

## OET Nursing Writing Week

**Patient Name:** Olivia Hawthorne

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

### Planning

15 – 20 minutes:

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

What is the situation after the above steps?

I can focus on writing = Perfect circumstances in which to write a letter

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### Identifying Purpose & Choosing Case Notes:

Ask yourself these questions about Ms Hawthorne's case notes:

1. Who is the reader?	Dr Miriam Shah – obstetrician
2. What is the reader's task?	Further investigation and ultrasound
3. Does the reader know the patient?	No
4. Does the reader have any tasks?	Investigate and perform ultrasound
5. Why am I writing <u>today</u> ?	Refer Olivia Hawthorne
6. Is it urgent?	No – not mentioned

## Case Notes

### Notes:

Ms Olivia Hawthorne is a patient at your practice where you are a nurse. She has come to have her intrauterine device (IUD) removed.

#### PATIENT DETAILS:

**Name:** Olivia Hawthorne  
**DOB:** 01.04.79 (40 years old)  
**Address:** 31 Rawley Crescent, Lowtown

#### Social background:

Married; 2 sons (7 and 5 y.o.)  
 Active lifestyle: yoga teacher (9 years); swims 3x/week  
 Non-smoker; social drinker; vegan diet

**Family history:** Father – Parkinson's disease

**Medical history:** G3P2 (3 pregnancies, 2 live children)  
 2007: Proximal DVT – R leg (28 y.o.) while long hours in stressful office job (lots of air travel)  
 2008: Iron deficiency anaemia  
 2009: Menorrhagia & dysmenorrhea diagnosed  
 2012: Third degree perineal tear  
 2014: Elective C-section

**Medications:** Warfarin (ceased 2008)  
 Ferrous sulphate 200 mg/day mane

#### Reason for presenting:

Removal of IUD as currently ineffective for menorrhagia & dysmenorrhea

#### Treatment Record

**16.04.07** Proximal DVT in R leg diagnosed; warfarin prescribed; treated successfully, no further issues

**21.04.09** Menorrhagia and dysmenorrhea diagnosed – menstrual bleeding = 10 days; Cerazette (desogestrel) prescribed

**22.04.11** Ceased Cerazette to conceive child 1

**26.09.12** Menorrhagia and dysmenorrhea worse than pre-pregnancy  
 Combined pill Cilest prescribed

**02.06.13** Ceased Cilest to conceive child 2

**10.04.15** Menorrhagia returns with menstrual cycle  
 IUD Mirena coil inserted



- 21.04.18** Menorrhagia improved; no more dysmenorrhea – no menstrual bleeding since fitting  
Vaginal thrush: Pt treated with Canestan x5 since last appt
  
- 02.04.19** Menstrual spotting = 3 months; experiencing menorrhagia and dysmenorrhea; ↑hairiness;  
↑greasiness of skin  
Canestan x5 in last year  
Removal of IUD with nurse prescribed
  
- 06.04.19** Removal of IUD unsuccessful; attempted for 15 mins; unable to locate strings – Pt can't  
recall last time strings located  
Pregnancy test administered – negative  
? IUD shifted/fallen out  
Refer to OB/GYN for further investigation + ultrasound

### Writing Task:


Using the information given in the case notes, write a letter of referral to Dr Shah, Consultant Obstetrician, for further investigation. Address the letter to Dr Miriam Shah, Consultant Obstetrician, Royal Hospital, Lowtown.

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.

### Paragraph Planning

Introduction	Referral – unsuccessful removal of IUD – further investigation and ultrasound Who? What? Why?
Timeline	<p><b>Treatment Record</b></p> <p><del>16.04.07</del> Proximal DVT in R leg diagnosed; warfarin prescribed; treated successfully, no further issues</p> <p>21.04.09 Menorrhagia and dysmenorrhea diagnosed – menstrual bleeding = 10 days; Cerazette (desogestrel) prescribed ✓</p> <p>22.04.11 Ceased Cerazette to conceive child 1 → Sum.</p> <p>26.09.12 Menorrhagia and dysmenorrhea worse than pre-pregnancy Combined pill Cilest prescribed → Sum.</p> <p>02.06.13 Ceased Cilest to conceive child 2</p> <p>10.04.15 Menorrhagia returns with menstrual cycle <u>IUD Mirena coil inserted</u> ✓</p> 

