

# **OET Medicine Writing Week**

**Beryl Smith** 

The task is: Write a letter to a healthcare professional requesting <u>continuation of care</u> for a patient.

180 - 200 words

5 minutes to read (no writing) 40 minutes to write

## Planning

### 10 - 15 minutes:

- Find the purpose
- Identify the information 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 Beryl Smith case notes:

1. Who is the reader?	Audiologist
2. What is the reader's task?	diagnosis
3. Does the reader know the patient?	no
4. Does the writer have any tasks?	recommendations / treatment
5. Why am I writing today?	We've seen the patient today – symptoms / effects have worsened up to today
6. Is it urgent?	No



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 18 September 2018.

You are a family doctor examining an 80-year-old female who has been registered at your practice for 40 years.

#### PATIENT DETAILS:

Name: Beryl Smith (Mrs)

**DOB:** 19 May 1938 (80 y.o.)

Address: Rose Aged Care Home, 29 Rose Avenue, Newtown (moved there 2018)

Social background: Retired librarian

Widow (husband died 2016)

3 daughters: Mary (lives abroad), Yana (died 2000, drowning), Susan (visits 1x/mth

Interests: lawn bowls, playing cards, reading

Note: support needed at external medical appts (Susan)

Family History: Mother died 65 y.o. (blood clot)

Father died 58 y.o. (alcoholic liver disease)

Past medical history: 2010 BCC (excision, no recurrence)

2014 hypertension (controlled w ACE inhibitors)

2016 L total hip replacement

2017 ?dementia - initial stage (forgetfulness, confusion)

No known allergies

18 Sept 2018: Pt accompanied by daughter

Presenting complaint: ringing in ears (bilateral), mild headache, pruritus R ear

Objective:

Height: 153 cm, Weight: 55 kg, BMI: 23.5 kg/m<sup>2</sup> (normal)

Bilateral otoscopy: normal tympanic membrane

Rinne & Weber tests (normal)

Ear examination:

Definitive diagnosis:

External configuration - R acute otitis externa (red, flaky, warm skin)

Provisional diagnosis:

?foreign bodies blocking R ear canal - ?cotton wool

?R otitis media (middle ear infection) - ?bacterial, ?fungal (request swab to confirm)

?bilateral hearing loss, ?tinnitus



#### Discussion:

Daughter – pt unable to hear questions/instructions if background noise (eg if radio on, in restaurants, when care home residents talk, etc.)

Pt – uses 'home remedies' (loud radio & cotton wool to block out ringing sound, honey for pruritus, moisturiser 2x/day for flaky skin)

Ceased social outings (cannot hear well outside)

Recommended: visual aids for use by care home staff (to communicate daily activities, instructions, etc)

<u>Treatment</u>: start antibiotic drops (potential otitis media to be confirmed by swab) & paracetamol 4x/day (headache)

Refer to audiologist for opinion & diagnosis w audiometry (pt consent given)

Plan: Write to audiologist

# Writing Task:

Using the information in the case notes, write a letter of referral to Dr Albury, audiologist, outlining the patient's symptoms, and requesting further investigation and management. Address the letter to Dr Danielle Albury, Audiologist, Newtown Hospital, 123 New Street, Newtown.

#### 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.

Link: https://drive.google.com/file/d/1cedbjht-T9WnI71wpeQEphSBz9gAM0ne/view?usp=sharing



Introduction		
meroduction	Patient name:	
	General medical context:	
	General medical context.      General purpose:	
	- General parpose.	
Presentation	18 Sept 2018: Pt accompanied by daughter	
1	Presenting complaint: ringing in ears (bilateral), mild headache, pruritus R ear	
Examination		
	Objective:	
	Height: 153 cm, Weight: 55 kg, BMI: 23.5 kg/m² (normal)	
	Bilateral otoscopy: normal tympanic membrane	
	Rinne & Weber tests (normal)  Ear examination:	
	Definitive diagnosis:	
	External configuration – R acute otitis externa (red, flaky, warm skin)	
	Provisional diagnosis:	
	?foreign bodies blocking R ear canal – ?cotton wool	
	?R otitis media (middle ear infection) – ?bacterial, ?fungal (request swab to confirm)	
	?bilateral hearing loss, ?tinnitus	
Discussion	Discussion:	
	Daughter – pt unable to hear questions/instructions if background noise (eg if radio on, in restaurants, when care home residents talk, etc.)	
	Pt – uses 'home remedies' (loud radio & cotton wool to block out ringing sound, honey for pruritus, moisturiser 2x/day for flaky skin)	
	Ceased social outings (cannot hear well outside)	
Background	Social background: Retired librarian	
	Widow (husband died 2016)	
	3 daughters: Mary (lives abroad), Yana (died 2000, drowning), Susan (visits 1x/mth	
	Interests: lawn bowls, playing cards, reading	
	Note: support needed at external medical appts (Susan)	
	Family History: Mother died 65 y.o. (blood clot)	
	Father died 58 y.o. (alcoholic liver disease)	
	Past medical history: 2010 BCC (excision, no recurrence)	
	2014 hypertension (controlled w ACE inhibitors)	
	2016 L total hip replacement	
	2017 ?dementia – initial stage (forgetfulness, confusion)	
	No known allergies	
Recommend	~	
ations / Treatment	Recommended: visual aids for use by care home staff (to communicate daily activities, instructions, etc)	
	<u>Treatment</u> : start antibiotic drops (potential otitis media to be confirmed by swab) & paracetamol 4x/day (headache)	



