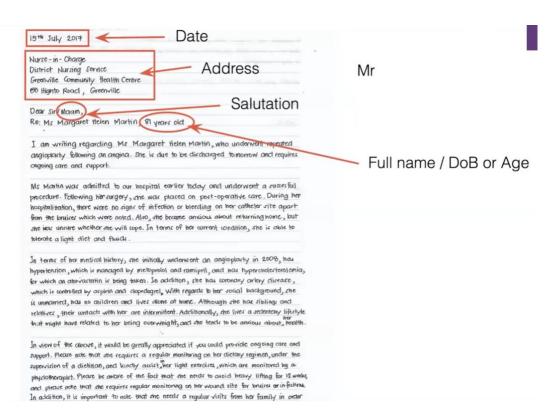
- 1 Layout
- 2 Timings
- 3 Stages of Planning

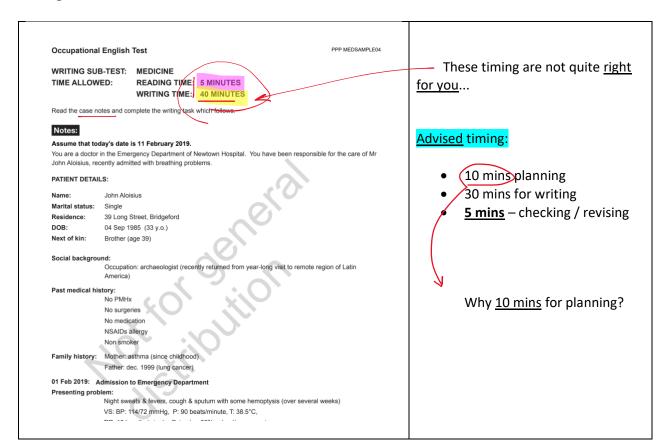
Assignment: Plan a letter



Yours sincerely,

Doctor

Timings



Rational / necessary



Logical Stages of planning

UNDERSTAND	CHOOSE	ORGANISATION
essential Ask <u>critical</u> questions: 1. Reader Task? 2. Writer? Task? 3. Reader knows patient?	I try to choose relevant case notes	Choosing paragraphs: Int Day Zore Harris - Chop Don't Javage from Day Core Harris - Chop Repair Band, Gened. Day Corested. Repair Band, Gened. Day Corested. Repair Mary Corested. Day Corested. Repair Mary Corested.
(No medical history and social history) 4. Is this urgent? (affects the paragraphs and your Introduction paragraph)	Content is appropriate to intended reader and addresses what is needed to continue care (key information is included; no important details missing); content from case notes is accurately represented Content is appropriate to intended marter and	I an uniting regarding Mrt. Mangaret fictor shorter, also underword reported analysis following an angula. But is det to be defined to wave and request following the result of the same shorter of the same s
5. Why are we writing today? (general situation)	Appropriate: useful, helpful, suitable, SOME IN THE LETTER (can be unclear) Needed: necessary, vital, essential, crucial ALL MUST BE IN LETTER (clear)	Easy was to begin SANDWICH

Band	Purpose	Band	Content	Conciseness & Clarity	Genre & Style	Organisation & Layout	Language
3	Purpose of document is immediately apparent and sufficiently expanded as required	7	Content is appropriate to intended reader and addresses what is needed to continue care (key information is included; no important details missing); content from case notes is accurately represented.	Langth of document is appropriate to case and reader (no irrelevant information in summarised effectively and presented clearly	Writing is clinicalifactual and appropriate to genre and reader (discipline and knowledge); technical language, abtraviations and polite language are used appropriately for document and recipient	clear, key information is highlighted and sub- sections are well organised; document is well taid out	Language features (spellingipunctuation/vocabulary/ grammantentence structure) are accurate and do not interfere with meaning
_		- 6		P	ecformance shares features		
2	Purpose of document is apparent but not sufficiently highlighted or expanded	5	Content is appropriate to intended reader and mostly addresses what is needed to continue care; content from case notes is generally accurately represented	Length of document is mostly appropriate to case and reader, information is mostly summarized effectively and presented clearly	Writing is clinical/factual and appropriate to geone and reader with occasional, minor inappropriacies; technical language, abbreviations and polite language are used appropriately with minor inconsistencies	Organisation and peragraphing are generally appropriate, logical and clear; occasional sposes of organisation in sub- sections and/or highlighting of key information; layout is generally good	Minor slips in language generally do not interfere with meaning
_		- 4			erformance shares features		
1	Purpose of document is not immediately apparent and may show very firnited expansion	3	Content is mostly appropriate to intended nader; some kny information (about case or to continue care) may be missing; there may be some inaccuracies in content	Inclusion of some irrelevant information distracts from overall clarity of document; attempt to summarise only partially successful	Writing is at times inappropriate to the document or target reader; over-reliance on technical language and abbreviations may distract reader	Organisation and paragraphing are not always logical, creating strain for the reader; key information may not be highlighted; layout is mostly appropriate with some lagses	Inaccuracies in languages, in particular in complex structures, cause minor strain for the reader bu- do not interfere with meaning
		2	Performance shares features of bands 1 and 3				
0	Purpose of document is partially obscured/unclear and/or misunderstood	1	Content does not provide intended reader sufficient information about the case and what is needed to continue care; key information is missing or inaccurate	Clarity of document is obscured by the inclusion of many unnecessary details: attempt to summarise not successful	The writing shoes inadequate understanding of the genne and target reader; mis- or over-use of technical language and abbreviations cause strain for the reader.	Organisation not logical, putting strain on the reader; or heavy reliance on case note structure; key information is not well highlighted and the layout may not be appropriate	traccuracies in language cause considerable strain for the reader an may interfere with meaning
		. 0			Performance below	Danif 1	