	<p><b>21.04.18</b> Menorrhagia improved; no more dysmenorrhea – no menstrual bleeding since fitting  <del>Vaginal thrush. Pt treated with Canestan x5 since last appt</del> <span style="float: right;">Sum.</span></p> <p><b>02.04.19</b> Menstrual spotting = 3 months; experiencing menorrhagia and dysmenorrhea; ↑hairiness          ↑greasiness of skin ✓  <del>Canestan x5 in last year</del>          Removal of IUD with nurse prescribed ✓</p>
Current condition	<p><b>06.04.19</b> Removal of IUD unsuccessful; attempted for 15 mins; unable to locate strings – Pt can't recall last time strings located <span style="float: right;">Sum.</span>          Pregnancy test administered – negative ✓          ? IUD shifted/fallen out ✓</p>
Background (social / medical)	<p><b>Social background:</b>          Married; <del>2 sons (7 and 5 y.o.)</del>          Active lifestyle: yoga teacher (9 years); swims 3x/week <span style="float: right;">&gt; Sum. ?</span>          Non-smoker; social drinker; vegan diet</p> <p><b>Family history:</b> <del>Father – Parkinson's disease</del></p> <p><b>Medical history:</b> G3P2 (3 pregnancies, 2 live children) ✓  <del>2007: Proximal DVT – R leg (28 y.o.) while long hours in stressful office job (lots of air travel)</del>          2008: Iron deficiency anaemia ✓  <del>2000: Menorrhagia &amp; dysmenorrhea diagnosed</del>          2012: Third degree perineal tear <span style="float: right;">&gt; Sum. ?</span>          2014: Elective C-section</p> <p><b>Medications:</b> <del>Warfarin (ceased 2008)</del>          Ferrous sulphate 200 mg/day mane ✓</p>
Request	Further investigation and ultrasound

Write background & request paragraph and send to [paul@set-english.com](mailto:paul@set-english.com)

Introduction:

Introduction	Referral – unsuccessful removal of IUD – further investigation and ultrasound Who? What? Why?
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Student	Teacher
<p>Dr Miriam Shah Consultant Obstetrician Royal Hospital Lowtown 06.04.19</p> <p>Dear Doctor</p> <p>Re: Mrs Olivia Hawthorne , DOB: 01.04.79</p> <p>I am writing regarding Mrs Olivia Hawthorne who was presented to our practice for removing of IUD. Following being failed of removing of IUD she requires your further investigation and performance of a ultrasound.</p>	<p>Dr Miriam Shah Consultant Obstetrician Royal Hospital Lowtown</p> <p>6<sup>th</sup> April 2019</p> <p>Dear Doctor <b>Shah</b>,</p> <p>Re: <b>Ms</b> Olivia Hawthorne, DOB: 01.04.79</p> <p>I am writing regarding <b>Ms</b> Olivia Hawthorne, who <b>was</b> presented to our practice for <b>removal</b> of <b>her</b> IUD. Following <b>the unsuccessful removal</b> of <b>her</b> IUD, she <b>now</b> requires your further investigation and performance of <b>an</b> ultrasound.</p> <ul style="list-style-type: none"> <li>• Content good – well done!</li> <li>• Some issues with language – be careful with linking words, passive voice and sentence structure</li> <li>• Be careful with the titles you use with patients and provide the name of the doctor or nurse if you have the details</li> </ul>
<p>I am writing regarding Ms Olivia Hawthorne, who requires further investigation and ultrasound test, due to ineffective removal of her IUD.</p>	<p>I am writing regarding Ms Olivia Hawthorne, who requires further investigation and <b>an</b> ultrasound <del>test</del>, due to <b>the unsuccessful</b> removal of her IUD.</p> <ul style="list-style-type: none"> <li>• Concise introduction with good content – well done!</li> <li>• Language level mostly very effective – well done!</li> </ul>

<p>I am writing regarding Ms Hawthorne, who was admitted to our hospital due to unsuccessful removal of IUD which is ineffective for menorrhagia and dysmenorrhea. She is scheduled to be discharged today and now requires further investigation and ultrasound.</p>	<p>I am writing regarding Ms Hawthorne, who <del>attended our clinic for the</del> removal of her IUD, which <del>was unsuccessful. is ineffective for menorrhagia and dysmenorrhea.</del> She <del>is scheduled to be discharged today and</del> now requires further investigation and <del>an</del> ultrasound.</p> <ul style="list-style-type: none"> <li>• Ms Hawthorne was not admitted to hospital – she visited a GP practice</li> <li>• Too much information about IUD – this could be in the timeline paragraphs</li> </ul>
<p>Dr Miriam Shah Consultant obstetrician Royal Hospital Lowtown</p> <p>6th April 2019</p> <p>Dear Dr Shah, Olivia Hawthorne, 40 years old, DOB: (01/04/79)</p> <p>I am writing to refer Mrs Hawthorne to be under your care who has been presented with an unsuccessful removal of IUD for a further investigation.</p>	<p>Dr Miriam Shah Consultant <del>Obstetrician</del> Royal Hospital Lowtown</p> <p>6th April 2019</p> <p>Dear Dr Shah,</p> <p><del>RE: Olivia Hawthorne, 40 years old, DOB:</del> <del>(01/04/79)</del></p> <p>I am writing to refer <del>Ms Hawthorne, to be under your care</del> who <del>has been</del> presented for the removal of her IUD. The procedure was unsuccessful and she now requires further investigation <del>and an ultrasound.</del></p> <ul style="list-style-type: none"> <li>• Some content missing – the notes state that she needs further investigation and an ultrasound</li> <li>• The sentence structure was complicated and you tried to fit too much into one sentence – separate the information into two sentences to make it clearer</li> </ul>
<p>I am writing regarding Mrs Oliva Hawthorne, a 40-year-old woman, who is suspected to have shifted or fallen out IUD and requires your further investigation.</p>	<p>I am writing regarding <del>Ms Olivia Hawthorne,</del> a 40-year-old woman, whose IUD is suspected to have shifted or fallen out. <del>She</del></p>

