

OET Nursing Writing Week

Lisa Simmonds

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

180 – 200 Guideline word count

Planning

10 - 15 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

Identifying Purpose & Choosing Case Notes:

Ask yourself these questions about Lisa Simmonds case notes:

1. Who is the reader?	Charge nurse – gastroenterology
2. What is the reader's task?	prepare patient for urgent cholecystectomy
3. Does the reader know the patient?	no
4. Does the writer have any tasks?	no
5. Why am I writing <u>today</u> ?	diagnosis – yesterday and treatment decided
6. Is it urgent?	yes

<https://www.dropbox.com/scl/fi/ryop6if1srapugri9py8n/Lisa-Simmonds.pdf?rlkey=k9xt62tsj2eroplq7xci5tk0&dl=0>

Test 5

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 22 May 2017.

You are a nurse in a hospital emergency department where you have been looking after a female patient.

PATIENT DETAILS:

Name: Lisa Simmonds (Ms)
DOB: 2 January 1987 (30 y.o.)
Address: 23 Brighton Avenue, Cookstown

Social background: Fashion designer
Lives alone in 2-bedroom flat
Parents – overseas, no siblings
Generally sedentary – ‘hates’ exercise
Diet: processed, ready-to-eat meals
Interests: watching movies, baking

Past medical history: Atopic dermatitis (3–6 y.o.)
R arm fracture (12 y.o.)
No smoking or alcohol consumption
No hypertension/allergies
BMI 29 (borderline obese) – unsuccessful ‘fad’ diets 2016

Emergency Dept (ED) Admission: 21 May 2017

Presenting factors:

Subjective Acute abdominal pain in RUQ (7/10)
Regular acid reflux, nausea & vomiting 1 wk
Fever
Diaphoresis

Objective BP: 145/90 mmHg (elevated), P: 97 beats/min (elevated), T: 37.8°C (elevated), RR: 18 breaths/min (normal), oxygen saturation (SaO₂): 96% (normal)
Pt. worried, pain intense → protective behaviour (guarding)

Tests: Murphy's sign (positive)
Ultrasound = clinical ascending cholangitis, dilated CBD 6 mm, pericholecystic fluid
LFTs (liver function tests): elevated alkaline phosphatase (ALP), gamma-glutamyl transferase (GGT) & serum bilirubin (6 mg/dL)

Urinalysis: normal
CRP (C-reactive protein): elevated (infection present)
Full blood count: elevated WBCs (13,000 μ L)

Diagnosis: Acute cholecystitis (→ laparoscopic cholecystectomy)

Nursing treatment record:

21 May 2017: Analgesia: diclofenac 75 mg IM (2x/day)
Anti-emetic: stemetil 12.5 mg IM (2x/day)
IV: fluids for hydration, cefuroxime 750 mg 3x/day, metronidazole 500 mg 3x/day (antibiotics)
NBM (nil by mouth)
Catheter inserted – monitor urine output: 15 ml/hr (low)

Pt. stabilised – ↓pain (3/10)

22 May 2017: Continued analgesia, anti-emetic
Continued IV: fluids, cefuroxime 750 mg 3x/day metronidazole 500mg 3x/day
BP: 119/80 mmHg (normal), P: 92 beats/min (normal), T: 37.4°C (low-grade fever), RR: 14 breaths/min (normal), oxygen saturation (SaO₂): 96% (normal)
WBC: 12,500 μ L (elevated)
Pt. stable, comfortable, slight nausea, no vomiting
Urine output: 50 ml/hr (satisfactory)

Pain controlled (1/10)

Action: Transfer to gastroenterology department:

- prepare for urgent laparoscopic cholecystectomy (scheduled 24 May)
- continue IV: fluids, cefuroxime, metronidazole
- review analgesia (following 2-day diclofenac dose)
- continue NBM → surgery

Plan: Write to gastroenterology nurse

Writing Task:

Using the information in the case notes, write a letter to Ms Brown, the charge nurse of the gastroenterology department, summarising the patient's case and the treatment already provided, and outlining the pre-operative treatment required. Address your letter to Ms Zara Brown, Charge Nurse, Gastroenterology Department, Cookstown Hospital, Cookstown.

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.

Letter Plan

Introduction	<ul style="list-style-type: none"> • Patient name: Lisa Simmonds • General medical context/status: Acute cholecystitis • General request: Pre-op preparation – cholecystectomy • Urgent request
Timeline	<p>Admission</p> <p>✓ <u>Acute abdominal pain in RUQ (7/10)</u> ✓ <u>Regular acid reflux, nausea & vomiting 1 wk</u> Fever Diaphoresis</p> <p>BP: 145/90 mmHg (elevated), P: 97 beats/min (elevated), T: 37.8°C (elevated), RR: 18 breaths/min (normal), oxygen saturation (SaO₂): 96% (normal) sum Pt. worried, pain intense → protective behaviour (<u>guarding</u>)</p> <p>Murphy's sign (positive) ✓</p> <p>Ultrasound = clinical ascending cholangitis, dilated CBD 6 mm, pericholecystic fluid LFTs (liver function tests): elevated alkaline phosphatase (ALP), gamma-glutamyl transferase (GGT) & serum bilirubin (6 mg/dL) sum</p> <p>Urinalysis: normal <u>CRP</u> (C-reactive protein): elevated (infection present) Full blood count: elevated WBCs (13,000 µL)</p> <p><u>Acute cholecystitis (→ laparoscopic cholecystectomy)</u></p> <p>Treatment</p> <div style="border: 2px solid blue; padding: 20px; text-align: center; margin: 20px 0;"> <p style="color: red; font-weight: bold; font-size: 1.2em;">Homework!</p> </div>
Background	

Request	<p>Transfer to gastroenterology department:</p> <ul style="list-style-type: none">• prepare for urgent laparoscopic cholecystectomy (scheduled 24 May)• continue IV: fluids, cefuroxime, metronidazole• review analgesia (following 2-day diclofenac dose)• continue NBM → surgery
---------	---

Homework: Write introduction (& consider the level of detail necessary for Nursing Management) : send to paul@set-english.com