

TODAY

1

2 3



TIME ALLOWED: READING TIME: 5 MINUTES WRITING TIME: 40 MINUTES

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

Assume that today's date is 18 September 2018.

You are a family doctor examining an 80-year-old female who has been registered at your practice for 40 years.

Beryl Smith (Mrs) DOB: 19 May 1938 (80 y.o.)

Rose Aged Care Home, 29 Rose Avenue, Newtown (moved there 2018) Address:

Social background:

Widow (husband died 2016)

3 daughters: Mary (lives abroad), Yana (died 2000, drowning), Susan (visits 1x/mth

Interests: lawn bowls, playing cards, reading Note: support needed at external medical appts (Susan)

Family History: Mother died 65 y.o. (blood clot)

Father died 58 v.o. (alcoholic liver disease)

Past medical history: 2010 BCC (excision, no recurrence)

2014 hypertension (controlled w ACE inhibitors)

2016 L total hip replacement

2017 ?dementia – initial stage (^forgetfulness, confusion)

No known allergies

18 Sept 2018: Pt accompanied by daughter

Presenting complaint: ringing in ears (bilateral), mild headache, pruritus R ear

Height: 153 cm, Weight: 55 kg, BMI: 23.5 kg/m² (normal) Bilateral otoscopy: normal tympanic membrane

Rinne & Weber tests (normal)

Ear examination:

Definitive diagnosis:

External configuration - R acute otitis externa (red, flaky, warm skin)

Provisional diagnosis:

?foreign bodies blocking R ear canal - ?cotton wool

?R otitis media (middle ear infection) - ?bacterial, ?fungal (request swab to confirm)

?bilateral hearing loss, ?tinnitus

Daughter - pt unable to hear questions/instructions if background noise (eg if radio on, in

restaurants, when care home residents talk, etc.)

Pt - uses 'home remedies' (loud radio & cotton wool to block out ringing sound, honey for

pruritus, moisturiser 2x/day for flaky skin)

Ceased social outings (cannot hear well outside)

Recommended: visual aids for use by care home staff (to communicate daily activities, instructions, etc)

Treatment: start antibiotic drops (potential otitis media to be confirmed by swab) &

paracetamol 4x/day (headache)

Refer to audiologist for opinion & diagnosis w audiometry (pt consent given)

Plan: Write to audiologist

Writing Task:

Using the information in the case notes, write a letter of referral to Dr Albury, audiologist, outlining the patient's symptoms, and requesting further investigation and management. Address the letter to Dr Danielle Albury, Audiologist, Newtown Hospital, 123 New Street, Newtown.

In your answer:

. Expand the relevant notes into complete sentences

Do <u>not</u> use note form

The body of the letter should be approximately 180-200 words.



Introduction	Definitive diagnosis:	
Muoduction	External configuration – R acute otitis externa (red. flaky, warm skin)	
1	g further investigation and management.	
	All and the second seco	
	I am writing regarding Mr, who has a ear and	
V		
771 1 1 Oth	now requires	
Visit: 18 th	Pt accompanied by daughter Presenting complaint: ringing in ears (bilateral), mild headache, pruritus R ear	
Objective	Objective: Height: 153 cm, Weight: 55 kg, BMI: 23.5 kg/m² (normal)	
	Bilateral otoscopy: normal tympanic membrane	
	Rinne & Weber tests (normal)	
	Ear examination:	
	Definitive diagnosis: External configuration – R acute otitis externa (red, flaky, warm skin)	
	External configuration - n acute office external feet, flaky, warm skill)	
1		
Visit: 18 th	Discussion:	
, 1510, 10	Daughter – pt unable to hear questions/instructions if background noise (eg if radio on, in	
	restaurants, when care home residents talk, etc.)	
G 1	Pt – uses 'home remedies' (loud radio & cotton wool to block out ringing sound, honey for pruritus, moisturiser 2x/day for flaky skin)	
Subjective	Ceased social outings (cannot hear well outside)	
	Recommended: visual aids for use by care home staff (to communicate daily activities,	
	instructions, etc)	
	Treatment: start antibiotic drops (potential otitis media to be confirmed by swab) &	
	paracetamol 4x/day (headache) Refer to audiologist for opinion & diagnosis w audiometry (pt consent given)	
	, and the desired great of the desired great great of the desired great gre	
D 1 1		
Background	3 daughters: Mary (lives abroad), Yana (died 2000, drowning), Susan (visits 1x/mth	
	Note: support needed at external medical appts (Susan)	
	SECRETARIA DE LA CONTRACTOR DE LA CONTRA	
	2014 hypertension (controlled w ACE inhibitors)	
	2017 ?dementia – initial stage (Torgetfulness, confusion)	
	No known allergies	
Requests	g further investigation and management.	
	Or and Market Ma	
	Extra?	
	Provisional diagnosis:	
	?foreign bodies blocking R ear canal – ?cotton wool	
	?R outs media (middle ear infection) ?bacterial, ?fungal (request swab to confirm) ?bilateral hearing loss, ?tinnitus	
	. And the state of	
	·	



