

## OET Nursing Writing Week

Carl Brown

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

### Planning

10 - 15 minutes:

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

What is the situation after the above steps?

*You're in a perfect position to do your best writing.*

### General Paragraph Purposes

|                      |   |
|----------------------|---|
| Introduction         | <b>Patient name:</b><br><b>General Medical Context:</b><br><b>General Request:</b>  |
| Timeline 1           | Beginning of this medical context up to the present   |
| Timeline 2           | Current situation   |
| Background – medical | Medical information that is not directly related to this context: <ul style="list-style-type: none"> <li>• family history</li> <li>• current medications</li> <li>• current illnesses</li> <li>• weight / height</li> </ul> |
| Background – social  | Lifestyle <ul style="list-style-type: none"> <li>• diet / smoke / drink</li> <li>• living arrangements</li> <li>• relationships</li> <li>• job</li> </ul>   |
| Request              | Expand the general request – provide details of tasks   |

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### Identifying Purpose & Choosing Case Notes:

Ask yourself these questions about Carl Brown case notes:

|                                      |                                       |
|--------------------------------------|---------------------------------------|
| 1. Who is the reader?                | Occupational Therapist                |
| 2. What is the reader's task?        | Workplace assessment                  |
| 3. Does the reader know the patient? | No                                    |
| 4. Does the writer have any tasks?   | No                                    |
| 5. Why am I writing <u>today</u> ?   | Pt improved – wants to return to work |
| 6. Is it urgent?                     | No                                    |

## Test 3 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 25 January 2020

You are a nurse in a family medical practice and you see a patient about his back pain.

#### PATIENT DETAILS:

**Name:** Carl Brown (Mr)

**DOB:** 31 October 1977 (43 y.o.)

**Address:** 32 Green Avenue, Oldtown

**Social background:** Self-employed graphic designer, works mainly from home (8 hrs/day on computer)  
Divorced (2019), joint custody of daughter (7 y.o.)  
Lives alone – 2-bedroom house w home office  
Interests: reading, TV sports

**Family history:** Father: 75 y.o. – degenerative spondylosis  
Mother: 72 y.o. – osteopenia

**Past medical history:** 1983: Nasal fracture (bicycle accident)  
1985: Chickenpox  
1993: Fractured L arm (motorcycle accident)  
2015: L4/L5 disc herniation (lifting weights) – successful treatment w NSAIDs, physiotherapy  
Allergies: none

#### Treatment record

Appt. with family doctor: 15 January 2020

#### Presenting complaint:

##### Subjective:

Lower back pain 2–3 wks (pain = 4/10)

##### Objective:

Localised pain w spasms, tenderness  
Poor posture – forward head tilt evident

**Diagnosis:** Grade 2 muscle sprain lower back (no nerve root compromise)  
?aggravated by prolonged sitting (3-hr continuous blocks) & poor posture

**Treatment:** Ibuprofen 400 mg 3×/day  
Omeprazole 20 mg 1×/day (4 wks)  
No sitting at desk > 3 hrs/day (6 wks)  
Regular planned breaks advised (1×/60–90 mins)  
Physiotherapy 1×/wk (4 wks) - prescribed exercises 2×/day  
Follow-up w practice nurse (25 January)  
Pt. requests workplace assessment - nurse to arrange w OT

**Appt w practice nurse: 25 January 2020**

Subjective:

Physio 'helping' (pain = 2/10)

Some non-compliance w medication & postural advice (works at desk total 4–5 hrs/day, 'I often forget about breaks and taking the tablets')

Anxious to resume pre-injury routine (important project deadline mid-Feb)

Objective:

BP 123/80, PR: 86/min, Temp: 37°C (normal)

No spasms, tenderness

Discussion w pt:

Continue physio

OT referral (pt consent given):

- workplace assessment (?unsuitable seating: Pt reports using immovable folding wooden chair → ?replace w height-adjustable ergonomic chair plus wristrest & footrest)
- assess requirement for lumbar support
- graded return-to-work plan
- check compliance w advice re prolonged sitting (still working >3 hrs without breaks)
- advise correct sitting position/posture

**Plan:** Write to OT

**Writing Task:**

Using the information in the case notes, write a letter of referral to Mr Sanders, the Occupational Therapist, outlining your concerns about the patient, requesting a workplace assessment and summarising your suggestions. Address the letter to Mr John Sanders, Occupational Therapist, Oldtown Clinic, 34 Newbury Street, Oldtown.