The leading English test for healthcare profession

OCCUPATIONAL ENGLISH TEST

WRITING SUB-TEST: MEDICINE

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

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

You are a general practitioner. Ms Sarah Day, 20 years old, has been attending your practice since her early childhood.

Patient: Ms Sarah Day, D.O.B. 29.07.1997

Past medical history: Jul 2001: varicella

Apr 2002: measles Jan 2004: fractured ulna Jun 2006: URTI Sep 2008: plantar warts Dec 2011: dysmenorrhoea Apr 2013: teenage acne

Aug 2014: pre-menstrual syndrome Jun 2015: exam-related anxiety Nov 2016: oro-facial herpes simplex virus

Social background:

University student – not happy with course of study Part-time job – McDonald's Irregular hours, 5-8 hrs sleep/night Smokes, dinks moderately Lives at home with parents, boylriend for 7 months

Medications: Oral contraceptive pill (prescribed April 2013) cyproterone acetate/ethinylestradiol – mane

06.12.17

Pt presented with mother complaining of unilateral headache – occipital, temporal extending to vertex, dizziness/loss of balance, with nausea and anviety. Visual disturbances. Better when lying down. Symptoms not affected by red wine, alcohol, chocolate, cheese, sunlight. Not related to menstrual cycle or stress.

x2 in past 2 weeks. Episodes: Pain: Steady, not throbbing.

Symptoms last 1-2 days (severe for several hours). No family history of headaches/migraines.

No abnormal neurological signs. Examination:

Eletriptan 40 mg – orally on attack. Ibuprofen 400 mg – 6 hrly (max t.d.s.).

31.01.18

Pt complained of drowliness and damhoes since commenced on eletriptan.

No improvement in symptoms. Anxiety worse – Pt describes as 'panic' accompanying symptoms. Mother concerned daughter becoming depressed withdrawn. Housebound, losing interest in usual activities & Boylfend, oversleeping, comfort eating ->> weight gain.

B.P. 12090

Amitriptyline 25 mg - b.d.

24.02.18

Pi presented sions. Complains of numbness and fingling jaraesthesial in fingers 4.6.5 left hand. No improvement in symptoms. Pi reported or acceler Am 2017. Not previously disclosed as wishes to keep from mother. Sustained "shiptish rippy". No treatment sought at time. Patient is to neutropice, to vinvestigation and management.

Writing Task:

Using the information in the case notes, write a letter of referral to Dr Robert Edwards, a neurologist. Outline Mis Day's relevant history and request further investigations and management. Address the letter to Dr Robert Edwards, Rushford Hospital, 765 Long Gully Road, Littletown.

Long Guly Road, Littletoen.

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.

Assignment:

Write a plan for this letter (do not write the letter)

Email alain@set-english.com

LINK: https://drive.google.com/file/d/1GS51wfXk-KYa1KQL4JwN8oj1ngCJmQj0/view?usp=sharing

Example

Introduction	Purpose: investigations and management
Timeline 1	Dshgdsajkgadskjh Jhdgkjsdgkjhvsd Ffdsjhsdjghs Jhdgjkhsdfgfjkshd Alain – should !?
Timeline 2	
Etc.	