Original

During our discussion, her daughter reported that Mrs Smith experiences difficulty hearing in noisy environments. Additionally, Mrs Smith has been using home remedies such as honey, eardrops, and cotton wool to alleviate ringing in her ears. She has limited her social interactions due to her hearing impairment. Visual aids have been recommended by the care staff, and she has been prescribed antibiotics and paracetamol.

Mrs. Smith's mother stated that her mother was unable to hear questions on background noise, due to which social outings were ceased. Additionally, Mrs. Smith used a loud radio, cotton wool to block out the ringing sound, honey for pruritus, and moisturizer twice a day. Subsequently ,antibiotics drops and paracetamol were commenced .Please be aware that visual aids was recommended .

Having confirmed the diagnosis of otitis externa a discussion about her social lifestyle was conducted. Mrs Smith's daughter informed me that her mother cannot hear in crowded environments. Apart from this, she used home remedies such as honey for ear pruritus, and loud radio to prevent ringing sounds as well as moisturizer for flaky skin. Additionally, visual aids have been

Corrections

During our discussion, Mrs Smith's daughter reported that her mother experiences difficulty hearing in noisy environments. Additionally, Mrs Smith has been using home remedies such as honey for pruritis, eardrops, and cotton wool to alleviate the ringing in her ears. She has limited her social interactions due to her hearing impairment. Visual aids have been recommended for the care home staff, and she has been prescribed antibiotic drops and paracetamol.

 No mention of swab for otitis media confirmation or use of moisturiser – important for audiologist to know?
 Maybe swab mentioned in requests?

Mrs. Smith's daughter stated that her mother was unable to hear questions when there is background noise. As a result, social outings were ceased. Additionally, Mrs. Smith has been using a loud radio and cotton wool to block out the ringing sound, honey for pruritus, and moisturizer twice a day. Subsequently, antibiotic drops and paracetamol were commenced. Please be aware that visual aids were recommended for care home staff.

 No mention of swab for otitis media confirmation – important for audiologist to know?

Maybe swab mentioned in requests?

Having confirmed the diagnosis of otitis externa, a discussion about Mrs Smith's current social life was conducted. Mrs Smith's daughter informed me that her mother cannot hear in crowded environments. In addition, she has been using home remedies such as honey for her pruritus, and cotton wool and a loud radio to prevent the ringing sounds as well as moisturizer for her flaky



advised ,and antibiotic drops and paracetamol have been prescribed. Please note that Mrs Smith has stopped community interactions due to her hearing problem. skin. Additionally, visual aids have been advised for use by care home staff, and antibiotic drops and paracetamol have been prescribed. Please note that Mrs Smith has stopped attending social interactions due to her hearing problem.

 No mention of swab for otitis media confirmation – important for audiologist to know?
 Maybe swab mentioned in requests?

During our discussion, Mrs Smith's daughter stated that her mother is incapable of hearing in a noisy background. Additionally, Mrs Smith used home remedies such as honey for pruritus, a loud radio, and cotton wool to block out ringing sound. Kindly note that she has stopped social interaction due to her hearing problems. In addition, visual aids have been recommended and antibiotic drops and paracetamol have been prescribed.

