

# **WRITING SUB-TEST** – TEST BOOKLET

# **INSTRUCTIONS TO CANDIDATES**

You must write your answer for the Writing sub-test in the Writing Answer Booklet.

You must **NOT** remove OET material from the test room.

## **Occupational English Test**

WRITING SUB-TEST: NURSING

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 January 2019

You are the nurse in a Community Health Centre. A patient you have been monitoring is moving to another city to live with his daughter.

### **PATIENT DETAILS:**

Name: Mr Peter Dunbar

DOB: 18 Mar 1932

#### **Current medication:**

Metformin 500mg 3x/day (oral hypoglycaemic)

Ramipril 5mg daily (anti-hypertensive, ACE inhibitor) – for hypertension

Warfarin variable 3-5mg (anti-coagulant)

Sotalol 40mg daily (beta blocker)

#### Treatment record:

Sep 2017 Diagnosed with type 2 diabetes August 2016. Fasting blood sugar levels (BSL) = 9

Doctor recommended dietary management: low-fat, low-sugar, calorie

restriction; limit alcohol. 个Exercise

Pt lives at home with wife. Wife cooks. Wife managing dietary requirements, but Pt likes 2-3

glasses wine with meals

**Dec 2017** Wife deceased. Pt depressed/grieving. Referred back to doctor for monitoring/medicating

Fasting BSL = 9. Pt non-compliant with diet. Excessive fat, salt, sugar, alcohol (wine/beer)

Mar 2018 Doctor prescribed metformin (oral hypoglycaemic agent). Now Pt cooking for self –

non-compliant with diet. Non-compliant with medication. Blames poor memory
Pt appears unmotivated. Resents having to take medication: 'always been healthy'

Takes medication intermittently; encouraged to take regularly

Educated regarding need for regular medication and potential adverse effects of intermittent dosing

Discussed strategies of memory aids

Jun 2018 Pt hospitalised (City Hospital, Newtown) with myocardial infarction (MI) following retrosternal pain,

nausea/vomiting, dizziness, sweating. Confirmed by ECG

Treatment: aspirin, streptokinase infusion. Prescribed ramipril 5mg daily. Diagnosed with atrial

fibrillation post MI - commenced sotalol and warfarin

Jun-Aug 2018 Pt attended twice weekly

#### Oct 2018

Pt now walking with a stick. Signs of diabetic neuropathy. Poor exercise tolerance. Restricted mobility

Non-compliance with diet continues. Still self-catering. Discussed alternatives

e.g., community-based meal delivery service; moving in with adult children (son/daughter); retirement village

Had respiratory infection 2 wks ago. Amoxicillin prescribed. Pt discontinued all other medication as felt unwell. Resumed medications but still only taking intermittently

Again provided education re importance of adherence to drug regimen

#### 22 Jan 2019

Pt attended with daughter. Pt moving to Centreville to live with daughter & her husband.

Daughter will cook – requires education re Pt needs & monitoring

Daughter advises that Pt resistant to dietary alterations and medication regimen.

Still misses or doubles dose - all medication. Refuses to reduce salt, sugar, alcohol, fatty food

Pt continues to require monitoring & encouragement

Letter to transfer the Pt to the care of the community health nurse in Centreville, where the Pt is moving to live with his daughter

# **Writing Task:**

Using the information given in the case notes, write a letter to the Community Health Nurse in Centreville, outlining the patient's history and requesting ongoing monitoring. Address the letter to the Community Health Nurse, Eastern Community Health Centre, 456 East Street, Centreville.

#### 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.

Any answers recorded here will not be marked.



## **Occupational English Test**

WRITING SUB-TEST: NURSING

SAMPLE RESPONSE: LETTER OF TRANSFER

Community Health Nurse
Eastern Community Health Centre
456 East Street
Centreville

22 January 2019

Dear Nurse

Re: Mr Peter Dunbar DOB 18.03.1932

Thank you for accepting Mr Dunbar into your care for the regular monitoring of his diabetes and encouragement to comply with his medication and dietary regimens. Mr Dunbar is moving to Centreville to live with his daughter.

Since October 2018, Mr Dunbar has shown signs of diabetic neuropathy and consequently mobilises with a walking stick. His type 2 diabetes is controlled by metformin and through his diet, however, he remains resistant to any form of treatment, and has not been compliant with his medication regimen, reporting poor memory as the primary cause of his neglect. On occasion he also double doses. Contrary to advice, Mr Dunbar has continued to consume excessive amounts of alcohol, fatty foods, salt and sugar since the death of his wife last year, contributing to his current condition. While his daughter will now be cooking for him, she will require some guidance related to his needs.

In June 2018, he suffered a myocardial infarction for which he was hospitalised at City Hospital in Newtown. He was diagnosed with atrial fibrillation on the same admission and was subsequently prescribed warfarin and sotalol. His hypertension is controlled by Ramipril. As with his other medication, Mr Dunbar is intermittent in his compliance.

Thank you for your continued management of this patient.

Yours faithfully,

Nurse