**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"> <li>• <b>Patient name:</b> Carl Brown</li> <li>• <b>General medical context:</b> recovering from a grade 2 muscle sprain in his lower back</li> <li>• <b>General request:</b> workplace assessment</li> </ul>  |
| Background               | <p><b>Social background:</b> <del>Self-employed</del> graphic designer, works mainly from home (8 hrs/day on computer) ✓<br/> <del>Divorced (2019), joint custody of daughter (7 y.o.)</del><br/> Lives alone – <del>2-bedroom house w home office</del><br/> Interests: <del>reading, TV sports</del></p> <p><b>Family history:</b> Father: <del>75 y.o.</del> – degenerative spondylosis ✓<br/> Mother: <del>72 y.o.</del> – osteopenia</p> <p><b>Past medical history:</b> <del>1983: Nasal fracture (bicycle accident)</del><br/> <del>1985: Chickenpox</del><br/> <del>1990: Fractured L arm (motorcycle accident)</del><br/> 2015: L4/L5 disc herniation (lifting weights) – successful treatment w NSAIDs, physiotherapy ✓<br/> Allergies: <del>none</del></p>   |
| 15 <sup>th</sup> January | <p><b>Presentation &amp; treatment:</b></p> <p><b>Treatment record</b><br/> <b>Appt. with family doctor: 15 January 2020</b></p> <p><b>Presenting complaint:</b></p> <p><u>Subjective:</u><br/> Lower back pain 2–3 wks (pain = 4/10) ✓</p> <p><u>Objective:</u><br/> Localised pain w spasms, tenderness ✓<br/> Poor posture – forward head tilt evident ✓</p> <p><b>Diagnosis:</b> Grade 2 muscle sprain lower back (no nerve root compromise) ✓<br/> ?aggravated by prolonged sitting (3-hr continuous blocks) &amp; poor posture ✓</p> <p><b>Treatment:</b> ✓ <del>Ibuprofen 400 mg 3x/day</del><br/> ✓ <del>Omeprazole 20 mg 1x/day (4 wks)</del><br/> ✓ <del>No sitting at desk &gt; 3 hrs/day (6 wks)</del><br/> ✓ <del>Regular planned breaks advised (1x/60–90 mins)</del><br/> ✓ <del>Physiotherapy 1x/wk (4 wks) - prescribed exercises 2x/day</del><br/> <del>Follow up w practice nurse (25 January)</del></p> <p><i>request</i> ← Pt. requests workplace assessment - nurse to arrange w OT</p> |
| 25 <sup>th</sup> January | <p><b>Current condition:</b></p>  |

|         |   |
|---------|---|
|         | <p><b>Appt w practice nurse: 25 January 2020</b></p> <p><u>Subjective:</u><br/>         Physio 'helping' (pain = 2/10) ✓<br/> <i>Summarise</i> ← Some non-compliance w medication &amp; postural advice (works at desk total 4-5 hrs/day, 'I often forget about breaks and taking the tablets')<br/> <i>request</i> ← Anxious to resume pre-injury routine (important project deadline mid-Feb)</p> <p><u>Objective:</u><br/> <del>BP 123/86, PR: 86/min, Temp: 37°C (normal)</del><br/>         ✓ No spasms, tenderness</p> <p><u>Discussion w pt:</u><br/> <i>request</i> ← Continue physio</p> |
| Request | <p><b>OT referral plan:</b></p> <p>OT referral (pt consent given):</p> <ul style="list-style-type: none"> <li>workplace assessment ✓ (<del>?unsuitable seating: Pt reports using immovable folding wooden chair → ?replace w height-adjustable ergonomic chair plus wristrest &amp; footrest</del> ✓)</li> <li>assess requirement for lumbar support ✓</li> <li>graded return-to-work plan ✓</li> <li>check compliance w advice re prolonged sitting (<del>still working → 3 hrs without breaks</del>)</li> <li>advise correct sitting position/posture ✓</li> </ul>                              |