During our discussion, Mrs Smith's daughter stated that her mother is incapable of hearing in a noisy environment. Additionally, Mrs Smith used home remedies such as honey for her pruritus, and a loud radio and cotton wool to block out the ringing sound. Kindly note that she has stopped attending social interactions due to her hearing problems. In addition, visual aids have been recommended for use by care home staff and antibiotic drops and paracetamol have been prescribed.

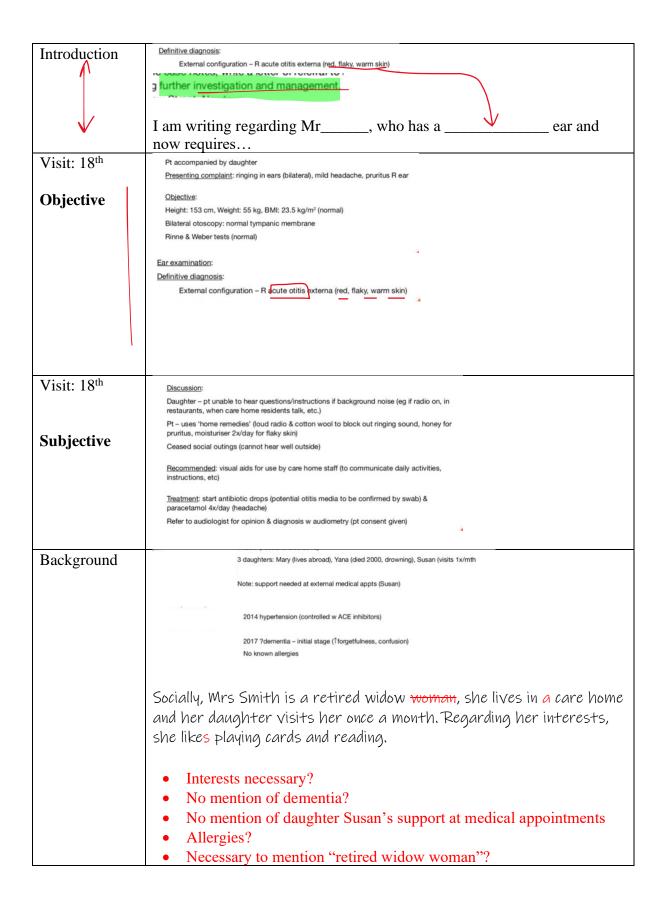
 No mention of swab for otitis media confirmation or use of moisturiser – important for audiologist to know?
 Maybe swab mentioned in requests?

On today discussion Mrs Smith's daughter stated that her mother is not able to hear questions or instructions in nosy background. However, she has used home remedies like cotton wool to block out ringing sound, honey for pruritus, and moisturiser for flaky skin. visual aids have been recommended by care staff. Please note, antibiotic and paracetamol have been prescribed to Mrs Smith.

During today's discussion, Mrs Smith's daughter stated that her mother is not able to hear questions or instructions when there is a noisy background. However, she has been using home remedies like cotton wool to block out the ringing sound, honey for her pruritus, and moisturiser for her flaky skin. Visual aids have been recommended for use by care home staff. Please note, antibiotic drops and paracetamol have been prescribed to Mrs Smith.

 No mention of swab for otitis media confirmation – important for audiologist to know?
 Maybe swab mentioned in requests?







Requests	g further investigation and management.
	Extra? Provisional diagnosis: ?foreign bodies blocking R ear canal - ?cotton wool [77 Otitis media (middle ear infection)] ?bacterial, ?fungal (request swab to confirm) ?bilateral hearing loss, ?tinnitus Treatment: start antibiotic drops (potential otitis media to be confirmed by swab) & paracetamol 4x/day (headache) Refer to audiologist for opinion & diagnosis w audiometry (pt consent given) In the view of the above, Mrs Smith is being referred to you for your further investigation and management. The provisional diagnosis is that she may have a middle ear infection and a swab has been requested to confirm. Please provide further opinion and diagnosis with regards to audiometry. Bilateral hearing loss and foreign bodies are suspected.
	Send background and requests to:
	alain@set-english.com laurence@set-english.com