	<p><b>now</b> requires your further investigation <b>and</b> an ultrasound.</p> <ul style="list-style-type: none"> <li>• Some content missing – the notes state that she needs further investigation and an ultrasound</li> <li>• The sentence structure was a bit complicated and you tried to fit too much into one sentence – separate the information into two sentences to make it clearer</li> </ul>
<p>06 April 2019 Dr Miriam Shah Consultant Obstetrician Royal Hospital Lowtown</p> <p>Dear Dr Shah,</p> <p>Re: Olivia Hawthorne, DOB: 01.04.79</p> <p>Thank you for continuing further investigation to Mrs. Hawthorne, a 40-year-old woman. She is being transferred to your care due to an unsuccessful removal of an intrauterine device.</p>	<p>06 April 2019</p> <p>Dr Miriam Shah Consultant Obstetrician Royal Hospital Lowtown</p> <p>Dear Dr Shah,</p> <p>Re: Olivia Hawthorne, DOB: 01.04.79</p> <p>Thank you for <b>performing</b> further investigation <b>for Ms</b> Hawthorne, a 40-year-old woman. She is being <b>referred</b> due to <b>the</b> unsuccessful removal of <b>her</b> intrauterine device.</p> <ul style="list-style-type: none"> <li>• Some content missing – the notes state that she needs further investigation and an ultrasound</li> <li>• The sentence order was a bit confusing – I would start with the issue (the unsuccessful removal of the IUD) and then talk about what you would like the reader to do</li> </ul>
<p>6th April 2019</p> <p>Dr Mariam Shah Consultant Obstetrician Royal Hospital Lowtown</p>	<p>6th April 2019</p> <p>Dr <b>Miriam</b> Shah Consultant Obstetrician Royal Hospital Lowtown</p>

<p>Re: Olivia Hawthorne, 40 years old</p> <p>Dear Dr Shah,</p> <p>I am writing to refer Ms Hawthorne into your care for unsuccessful removal of IUD in our clinic. She requires your further assessment with an ultrasound and investigation.</p>	<p>Re: Olivia Hawthorne, 40 years old</p> <p>Dear Dr Shah,</p> <p>I am writing to refer Ms Hawthorne into your care <b>after the</b> unsuccessful removal of <b>her IUD at</b> our clinic. She requires your further <b>investigation and</b> an ultrasound.</p> <ul style="list-style-type: none"> <li>• Content level good but there was a bit of unnecessary repetition – assessment and investigation</li> <li>• Mostly clear language use – just be careful with preposition use</li> </ul>
<p>I am writing regarding Mrs Hawthorne, who requires facilitation of her IUD removal. She is being referred for further investigation.</p>	<p>I am writing regarding Mrs Hawthorne, who requires <b>your care following the unsuccessful removal</b> of her IUD. She is being referred for further investigation <b>and an ultrasound</b>.</p> <ul style="list-style-type: none"> <li>• Some content missing – the notes state that she needs further investigation and an ultrasound</li> <li>• Be careful with word use – it is not clear that the removal was unsuccessful so Dr Shah may not understand the reason for the referral</li> </ul>
<p>Dr Miriam Shah Consultant Obstetrician Royal Hospital, Lowtown</p> <p>6th April 2019</p> <p>RE: Ms Olivia Hawthorne, age 40</p> <p>Dear Sir or Madame</p> <p>I am writing regarding Ms Olivia Hawthorne, who had an unsuccessful removal of her IUD. She is being referred to you and requires further investigation.</p>	<p>Dr Miriam Shah Consultant Obstetrician Royal Hospital Lowtown</p> <p>6th April 2019</p> <p>RE: Ms Olivia Hawthorne, age 40</p> <p>Dear <b>Dr Shah,</b></p> <p>I am writing regarding Ms Olivia Hawthorne, whose <b>IUD removal was</b> unsuccessful. She is being referred to you and requires further investigation <b>and an ultrasound</b>.</p>