**Homework:** Write 15<sup>th</sup> January paragraph: send to [paul@set-english.com](mailto:paul@set-english.com)

## Introductions

- We focus on past events
- We include information from other paragraphs – too much detail
- We forget the purpose
- We get the purpose wrong

| Student   | Teacher  |
|---|--|
| <p>25th January 2020</p> <p>Mr John Sanders<br/>Occupational Therapist<br/>Oldtown Clinic<br/>34 Newbury Street<br/>Oldtown</p> <p>Dear Mr Sanders,</p> <p>Re: Mr Carl Brown, DOB: aged 43</p> <p>I am writing regarding Mr Brown, who is recovering from back pain. He is ready to go back <b>to</b> work and now requires your assessment.</p>  | <p>be more specific – give the diagnosis</p> <p>Clear purpose</p>  |
| <p>I am writing regarding Mr Carl Brown, who has been recovering from a muscle sprain in his lower back. He is being referred for a workplace assessment.</p>   | <p>It's ok to put the full name 'Carl Brown' in the introduction – <u>but not in other paragraphs.</u></p>   |
| <p>Oldtown Clinic<br/>34 Newbury Street<br/>Oldtown</p> <p>25 January 2020</p> <p>Dear Mr John Sanders<br/>RE: Mr Carl Brown                      Age: 43</p> <p>I am writing regarding <del>Mr John Sanders</del> <b>Mr Carl Brown</b>, who presented to a family medical practice with a muscle sprain in the lower back. He <del>is being referred to you and</del> requires a workplace assessment.</p> | <p>Writing to John Sanders – not about!<br/>Why focus on presentation – talk about the situation now<br/>he is being referred to you - redundant</p> |

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| <p>I am writing to refer Mr. Carl Brown who is 43-year-old self-employed graphic designer, for a workplace assessment and further advice regarding his lower back pain. Mr. Brown has been experiencing localized lower back pain, with associated spasms and tenderness, for the past 2-3 weeks. His pain is rated at 2/10 after physiotherapy, he remains anxious to resume his routine due to work deadlines.</p> | <p><b>Too much information about the patient and the situation.</b></p> <p><b>Concise - just the general information</b></p> |
| <p>25th January 2020<br/>Mr John Sanders,<br/>Occupational Therapist<br/>Oldtown Clinic<br/>34 Newbury Street<br/>Oldtown</p> <p>Re: Mr Carl Brown, aged 43</p> <p>Dear Mr-<del>Brown</del> Sanders,</p> <p>I am writing regarding Mr Carl Brown, who presented to our clinic for an appointment. He is <b>being</b> referred to you for a workplace assessment.</p>   | <p><b>What's the medical context?</b></p> <p><b>He requires – much simpler than 'he is being referred...'</b></p>            |
| <p>I am writing to refer Mr Brown, who is diagnosed with a grade 2 muscle sprain in his lower back and now needs your workplace assessment and grade return to work plan</p>   | <p><b>who has been diagnosed with</b></p> <p><b>who is recovering from</b></p>   |
| <p>25th January 2020</p> <p>Mr John Sanders<br/>Occupational Therapist<br/>Oldtown Clinic<br/>34 Newbury Street<br/>Oldtown</p> <p>Re: Mr Carl Brown, aged 43</p>  |  |



