<ul style="list-style-type: none"> <li>• Provide definitive diagnosis / further treatment + <u>more details</u></li> <li>• Such as</li> </ul>

PARA 2:

On 16<sup>th</sup> March, Mr Smith was admitted to the ED due to a paraplegia following a motor vehicle accident. He has a colostomy for a neurogenic bowel, in addition, a baclofen pump, which should be changed 4 times a year. He made good progress as a result he was discharged with a discharge plan

On 16th March, Mr Smith was admitted to ED with neurological lesion of spinal cord at T12 due to a car crash. He was treated accordingly, and he made a good progress, for which 3 weeks later he was discharged. Please note that he has been offered a wheelchair due to paraplegia.

On 16<sup>th</sup> March, Mr Smith was admitted to the ED severe injuries due to a motor vehicle accident resulting in paraplegia. He **had** a colostomy for a neurogenic bowel. In addition to a baclofen pump, which should be changed 4 times a year, he made good progress as a result he was discharged **on** \_\_\_\_\_ with a discharge plan

**More dates?**

We just little more emphasis on colostomy...?

**In the usual way**

On 16th March, Mr Smith was admitted to ED with a neurological lesion of **his** spinal cord at T12 due to a car crash. He was treated **accordingly**, and he made good progress, **and** as a result 3 weeks later he was discharged **on 13<sup>th</sup> April**. Please note that he has been offered a wheelchair due to paraplegia.

**Solution: meds / treat**



On March 16th, Mr Smith had a motor vehicle accident which resulted in him being paraplegic, requiring a wheelchair, and having colostomy procedure. Subsequently, on 13<sup>th</sup> April, he was scheduled with a discharge plan to visit an occupational therapist, physiotherapy and community nurse to help him with increasing mobility and managing his daily activities.




On 16th March 2019, Mr. Smith had a motor vehicle accident, which resulted in paraplegia and neurogenic bladder. As a result, he has a urinary catheter and a baclofen pump, which requires changing four times a year. Subsequently, on 13th March 2019, he was scheduled with a discharge plan to visit a physiotherapist and occupational therapist because he now uses wheelchair and needs to increase his mobility.

On March 16th, Mr Smith had a motor vehicle accident which **resulted in** him becoming paraplegic, requiring a wheelchair, and having a colostomy procedure. **Subsequently**, on 13<sup>th</sup> April, he was **discharged** with a plan to visit an occupational therapist, **physiotherapist** and community nurse to help him with increasing mobility and managing his daily activities.

Appropriate

#### TIMELINE

On 16th March **2019**, Mr. Smith had a motor vehicle accident, which resulted in paraplegia and a neurogenic bladder. **As a result**, he had a urinary catheter and a baclofen pump, which **requires changing four times a year**. Subsequently, on 13th April, he **discharged with a plan** to visit a physiotherapist and occupational therapist.

<b>Introduction</b>	<ul style="list-style-type: none"> <li>• Provide definitive diagnosis / further treatment</li> </ul>	
<b>Timeline (short):</b>  	<ul style="list-style-type: none"> <li>• Admission to discharge</li> <li>• Heavily <u>summarised</u></li> </ul> <p style="text-align: center;">   <b>Make shorter: Focusing main ideas</b>  <b>Only important info</b> </p>	
<b>More recent Timeline:</b>  	<p>8 July 2019: Community transport arranged for appt – pt. refused, parents brought pt &amp; attended appt w him Pain well managed Note: pt isolated (won't allow girlfriend/friends to visit)</p> <p>4 August 2019: Pt missed appt, rescheduled Sept.</p> <p>6 September 2019: Telephone consultation (pt request) Fear &amp; anxiety at thought of leaving home</p> <p>8 October 2019: Missed appt, rescheduled Nov.</p> <p>10 November 2019: Missed face-to-face appt – pt admits ↑ anxiety at leaving home → panic attack in transit Telephone consultation conducted instead (diagnosis: agoraphobia (pt. requests referral to psychiatrist, 'I want some social life back'))</p> <p>Plan: Refer to psychiatrist</p>	<p>Do your own</p>
<b>Background:</b>  mix	<ul style="list-style-type: none"> <li>• Lawyer</li> <li>• Girlfriend <u>supportive</u> – 3 year relationship</li> <li>• Parents – <u>supportive</u></li> <li>• Alcohol</li> <li>• Bipolar – grandmother</li> <li>• Interests</li> </ul>	
<b>Request</b>	<ul style="list-style-type: none"> <li>• Provide definitive diagnosis / further treatment + <u>more details</u></li> <li>• Such as</li> </ul>	

Dr Lucy Besson

Psychiatrist

Newtown Hospital

111 High Street

Newtown

10<sup>th</sup> November 2019

Re: Mr Andreas Smith, DOB: 23<sup>rd</sup> October 1991

I am writing regarding Mr Andreas Smith, who is suspected of having agoraphobia and now requires a definitive diagnosis and further management.

Dr Lucy Besson

Psychiatrist

Newtown Hospital

111 High Street

Newtown

10<sup>th</sup> November 2019

**Dear Dr Besson**

Re: Mr Andreas Smith, DOB: 23<sup>rd</sup> October 1991

I am writing regarding Mr Smith, who is suspected of having agoraphobia and now requires a definitive diagnosis and further management.