	<ul style="list-style-type: none"> <li>• Some content missing – the notes state that she needs further investigation and an ultrasound</li> <li>• Remember to use the name of the medical professional if you have this information in the notes</li> </ul>
<p>20th May, 2024</p> <p>Dr Miriam Shah Consultant Obstetrician Royal Hospital Lowtown</p> <p>Re: Mrs Olivia Hawthorne, age 40</p> <p>Dear Dr Shah,</p> <p>I am writing regarding Mrs Olivia, who was admitted to our hospital due to an unsuccessful removal of intrauterine device. She is being referred to you for further investigation and ultrasound.</p>	<p>6<sup>th</sup> April 2019</p> <p>Dr Miriam Shah Consultant Obstetrician Royal Hospital Lowtown</p> <p>Re: Ms Olivia Hawthorne, age 40</p> <p>Dear Dr Shah,</p> <p>I am writing regarding Ms Hawthorne, who visited our practice for the removal of her intrauterine device. The procedure was unsuccessful and she is now being referred to you for further investigation and an ultrasound.</p> <ul style="list-style-type: none"> <li>• Ms Hawthorne was not admitted to hospital – she visited a GP practice</li> <li>• Remember to use the date from the notes, not today's date</li> <li>• Use Mr/Ms/Mrs with the surname, not the first name</li> </ul>
<p>6th April 2019</p> <p>Dr Miriam Shah Consultant Obstetrician Royal Hospital, Lowtown</p> <p>Re: Olivia Hawthorne, DOB: 1st April 1979</p> <p>Dear Dr Shah,</p> <p>I am writing to refer Mrs Hawthorne, who underwent through an unsuccessful IUD removal and now she requires an</p>	<p>6th April 2019</p> <p>Dr Miriam Shah Consultant Obstetrician Royal Hospital Lowtown</p> <p>Re: Ms Olivia Hawthorne, DOB: 1st April 1979</p> <p>Dear Dr Shah,</p> <p>I am writing to refer Ms Hawthorne, who underwent through an unsuccessful IUD</p>

<p>ultrasound scan and you further investigation.</p>	<p>removal and now <del>she</del> requires an ultrasound scan and your further investigation.</p> <ul style="list-style-type: none"> <li>• Good level of content – well done!</li> <li>• Some minor language issues but mostly clear language use – well done!</li> </ul>
<p>Dr Miriam Shah          Consultant Obstetrician          Royal Hospital          Lowtown</p> <p>06th April 2019</p> <p>Dear Dr Shah</p> <p>Re: Olivia Hathorne (42 years old)</p> <p>I am writing regarding to refer Mrs Hawthorne who was performed unsuccessful removal of intrauterine device. She requires your further investigations and ultrasound.</p>	<p>Dr Miriam Shah          Consultant Obstetrician          Royal Hospital          Lowtown</p> <p>06th April 2019</p> <p>Dear Dr Shah</p> <p>Re: Ms Olivia Hawthorne, age 42 years old</p> <p>I am writing <del>regarding</del> to refer Mrs Hawthorne, who <del>underwent the</del> unsuccessful removal of <del>her</del> intrauterine device. She requires your further investigations and <del>an</del> ultrasound.</p> <ul style="list-style-type: none"> <li>• Good level of content – well done!</li> <li>• Some language issues – no need to put both “regarding” and “to refer”, choose one</li> </ul>

**Example introduction – fill the gaps:**

I am writing to refer Ms Olivia Hawthorne, who presented to our clinic for the removal of her IUD. The procedure was unsuccessful and she now requires further investigation and an ultrasound.

### Treatment Record

- 16.04.07** Proximal DVT in R leg diagnosed; warfarin prescribed; treated successfully, no further issues
- 21.04.09** Menorrhagia and dysmenorrhea diagnosed – menstrual bleeding = 10 days; Cerazette (desogestrel) prescribed
- 22.04.11** Ceased Cerazette to conceive child 1
- 26.09.12** Menorrhagia and dysmenorrhea worse than pre-pregnancy  
Combined pill Cilest prescribed
- 02.06.13** Ceased Cilest to conceive child 2
- 10.04.15** Menorrhagia returns with menstrual cycle  
IUD Mirena coil inserted
- 21.04.18** Menorrhagia improved; no more dysmenorrhea – no menstrual bleeding since fitting  
Vaginal thrush: Pt treated with Canestan x5 since last appt
- 02.04.19** Menstrual spotting = 3 months; experiencing menorrhagia and dysmenorrhea; ↑hairiness;  
↑greasiness of skin  
Canestan x5 in last year  
Removal of IUD with nurse prescribed