## Introductions

# Common problems with Introductions:

- Too much detail general context / general request is ideal we don't want specifics in introduction
- Content from timeline dates / admission information etc
- Forget the purpose
- Inaccurate purpose
- Language issues passive / relative clauses

Student	Teacher
Dr Danielle Albury Audiologist Newtown Hospital 123 New Street, Newtown  18th September 2018  Ref: Mrs Beryl Smith, D.O.B. 19th May 1938  Dear Dr Albury,  I am writing to refer Mrs Smith, who is presenting with signs and symptoms suggestive	Teacher Great!
of otitis media. She now requires your further investigation and management.  18/09/2018  Dr Danielle Albury Audiologist	following – sequence – after  If you want to show a cause, use a cause linker:  • due to
Newton Hospital 123 Main Avenue New Street Newton Re:Ms Beryl Smith, DOB(19/05/1938)	<ul><li>because</li><li>as a result of</li></ul>
Dear Dr Albury,  I am writing regarding Mrs Smith, who is facing hearing issues following due to an ear infection.  She requires investigations for a definitive diagnosis and management.	



Dr Danielle Albury	
Audiologist	
Newtown Hospital	
123 New Street	
Newtown	
18 <sup>th</sup> September 2018	
Dear Dr Albury,	
Re: Mrs Beryl Smith, Aged 80	
I am writing to refer Mrs Beryl Smith, who has hearing issues, and she requires further investigation and diagnosis.	We could probably benefit from a little more detail regarding provisional diagnosis
I am writing to refer Mrs Smith with acute otitis externa for further investigation and management.	The purpose is not accurate. We are referring due to the uncertainty about inside the ear and the effects it is probably having on hearing
I am writing regarding Mr Smith, who came to our GP with signs and symptoms of otitis externa and now requires referral for further investigation and management.	relative clauses  two choices:  1) extend relative clause with 'and' 2) two sentences – reintroduce the subject  Missing purpose: hearing issues / middle ear
Dr Danielle Albury Audiologist Newtown Hospital 123 New Street Newtown  Dear Dr Albury,  Re: Mrs Beryl Smith, D.O.B: 19/05/1938	
I am writing to refer Mrs Smith, whose clinical features are suggestive of otitis media. She now requires your expertise for further investigation and management.	
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Dr Danielle Albury Audiologist Newtown Hospital 123New Street Newtown	
18 September 2018	
Dear Dr Albury,	
Re: Mrs Beryl Smith DOB: 19/05/1938	
I am writing regarding Mrs Beryl Smith, who presented to our clinic due to ear ringing with possible tinnitus. She has difficulties to hear with noise and now she is being referred to you for your opinion and diagnosis with audiometry.	Genre & style – tinnitus is more professional and more suitable for this reader.  We're expanding the detail too much for the introduction – save the details of the hearing issues for the presentation / discussion paragraphs.
18 September 2018	
Dr Danielle Albury	
Audiologist	
Newtown Hospital	
123 New Street	
Newtown	
Dear Dr Albury,	
Re: Mrs Beryl Smith	
DOB: 19 May 1938	
I am writing to refer Mrs Smith, who has been experiencing bilateral hearing loss, possibly due to otitis media. She is now being referred to you and requires further investigation and management.	We don't know for sure what has caused the symptoms – according to the case notes



