

OET Nursing Writing Week

Alison Greene

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

This entails including all of the **information/case notes** necessary to do **this task**.

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 Alison Greene case notes:

1. Who is the reader?	Head of Community Nursing, Newtown
2. What is the reader's task?	take over existing care plan while away in Newtown
3. Does the reader know the patient?	no
4. Does the writer have any tasks?	no
5. Why am I writing <u>today</u> ?	Ms Greene will visit soon
6. Is it urgent?	no



Notes:

Assume that today's date is 3 September 2019.

You are a community nurse looking after an elderly patient who is receiving home palliative care.

PATIENT DETAILS:

 Name:
 Alison Greene (Mrs)

 DOB:
 12 October 1951 (67 y.o.)

 Address:
 28 Park Road, Oldtown

Social background: Retired teacher

Widowed 2017

1 daughter (w 2-wk-old infant), 50 kms away (Newtown)

Interests: music, reading

Past medical history: January 2010: diabetes mellitus type 2 (Metformin)

January 2017: invasive ductal carcinoma diag. \rightarrow R lumpectomy & lymphadenectomy w

chemotherapy (successful)

December 2017: poorly controlled diabetes \rightarrow insulin therapy (Lantus) w Metformin April 2018: metastatic spread to brain \rightarrow radiotherapy (successful symptom control)

March-August 2019: bone metastases \rightarrow chemotherapy (unsuccessful)

August 2019: pt. declines further chemo → home palliative care & DNR (do not resuscitate)

order (pt. & daughter agreed)

Current Medication: Lantus (insulin) - 12 units/day

Metformin - 500 mg 3x/day

Morphine sulphate - 15 mg over 24 hrs, dilutant water for injection 18ml

Dulcolax - 5 mg 1x/day bedtime

Oramorph (oral morphine) - 2.5 mg p.r.n (breakthrough pain)

Presenting factors: T4 metastatic breast cancer (bones, brain)

Sub-cutaneous morphine infusion (pain control) required \rightarrow priming of syringe driver w

morphine 1x/day

Nurse to monitor glucose levels (August 2019: HbA1c 8.1%)

Community nurse appointment record (palliative home care)

1 September 2019

- Prepared upper L arm w butterfly needle & transparent dressing → primed syringe driver (McKinley T34 pump) w 20ml syringe: morphine sulphate 15 mg at 4pm (0.64ml/hr)
- Blood sugar: pre-breakfast = 8 mmol, post-lunch = 11 mmol
- Insulin (self-administered): 12 units/day
- Symptoms under control

2 September 2019

- · Morphine sulphate & insulin as above
- Blood sugar: pre-breakfast = 8.1 mmol, post-lunch = 11.2 mmol



3 September 2019

- · Morphine sulphate & insulin as above
- Blood sugar: pre-breakfast = 8.2 mmol, post-lunch = 11.3 mmol

Discussion:

Pt visiting daughter 5-7 September (departure: 7 am, return home: 7 pm)

Refer to Newtown community nurse:

- Replenish syringe driver (1x/day) pain relief (McKinley T34 pump, in-situ butterfly needle no changing required)
- Monitor glucose levels (1x/day)
- Liaise w Newtown hospice if unfamiliar w McKinley pump/for advice on breakthrough pain/ongoing management

Plan: Write to Newtown community nurse

Writing Task:

Using the information in the case notes, write a referral letter to Ms Simons, Head of the Community Nursing Service in Newtown, outlining Mrs Greene's relevant medical history and her care needs while away from home. Address the letter to Ms Joanna Simons, Head of the Community Nursing Service, 87 Amwell Road, Newtown.

https://www.dropbox.com/scl/fi/lpb6kg0kvxjr1ecw9rnmf/Test-2-Nursing-Writing-Alison-Greene.pdf?rlkey=vdk9q4y0dncptn3x51m81359t&dl=0



Letter Plan

Introduction	Patient name:	
	General medical context:	
	General Request:	
Background	Organise cancer and diabetes (If separate paragraphs required, no problem):	
Current	Past medical history: January 2010: diabetes mellitus type 2 (Metformin) January 2017: invasive ductal carcinoma diag. → R lumpectomy & lymphadenectomy w chemotherapy (successful) — Desember 2017: poorly controlled diabetes → insulin therapy (Lantus) w Metformin April 2018: metastatic spread to brain → radiotherapy (successful symptom control) ✓ March-August 2019: bone metastases → chemotherapy (unsuccessful) ✓ August 2019: pt. declines further chemo → home palliative care & DNR (do not resuscitate) order (pt. & daughter agreed) — Nurse to monitor glucose levels (August 2019: HbA1c 8.1%) Current Medication: Lantus (insulin) – 12 units/day Metformin – 500 mg 3x/day Metformin – 500 mg 3x/day Morphine sulphate – 15 mg over 24 hrs, dilutant water for injection 18ml Dulcolax – 5 mg 1x/day bedtime Oramorph (oral morphine) – 2.5 mg p.r.n (breakthrough pain) Current management includes — pain management & blood sugar monitoring:	
	 Community nurse appointment record (palliative home care) 1 September 2019 Prepared upper L arm w butterfly needle & transparent dressing → primed syringe driver (McKinley T34 pump) w 20ml syringe: morphine sulphate 15 mg at 4pm (0.64ml/hr) Blood sugar: pre-breakfast = 8mmol, post-lunch = 11 mmol Insulin (self-administered): 12 units/day Symptoms under control Use of present tense – describe what happens – not what happened 	
Request	Discussion: Pt visiting daughter 5-7 September (departure: 7 am, return home: 7 pm) Refer to Newtown community nurse: Replenish syringe driver (1x/day) pain relief (McKinley T34 pump, in-situ butterfly needle – no changing required) Monitor glucose levels (1x/day) Liaise w Newtown hospice if unfamiliar w McKinley pump/for advice on breakthrough pain/ongoing management	

Homework: Think about your plan & Write introduction and send to paul@set-english.com