Student	Teacher
<p>Ms Hawthorne was diagnosed with menorrhagia and dysmenorrhea <del>in 19th April</del> in 2009, for which, cerazette was prescribed. After one year, she stopped taking it to plan her first pregnancy. As a consequence of this, her aforementioned conditions were worsened than pre-pregnancy. Therefore, combined pill cilest was commenced. On 2nd June 2013, the pill was discontinued for her second pregnancy. She experienced menorrhagia during menstruation in April 2015. As a result, an IUD Morena coil was inserted. Although her conditions were improved in 2018, she reported menstrual spotting, increased hairiness and greasy skin, as well as menorrhagia and dysmenorrhea in April 2019. Thus, she was advised by a nurse to remove the IUD.</p>	<p>Do you think it is necessary to state the exact date 10 years ago that the diagnosis was made?</p> <p>Focus on what the task is for the reader – and choose content on that basis</p> <p>Although over the following three years her condition improved, she reported menstrual spotting, increased hairiness and greasy skin, as well as menorrhagia and dysmenorrhea in April 2019. Thus, she was advised by a nurse to remove the IUD.</p>

<p>Initially, Ms Hawthorne was diagnosed with menorrhagia and dysmenorrhea, for which she was prescribed Cerazette. <del>Menorrhagia and dysmenorrhea got worse</del> Both conditions worsened after Ms Hawthorne's first <del>child</del> delivery and as result, Cilest was prescribed. <del>On April</del> In 2015, after Ms Hawthorne's second <del>child</del> delivery, an IUD Mirena coil was inserted. As a result, her menorrhagia improved and <del>there was no more</del> dysmenorrhea ceased. On 2<sup>nd</sup> April 2019, a removal of IUD was prescribed as a result of her experiencing both conditions. Additionally, Ms Hawthorne has experienced increased hairiness and greasiness of skin.</p>	<p>The timeline requires a date – 2009</p> <p>Too much repetition do we need to keep repeating the condition names?</p>
<p>On 6th of April 2019, Ms Hawthorne presented to our practice clinic for removal of her intrauterine device . On 21 th of April 2009 having being diagnosed with menorrhagia and dysmenorrhea, she was prescribed Cerazette and ceased it to conceive child 1 on 22 nd of April 2011. On 26 th of sepseptember 2012, due to having being worsened aforementioned ccondition , combined pill cilest was commenced and stopped it to conceive child 2. On 10 th of April 2015 due to menorrhagia returns with menstrual cycle , IUD Mirena coil was inserted. On 2 nd of April 2019 , she noticed that menstrual spotting for 3 months additionally, having being experienced with menorrhagia and dismenorrhea as well as increasing of hairness and greasiness of skin and was started Canestan 5 times in last year. Finally to rectify this condition , removal of IUD with nurse was prescribed .</p>	<p>53 words left – intro / background / current / request</p> <p>Very strange organisation – start with today and then go back 10 years! Confusing for reader</p> <p>This para is too long and contains too much unnecessary information</p> <p>Additionally, there are significant language errors – work on the organisation / content first and the language will follow.</p>
<p><del>Ms Olivia</del> Hawthorne was diagnosed <del>of</del> with menorrhagia and dysmenorrhea in 2009, cerazatte was prescribed for her but she later stopped taking it to conceive her first child after two years. In order to have her second child in 2013, she discontinued her combined pill that was prescribed in 2012. However, her menorrhagia returned during her menstrual cycle in 2015. She had menstrual spotting for three months with increased hairiness and greasiness of skin this year of which IUD removal was prescribed.</p>	<p>Ms Hawthorne was diagnosed-with menorrhagia and dysmenorrhea in 2009, for which cerazatte was prescribed but was later ceased to conceive her first child.</p> <p>The timeline is not very clear – stick to order of time and use clear date stamps:  2012 – combined pill started  2013 – pill ceased  2015 – return of symptoms &amp; coil inserted  02/04/2019- more symptoms</p>