Dr Danielle Albury	
Audiologist	
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Newtown Hospital	
123 New Street	
Newtown	
18 September 2018	
'	
Re: Mrs Beryl Smith, DOB: 19th May 1938	
Dear Dr Albury,	
I am writing to refer Mrs Smith, <del>80 year old</del>	
_	#inni#
retired librarian woman who has been	tinnitus – why mention itching?
experienced experiencing ringing in her ears and	
pruritus in her right ear. She now requires your	The picture we've painted is not very helpful – if
further investigation and management.	we want to suggest a cause then mention the
	possible otitis media, not itchiness.
	,
18th September 2018	
Dr Danielle Albury	
Audiologist	
Newtown hospital	
123 New street, Newtown	
Re: Mrs Beryl Smith DOB : 19th May 1938	
Dear <del>doctor</del> Dr,	
I am writing regarding Mrs Smith, who is	If this is how you intended it to be it is unnatural
presented with provisional diagnosis of right	phrasing to say a patient is presented in your
1	
otitis media. Now she is being referred to your	letter.
facilities for further investigation and	
management.	She requires investigation and management.
Dr Danielle Albury	
Audiologist	
Newtown Hospital	
123 New Street	
Newtown	
18 <sup>th</sup> September 2018	
Dear Dr Albury,	
Re: Mrs Beryl Smith, DOB: 19 <sup>th</sup> May 1938	
I am writing regarding Mrs Beryl Smith, who has	Our focus is not on the problem which we need
	· · · · · · · · · · · · · · · · · · ·
right acute otitis externa. She is being referred	help with – the middle ear / hearing issues are
to you and now requires your further	the problem
investigation and management.	



18 September 2018 Instead of focusing on her presentation, try and summarise what the actual problem is. Dr Danielle Albury ..'who has possible tinnitus. Audiologist Newtown Hospital We shouldn't mention the headache and itchiness in the introduction – that isn't key 123 New Street information required for a brief overview. Newtown Re: Mrs Beryl Smith, aged 80 Dear Dr Danielle Albury, I am writing to refer Mrs Smith, who visited our clinic due to ringing in bilateral ears and pruritus in right ear. She is being referred and now requires your further investigation and management. I am writing regarding Mrs Beryl Smith, who Instead of focusing on her presentation, try and presented to our clinic with complains of summarise what the actual problem is. bilateral ringing in ears, mild headache and puritus on right ear. ..'who has possible tinnitus. She is being referred to you for further investigation and management. We shouldn't mention the headache and itchiness in the introduction – that isn't key information required for a brief overview. 18th September 2018 Dr Danielle Albury Audiologist Newtown Hospital 123 New Street Newtown Dear Dr Albury, Re: Mrs Beryl Smith, DOB: 19/05/1938 I am writing to refer Mrs Beryl Smith, who has Too much detail – what will go in presentation / recently been diagnosed with right acute otitis examination paragraph? Plus, she hasn't been media and is suspected of bilateral hiring loss diagnosed definitely – only provisionally. along with foreign bodies in the right ear canal and right right otitis media. She requires further investigation, management and definitive diagnosis.



Dr Danielle Albury Audiologist Newtown Hospital 123 New Street Newtown  18th September 2018  Dear Dr Albury,  Re: Mrs Beryl Smith, DOB: 19/03/1938.  I am writing to refer Mrs Smith, an 82 year old retired librarian, who requires your expert assessment and possible audiometry for her hearing loss. would be valued.	(for speciality it is correct to writ audiologist or audiology department –? )  Either is ok!  This is an example of a 'run on sentence' – you've combined two sentences. Additionally, you don't need all of this detail.
Dr Danielle Albury Audiologist Newtown Hospital 123 New Street, Newton	Great!
18th September 2018	
Dear Dr Albury,	
Re: Mrs Beryl Smith, DOB: 19th May 1938	
I am writing regarding Mrs Smith, who has signs and symptoms suggestive of hearing loss and tinnitus. She is being referred to you for a comprehensive investigation and management.	
Dr Danielle Albury Audiologist Newton Hospital 123 New Street Newtown	
18th September 2018	
Dear Dr Albury	
Ref: Mrs Beryl Smith	
I am writing regarding Mrs Smith, who has possible bilateral ringing ears tinnitus and now requires further investigation and management. She is being referred to you.	More professional.



Dr Daniele Albury	
Audiologist	
Newtown Hospital	
123 New Street	
Newtown	
18th September 2018	
Dear Dr Albury,	
Re: Mrs Beryl Smith	
DOB: 19th May 1938	
I am writing regarding Mrs Smith, who was has been provisionally diagnosed with right ear otitis, ear canal foreign bodies, and bilateral hearing loss. She now requires your further investigation and management.	The problem with including this much detail in the introduction is what will you include in the presentation / examination paragraph? It could be summarised more. Plus, otitis externa has actually been diagnosed, not provisionally, so it's not 100% accurate a description.