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| <p>Dear Mr Sanders,</p> <p>I am writing to refer Mr Brown, who is recuperating from a muscle sprain in his lower back. He is returning to work, and now requires your support and assessment of his workplace.</p>   |   |
| <p>25th January 2020</p> <p>Mr John Sanders<br/>Oldtown Clinic<br/>34 Newbury Street<br/>Oldtown</p> <p>Dear Mr John Sanders</p> <p>Re: Mr Carl Brown, DOB: 31st October 1977</p> <p>I am writing regarding Mr Brown, who was admitted to our clinic due to a grade 2 muscle sprain in his lower back following back pain. He now requires your further care and assessment.</p>                         | <p>wasn't admitted<br/>didn't have the diagnosis upon presentation</p>  |
| <p>Mr John Sanders<br/>Occupational Therapist<br/>Old Town Clinic<br/>34 Newbury Street<br/>Old Town</p> <p>25th January 2020</p> <p>Re: Mr Carl Brown, aged 43</p> <p>Dear Mr Sanders,</p> <p>I am writing regarding Mr Carl Brown, who was recently admitted to our hospital with a Grade 2 muscle sprain and lower back pain. He is being referred back to you for continued care and evaluation.</p> | <ol style="list-style-type: none"> <li>1) he wasn't in a hospital!</li> <li>2) he wasn't with the OT before the problem – he isn't returning to somebody's care</li> <li>3) Purpose is not specific enough</li> </ol> |
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|---|---|
| <p>Mr John Sanders<br/>Occupational Therapist<br/>Oldtown Clinic<br/>34 Newbury Street<br/>Oldtown</p> <p>25/01/2020</p> <p>Re: Mr. Carl Brown, aged 43</p> <p>Dear Mr John Sanders,</p> <p>I am writing to refer Mr Carl Brown, who visited our <del>clinic hospital</del> due to a muscle sprain <del>in his at the</del> lower back. He now requires a work place assessment and your further support.</p> |   |
| <p>Mr Joh<del>a</del>n sSanders<br/>Occupational Therapist<br/>Old town clinic<br/>34 Newbury street<br/>Old town</p> <p>Re: Mr Car<del>e</del>l Brown, DOB: 31 October 1977</p> <p>Dear Mr Sanders,</p> <p>I am writing to refer Mr Brown, who visited our clinic for a follow - up due to a grade 2 muscle sprain in his lower back . He is currently stable and has requested a workplace assessment.</p>  | <p>Does this really tell the story? Better to say 'is recovering from...'</p> |
| <p>25th January 2020</p> <p>Mr John Sanders<br/>Occupational Therapist<br/>Oldtown Clinic<br/>24 Newbury Street<br/>Oldtown</p> <p>Re: Mr Carl Brown , DOB: 31st October 1977</p> <p>Dear Mr Sanders,</p>   |   |

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| <p>I am writing regarding Mr Brown , who reported to our hospital for review due to Grade 2 muscle sprain . He is being referred to you for further workplace assessment and support.</p>  | <p>no hospital! Better to say 'is recovering from..'</p>  |
| <p>25thJanuary 2020</p> <p>Mr Sanders<br/>Occupation Therapist<br/>Old town clinic<br/>34 Newbury street,Old town</p> <p>I am writing regarding Mr Brown who visited our family medical practice with a complaint of lower back pain since 2-3 weeks. He is now scheduled to be referred to you for ongoing care and support.</p>  | <p>'has been experiencing lower back pain for 2-3 weeks'?</p> <p>I think it's better to put in the correct diagnosis, instead of a paraphrase</p>                               |
| <p>25th January 2020</p> <p>Mr John Sanders<br/>Occupational Therapist<br/>Oldtown Clinic<br/>34 Newbury Street<br/>Oldtown</p> <p>Re: Mr Carl Brown, aged 43</p> <p>Dear Mr Sanders,</p> <p>I am writing regarding Mr Brown, who visited our family medical practice due to a Grade 2 muscle sprain lower back. He is scheduled to be refer to you for requesting workplace assessment and further support.</p> | <p>Why discuss where he visited in the introduction? Leave that for the timeline paragraph – intro is a brief summary of the situation, not a description of what happened.</p> |
| <p>25th January 2020<br/>Mr John Sanders<br/>Occupational Therapist<br/>Oldtown Clinic<br/>34 Newbury Street<br/>Oldtown</p> <p>Re: Mr Carl Brown, 43 years old</p>  | <p>The anxiety bit probably doesn't need to be included here but it's very well written!</p>  |