	Don't forget key information - coil
<p>In 2009, Ms Hawthorne was diagnosed with menorrhagia and dysmenorrhea. Over the following six years she was prescribed with cerazette and cilest, which were both ceased in order to conceive her children. However, in 2015 menorrhagia returned with her menstrual cycle, and an IUD Mirena coil was inserted.</p> <p>Subsequently, on 2<sup>nd</sup> April 2019, she stated that she had been experiencing the same aforementioned condition, along with increased hairiness and skin greasiness, although she had shown an improvement one year earlier. As a result of her relapse, a removal of her IUD was prescribed.</p>	<p>Excellent summarising! There's a clear focus on what the reader needs to know and what they don't need to know.</p> <p>She had shown an improvement over the previous three years</p>
<p>On the 21st April In 2009, Ms Hawthorne was diagnosed with menorrhagia and dysmenorrhea. She had menstrual bleeding for 10 days and was prescribed Cerazette. However on the 22nd April 2011, she had to discontinue Cerazette as she wanted to conceive her first child. On the 26th September 2012, her menorrhagia and dysmenorrhea worsened after her child's delivery and was prescribed Cilest which she had to discontinue on the 2nd June 2013 to conceive her second child.</p> <p>After her second child's delivery, on the 10th April 2015, IUD Mirena coil was inserted as menorrhagia had returned again with menstrual cycle. Eventually, Over the following 3 years her menorrhagia improved with no more dysmenorrhea. However, on the 2nd April 2019, Ms Hawthorne started having menstrual spotting for 3 months and started experiencing menorrhagia and dysmenorrhea again with an increase of hairiness as well as an increase of skin greasiness.</p>	<p>a summary of oral contraception would be vital – but not all of the detail</p> <p>We don't need these detailed dates and we can summarise as in previous para.</p> <p>However, on the 2nd April 2019, Ms Hawthorne stated / reported having menstrual spotting for 3 months and had been experiencing menorrhagia and dysmenorrhea again</p>

06.04.19

Removal of IUD unsuccessful; attempted for 15 mins; unable to locate strings – Pt can't recall last time strings located **Sum.**

Pregnancy test administered – negative ✓

? IUD shifted/fallen out ✓

Student	Teacher
<p>Ms Hawthorne underwent the removal of IUD on 6th April 2019 but it was unsuccessful. <del>The</del> A pregnancy test <del>showed</del> was positive. <del>Therefore</del>, it could possibly be the IUD has shifted or fallen out.</p>	<p>If they couldn't find IUD she couldn't undergo removal</p> <p>Use today instead of today's date</p> <p>The connector 'therefore' is not appropriate- it suggests relationship between pregnancy test result and location of IUD.</p> <p>Organisation – would be better to put pregnancy test at end and connect IUD info</p>
<p>Today, Ms Hawthorne presented to our practice for the removal of her IUD. The procedure was unsuccessful due to inability to locate the device, <b>and the possibility of the device falling out or being shifted was mentioned by her.</b> Additionally, a pregnancy test was performed and showed negative.</p>	<p>there was no mention – just a possibility</p> <p>.....and it is possible that the IUD has fallen out or moved.</p> <p>Well organised and good language</p>
<p>Today, Ms Hawthorne underwent to an unsuccessful IUD removal. During her visit a pregnancy test was administered and the result was negative. Additionally, that her IUD was shifted.</p>	<p>undergo + procedure (no 'to')</p> <p>Please note, it is suspected that her IUD has moved or fallen out.</p> <p>Organisation – would be better to put pregnancy test at end and connect IUD info</p>
<p>Regarding <del>her</del> Ms Hawthorne's current condition, she has had an unsuccessful removal of her IUD, and the strings could not be located last time. <b>As well as that In addition, it could not be determined if her IUD has shifted or fallen out.</b> Please note, her pregnancy test result was negative.</p>	<p>Always re-state the Patient for new paragraphs</p> <p>Some confusion over 'last time':</p> <p>Pt can't recall the last time she saw strings</p>
<p>Today, Ms Hawthorne's IUD removal was unsuccessful because its strings could not be</p>	

<p>located and <b>she cannot remember the inserted time of it</b>. In addition a pregnancy test was performed which <b>was negative. has a negative result.</b></p>	<p>What does this mean?</p>
<p>On 2nd April 2019, Ms Hawthorne presented with complaints of 3 months <b>of</b> menstrual spotting with menorrhagia and dysmenorrhea, as well as increased hairiness and greasiness of her skin. Therefore, removal of her IUD was advised. <b>In</b> today's visit, the attempted removal of her IUD for 15 minutes was unsuccessful due to difficulty locating the string, <b>which</b> probably fell out or shifted. Please note that her pregnancy test resulted in negative.</p>	<p><b>this relative clause is inaccurate because 'which' means string.</b></p> <p><b>In today's visit, the attempted removal of her IUD for 15 minutes was unsuccessful due to difficulty locating the string. As such, the IUD has probably fallen out or shifted.</b></p> <p><b>In light of this / Bearing in mind</b></p>
<p><b>She</b>-Ms Hawthorne reported that she cannot remember the last time the strings were located. We tried removing her IUD but the procedure was unsuccessful after 15 minutes. However, we have no idea if her IUD is shifted or fallen out. Consequently, pregnancy test was done and confirmed negative.</p>	<p><b>Always re-state the Patient for new paragraphs</b></p> <p><b>'It is unclear if her IUD has shifted or fallen out'</b></p> <p><b>The connector 'consequently' is not appropriate- it suggests relationship between pregnancy test result and location of IUD.</b></p>
<p><b>In</b> today's visit, Ms Hawthorne's IUD removal was unsuccessful <b>due to her strings, which were unable to be located</b>. Please note that a pregnancy test was performed, which <b>was negative. resulted negativ.</b></p>	<p><b>due to an inability to locate her strings.</b></p>
<p>On 06.04.2019 , <b>Ms Hawthorne</b> underwent an unsuccessful IUD removal . The procedure <b>has been</b> was attempted for 15 minutes , the strings could not be found , as well as she could not recall the last time strings were located.</p>	<p><b>Listing problem: Look at 'as well as' or 'addition' in the SET videos!</b></p>