Dr Lucy Besson  
Psychiatrist  
Newtown Hospital  
111 High Street  
Newtown

10.11.2019

Dear Dr Besson

Re: Mrs Andreas Smith DOB: 23/10/1990

I am writing to refer Mr Smith **a 29-year-old lawyer**, who is presenting with signs and symptoms suggestive of agoraphobia and he now requires your definitive diagnosis and further management.

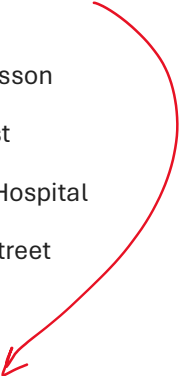
10<sup>th</sup> November 2019

Dr Lucy Besson  
Psychiatrist  
Newtown Hospital  
111 High street Newtown

RE: Mr Andreas Smith, DOB (23/Oct/1991)

Usually the exam date will be the same as the writing date

Dr Lucy Besson  
Psychiatrist  
Newtown Hospital  
111 High Street  
Newtown



**10.11.2019**

Dear Dr Besson

Re: Mr Andreas Smith, DOB: 23/10/1991

I am writing to refer Mr Smith, who is presenting with signs and symptoms suggestive of agoraphobia, and he now requires your definitive diagnosis and further management.

10<sup>th</sup> November 2019

Dr Lucy Besson  
Psychiatrist  
Newtown Hospital  
111 High Street  
Newtown



Dear Dr Besson

I am writing to refer Mr. Smith, who has signs and symptoms suggestive of agoraphobia, and now he requires your professional assessment for definitive diagnosis and further management.

I am writing regarding Mr Andrea Smith, whose signs and symptoms are suggestive of agoraphobia. He is being referred to you for definitive diagnosis and further management.

Re: Mr Andreas Smith, DOB 23 October 1991.

I am writing to refer Mr Smith, who has a possible diagnosis of agoraphobia and requires your further management and a definitive diagnosis.

Already B level

Dr Lucy Besson  
Pshychiatrist

RE: Mr Andreas Smith, DOB 23/Oct/1991

Dear Dr Besson

I am writing to refer Mr. Smith, who has signs and symptoms suggestive of agoraphobia, and now he requires your professional assessment for a definitive diagnosis and further management.

I am writing regarding Mr Smith, whose signs and symptoms are suggestive of agoraphobia. He is being referred to you for a definitive diagnosis and further management.

...whose symptoms are suggestive of ...

Re: Mr Andreas Smith, DOB 23 October 1991

I am writing to refer Mr Smith, who has a possible **case** of agoraphobia and requires your further management and a definitive **diagnosis**.

In general, its regarded as poor style to repeat the same big word in the same paragraph. (This apply to 'a', 'the', 'is', 'have')

Dr Lucy Besson  
Psychiatrist  
Newtown Hospital  
111 High Street

Newtown hospital  
111High Street  
Newtown

Date:10.11.2019

Re:Mr Andreas Smith,DOB:23.10.1991

Dear Dr Besson,

I am writing regarding Mr Smith,who has symptoms suggestive of agoraphobia.He has been referred to you for definitive diagnosis and further management.

Newtown

10.11.2019

Re: Mr Andreas Smith, DOB:23.10.1991

Dear Dr Besson,

I am writing regarding Mr Smith, who has symptoms suggestive of agoraphobia. He has been referred to you for a definitive diagnosis and further management.

Write this paragraph. Send to [alain@set-english.com](mailto:alain@set-english.com)

<p><b>Hospital treatment record:</b></p> <p><b>16 March 2019:</b> Arrival at ED  MVA (motor vehicle accident): neurologic lesion of spinal cord at T12, resulting in paraplegia (wheelchair required)  Neurogenic bladder – intermittent urinary catheter  Colostomy for neurogenic bowel → Backloren pump (change 4x/yr)  Transfer to general ward for recovery</p> <p><b>20 March 2019:</b> Good progress  Medications: corticosteroids, NSAIDs, anticonvulsants, mild opioids, antispasmodics, muscle relaxants  Mild infection at incision site → antibiotics</p> <p><b>13 April 2019:</b> Ready for discharge  Discharge plan: continue opioids &amp; NSAIDs 2 months (to be reviewed by family doctor)  OT &amp; physio visits (mobility, weight bearing exercises) &amp; wheelchair (unable to ambulate)  Community Nurse – help w ADLs</p>	<p><b>Timeline 1:</b></p> <p>CONTEXT: full picture</p> <p>On 16<sup>th</sup> March 2019, Mr Smith was admitted to our hospital due to... He was treated and then discharged.</p> <p><b>Extra</b></p>
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In general, how do we choose case notes:

**Important for the reader**

**More specific:**

d	Content	C
	Content is appropriate to intended reader and addresses what is needed to continue care (key information is included; no important details missing); content from case notes is accurately represented	L a n i i s a

**Needed for TASK:** necessary / essential / crucial / must have **ALL**

**WATER / COFFEE**

**Appropriate (less strong):** helpful, useful, might help, could help **SOME**

**MILK / HOT / SUGAR / HONEY / CREAM**

**Mustard**

**Chilli sauce**

+447577151245 ...