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| <p>Dear Mr Sanders,</p> <p>I am writing regarding Mr Brown, who has been diagnosed with a grade 2 lower back muscle sprain. Due to his anxiety about resuming his pre-injury routine, he requires your assessment <del>at</del> of his workplace.</p> | <p>Also, it is easier to say 'a workplace assessment'</p>  |
| <p>I am writing regarding Mr Brown, who is receiving medication and physiotherapy for back pain. He is going to be returning to work and requires a workplace assessment</p>  | <p>a grade 2 lower back sprain – be more helpful to the reader</p>                                 |
| <p>I am writing with regards to Mr <del>care</del> Brown, who was recently assessed on our ward for back pain. He <del>requires your urgent attention to conduct</del> a work place assessment, and your support.</p>                                 | <p>No ward mentioned.<br/>Just give diagnosis?<br/>Additionally, this is not an urgent letter.</p> |

## Background

**Social background:** ~~Self-employed~~ graphic designer, works mainly from home (8 hrs/day on computer) ✓  
~~Divorced (2019), joint custody of daughter (7 y.o.)~~  
 Lives alone – 2-bedroom house w home office  
 Interests: ~~reading, TV sports~~

**Family history:** Father: ~~75 y.o.~~ – degenerative spondylosis ✓  
 Mother: ~~72 y.o.~~ – osteopenia

**Past medical history:** ~~1983: Nasal fracture (bicycle accident)~~  
~~1985: Chickenpox~~  
~~1993: Fractured L arm (motorcycle accident)~~  
 2015: L4/L5 disc herniation (lifting weights) – successful treatment w NSAIDs, physiotherapy ✓  
~~Allergies: none~~

| Student   | Teacher   |
|---|---|
| <p>Socially, Mr Brown is a Self employee, who works as a graphic designer at home 8 hours per day on the computer.<br/>           Additionally, he has a family history of degenerative spondylosis</p> <p>Regarding his medical background , in 2015 Mr Brown presented with L4 and L5 disc herniation due to lifting weights, for which treatment with NSAIDS and physiotherapy were performed.</p> | <p>Mr Brown is a self-employed graphic designer, who works at home 8 hours per day on the computer. In 2015 he experienced L4 and L5 disc herniation due to lifting weights, which was treated successfully. Additionally, he has a family history of degenerative spondylosis.</p> |
| <p>Mr Brown is a self-employed graphic designer and works at his home for <del>about</del> 8 hours daily. <i>He has a history of disc herniation</i> and his father <del>had a</del> has degenerative spondylosis.</p>  | <p><i>This is a bit misleading – it seems like it is chronic/recurrent!</i></p>   |
| <p><del>He</del> Mr Brown is a graphic designer who works on the computer for around 8 hours each day. <del>His father suffers from degenerative spondylosis.</del><br/>           In 2015, he developed an L4/L5 disc herniation due to weight lifting, which was successfully treated with NSAIDs and physiotherapy. <del>His father suffers from degenerative spondylosis.</del></p>               | <p>Always start new paragraphs with the patient's name.</p> <p>Intra-paragraph Organisation: be more logical with the flow of information. Don't interrupt info about the patient with info about his father – put that at the end.</p>   |