<p>Today, Mrs Hawthorne’s IUD removal was unsuccessful and <del>she</del> could not locate the strings. Additionally, she cannot recall when the strings were last located, <del>probably</del>. <del>It is possible it has shifted or fallen out</del> <del>and</del>. <del>Please note</del>, her pregnancy test result is negative.</p>	
<p>On 02.04.19, Mrs Hawthorne presented with <del>menstrual spotting for 3 months</del> a 3-month history of <del>experiencing</del> menorrhagia and dysmenorrhea, as well as increasing hairiness and greasiness of her skin. <del>Canestan has been taken in last year. Following the prescribed</del> Attempted removal of IUD , on 06.04.2019 , <del>attempted to remove IUD in 15 minutes.</del> <del>Unfortunately, it</del> was unsuccessful and <del>her</del> pregnancy test was negative.</p>	



## Background & Request

Background (social / medical)	<p><b>Social background:</b>          Married; <del>2 sons (7 and 5 y.o.)</del>  <u>Active lifestyle: yoga teacher (9 years); swims 3x/week</u> &gt; Sum.?  <u>Non-smoker; social drinker; vegan diet</u></p> <p><b>Family history:</b> <del>Father - Parkinson's disease</del></p> <p><b>Medical history:</b> G3P2 (3 pregnancies, 2 live children) ✓  <del>2007: Proximal DVT - R leg (20 y.o.) while long hours in stressful office job (lots of air travel)</del>          2008: Iron deficiency anaemia ✓  <del>2000: Menorrhagia &amp; dysmenorrhea diagnosed</del>          2012: Third degree perineal tear &gt; Sum.?          2014: Elective C-section</p> <p><b>Medications:</b> <del>Warfarin (ceased 2008)</del>          Ferrous sulphate 200 mg/day mane ✓</p>
Request	Further investigation and ultrasound

Student	Teacher
<p>Socially, Ms Hawthorne is married and has an active life style along with social drinking. Additionally, she has had 3 pregnancies and 2 live children with a third degree perineal tear and an elective C-section. She has had iron deficiency anaemia since 2008 which is being managed with ferrous sulphate 200mg per day.</p> <p>Please provide Ms Hawthorne with further investigation and an ultrasound due to unsuccessful removal of her IUD.</p> <p>Thank you,</p>	<p>Ms Hawthorne is married, has an active lifestyle and is a non-smoker and social drinker. Please note she is G3P2, with a history of third degree perineal tear and elective C-section. She has iron deficiency anaemia, which is being managed with ferrous sulphate.</p>
<p>Ms Hawthorne is married, used to have an active lifestyle as she taught yoga for nine years. She also swims three times a week. She neither drinks nor smokes but eats plant based food. She had three pregnancies but two live children. In 2008, she was diagnosed with iron deficiency anaemia. She had third degree perineal tear in 2012 and elective cesarean section in 2014.</p> <p>In view of the above, it would be greatly appreciated if you could provide further care and an ultrasound.</p>	<p>Not accurate – she has an active lifestyle now!          Are these things useful for the obstetrician?</p>

<p>Yours sincerely, Nurse.</p>	
<p>In terms of her medical history, Ms Hawthorne has had three pregnancies. In addition, she had a third degree perineal tear in 2012 and an elective C-section in 2014. Socially, she is married and has an active lifestyle.</p> <p>In view of the above, it would be appreciated if you could provide Ms Hawthorne with further investigation and an ultrasound, in order to establish if her IUD has shifted or fallen out.</p>	
<p>Ms Hawthorne is G3P2. She also has iron deficiency anaemia, for which she takes ferrous sulphate. Socially, she has an active lifestyle, a social drinker and opted for a vegan diet.</p> <p>It would be appreciated if you could provide an ultrasound for Ms Hawthorne for further investigation.</p>	<p>Socially, she has an active lifestyle, is a social drinker and opted for a vegan diet.</p>
<p>Ms Hawthorne is married and has 2 live children. In 2012, she had a third degree perineal tear and in 2014 she underwent elective C-section. She has an active lifestyle, she is a non smoker, a social drinker and is on a vegan diet. Mr Hawthorne takes 200 ferrous sulphate mg/day every morning.</p> <p>It would be appreciated if you could provide further investigation and ultrasound.</p> <p>If you have any queries please do not hesitate to contact me.</p> <p>Yours sincerely Nurse</p>	<p>Ms Hawthorne</p> <p>A range of language/attention to detail issues</p>
<p>Regarding Ms Hawthorne 's background, she is a married woman with two children along with three pregnancies. Additionally, she is a non-smoker, a social drinker, and vegan. In 2009, she reported that she had been experiencing Iron deficiency anaemia and started Ferrous sulphate 200mg mane per day.</p> <p>In view of the above, it would be appreciated if you could provide Ms Hawthorne with further</p>	<p>G3P2 – prevent the language error with along with</p> <p>Do we need to ‘tell the story’ of the anaemia, or can we just say ‘She has anaemia, for which she takes ferrous sulphate’</p>

<p>investigation and an ultrasound to check her IUD. Please contact me if you have any further questions.</p> <p>Yours sincerely Nurse</p>	
<p><del>Socially,</del> Ms Hawthorne is married. Medically, she <del>had</del> has a history of three pregnancies and two live children. She was diagnosed with iron deficiency anaemia, for which she takes Ferrous Sulphate, <del>200 mg, daily, every morning</del>. In addition, she <del>has had</del> a history of third-degree perineal tear and elective C-section.</p> <p>In view of the above, it would be appreciated if you could provide further investigation and an ultrasound.</p> <p>If you require any further information, please do not hesitate to contact me.</p> <p>Yours sincerely, Nurse.</p>	<p>G3P2? – Isn't that easier?</p> <p>We didn't need to focus on diagnosis of anaemia but because we have, we need the date.</p>
<p>Ms Hawthorne is a non-smoker and married with 2 children, and she has an active lifestyle, as well as a vegan diet regimen. In total, she has history of 3 pregnancies, one of which was failed. And we were noticed by her about that, she has had a third degree perineal tear which was occurred during her first delivery in 2012 and therefore, she has undergone elective C-section for her second delivery in 2014. And please note, she is on ferrous sulphate 200mg per day for her iron deficiency anaemia which was diagnosed in 2008.</p> <p>At present, Ms Hawthorne is ready for your examination and she requires further investigation and an ultrasound. In so doing, it would be appreciated if you could provide these and best for her.</p> <p>Yours sincerely, Nurse Ada Lena Yolgidien</p>	<p>Ms Hawthorne is married and G3P2. She is a non-smoker, a social drinker and has an active lifestyle. In addition, she had a third degree perineal tear during her first delivery and therefore, she has underwent elective C-section for her second delivery. Please note, she is on ferrous sulphate for her iron deficiency anaemia.</p> <p>41 words which were unnecessary!</p> <p>under 180 – not enough content</p> <p>over 200 – probably not concise enough</p> <p>over 230 – too much content</p> <p>Purpose Content Organisation</p>

<p>In terms of her social background, Ms Hawthorne is married and she has a healthy life style, as well as not smoking. <b>Medically, only two of her children are alive, despite having three pregnancies.</b> She was diagnosed with a third-degree perineal tear and two years later she underwent an elective C-section in 2014. Please note that, she takes 200 mg Ferrous sulphate daily.</p> <p>Given the above, it would be appreciated if you could investigate and ultrasound the unsuccessful removal of her IUD.</p>	<p><b>G3P2 – would sound more appropriate here.</b></p> <p>Given the above, it would be appreciated if you could investigate <b>with</b> ultrasound <b>following</b> the unsuccessful removal of her IUD.</p>
<p>Regarding her background, Ms Hawthorne is married and has a healthy lifestyle. She has a history of 3 pregnancies with 2 children alive, and iron deficiency anemia, for which she takes Ferrous sulphate.</p> <p>In view of the above, it would be appreciated if you could provide further investigation and an ultrasound scan for Ms Hawthorne.</p> <p>Yours sincerely,</p> <p>Nurse.</p>	<p><b>G3P2 – more suitable</b></p> <p><b>‘with two successful pregnancies’ ?</b></p>
<p>In terms of background, Ms Hawthorne is married, has 2 children <del>in</del> <b>from</b> 3 pregnancies and has an active lifestyle. In 2008, she was diagnosed with iron deficiency anaemia, for which she is taking ferrous sulphate every morning. In 2012, she sustained third degree perineal tear during her first delivery. In addition, she underwent elective C-section for her second child in 2014.</p> <p>In light of the above, I would appreciate it if you could carry out further investigation and an ultrasound.</p> <p>Should you have any queries, please do not hesitate to contact me.</p> <p>Yours sincerely,</p> <p>Registered Nurse</p>	<p><b>Are these dates really necessary for the reader to do an ultrasound?</b></p>