|   |   |
|---|---|
| <p><del>Regarding Mr Brown, social background he</del><br/>Mr Brown-is a self-employed <del>work</del> graphic designer and primarily <del>doing</del> works from home, spending <del>around</del> 8 hours per day on his computer. <del>His family history reveals that his father has degenerative spondylosis and his mother has osteopenia.</del><br/>In terms of his medical history, in 2015, he was diagnosed with L4/L5 disc herniation which was successfully treated with medications and physiotherapy. <del>His family history reveals that His father has degenerative spondylosis. and his mother has osteopenia:</del></p> | <p>If you are going to use introductory phrases, get them right!</p> <p>Regarding Mr Brown’s social background,</p> <p>Don’t get simple information like jobs / ages / names wrong – just copy from the case notes!</p> <p>Intra-paragraph Organisation: be more logical with the flow of information. Don’t interrupt info about the patient with info about his father – put that at the end.</p> |
| <p>Mr Brown works as a graphic designer spending eight hours daily on his computer. In 2015, he experienced a L4/L5 disc herniation due to lifting weights, for which he was treated accordingly with good results.</p> <p>Regarding his family history, we were informed about his father, who was diagnosed with degenerative spondylosis.</p>  | <p>Be more concise: His father has degenerative spondylosis.</p>  |
| <p>Mr Brown is a self - employed graphic designer, who most of the time works from home, and <del>he</del> spends longer hours sitting whilst working on his computer and forgets to go for a break. In 2015, Mr Brown had a L4/L5 disc herniation as a result of weight lifting. <del>However</del>, this was successfully treated with Nsaids and physiotherapy. His father <del>has was diagnosed of</del> degenerative spondylosis. <del>and mother, osteopenia.</del></p>  | <p>Stick to the numbers – don’t describe them. Additionally, it’s better to put the breaks information in timeline.</p> <p>Don’t focus on diagnosis in background – just say he has spondylosis.</p>  |
| <p>In terms <del>on</del> of Mr Brown’s social and medical background, he works as a graphic designer from home and spends eight hours daily on his computer. In 2015, he had a disc herniation while lifting <del>weights and as a result of that</del> , for which he had a successful treatment with NSAIDs and physiotherapy. In his family history, his father has <del>d</del> degenerative spondylosis.</p>  | <p>Good content, good organisation. Small language &amp; conciseness issues.</p>  |

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| <p>As a graphic designer, Mr Brown spends eight hours a day working on his home computer. His medical history includes an L4/L5 herniation sustained while lifting weights in 2015, for which he was successfully treated with analgesics and physiotherapy. Regarding his family medical history, his father has degenerative spondylosis.</p>      | <p>Very well written! Zero errors, great writing.</p>  |
| <p>Mr. Brown is a graphic designer who works from home eight hours a day on his computer. He had an L4-L5 disc herniation due to lifting weights, which was successfully treated with NSAIDs and physiotherapy. In addition, <del>his family medical history includes degenerative spondylosis in</del> his father has degenerative spondylosis.</p> |  |
| <p>Mr Brown is a graphic designer ,who works <del>mainly</del> 8 hours on his computer during the day, <del>mainly</del> from his home. Regarding his medical history ,he had a disc herniation which was treated with NSAIDs and physiotherapy sessions <del>also</del>. Additionally, his father has <del>a</del> degenerative spondylosis.</p>    | <p>Good content and structure! Well done!</p>          |
| <p><del>In terms of his social and medical backgrounds,</del> Mr Brown is a graphic designer working from home on his computer for 8 hours daily. In 2015, Mr Brown had L4 and L5 disk herniation due to lifting weights. Additionally, there is a family history of degenerative spondylosis. <del>,as his father has the condition.</del></p>      |  |
| <p>Mr. Brown, works as a graphic designer, he spends 8 hours per day on a computer. In 2015, he was diagnosed with L4/L5 herniation which was attributed to lifting weights and was successfully treated. In addition, his father has <del>had a history of</del> degenerative spondylosis.</p>  | <p>which was attributed to – due to : more concise</p> |
| <p>In terms of Mr <del>Can</del> Brown's background information, he works as a designer, mainly from home, <del>for</del> 8 hours daily using a computer. Additionally, he has a history of L4 / L5 disc herniation, which was successfully treated with NSAIDS and</p>  |  |

physiotherapy. He also has a family history of degenerative spondylosis.