

OET Case Notes

Nursing · Intermediate · Referral letter · to General Practitioner

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Nursing — Referral to GP for a COPD Exacerbation

THE CASE NOTES

Patient: Mr Frank Osei, 69 years old

Background: COPD (GOLD Stage III); on salbutamol PRN, tiotropium OD and seretide BD; last exacerbation 4 months ago — treated with oral prednisolone and antibiotics at home

Current presentation: 3-day history of increasing breathlessness; sputum yellow-green and increased in volume; unwell, off food

Observations: RR 24/min (baseline 18); SpO₂ 89% on air (baseline 94–95%); HR 102, BP 130/80, temp 37.8°C

Respiratory: Using accessory muscles; wheeze on auscultation; reduced air entry at both bases

Current management: Salbutamol 2.5 mg nebulised at home visit — minimal improvement; unable to use inhaler effectively

Concerns: O₂ saturation well below baseline; respiratory rate elevated; nebuliser response inadequate; patient increasingly anxious

Social: Lives alone; wife deceased; son lives 40 minutes away

Task: Write a referral letter to the GP, Dr Janet Brown, requesting urgent review of Mr Osei in view of a COPD exacerbation that may require hospital admission.

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WHAT TO INCLUDE

- + **The change from his baseline: SpO₂ 89% vs his usual 94–95%**
The deviation from baseline is more clinically significant than the absolute number alone. An SpO₂ of 89% in a COPD patient with a baseline of 94–95% signals a severe exacerbation, not a routine dip.
- + **The inadequate response to nebulised salbutamol**
This is the clinical reason the nurse is escalating to the GP rather than managing at home. Without this, the urgency is not justified.
- + **The elevated respiratory rate and the signs of respiratory distress**
Objective assessment findings that tell the GP the patient needs same-day review — not a routine appointment.

WHAT TO LEAVE OUT

- **The full COPD medication list in detail**
State his regular regimen in one line; the GP holds the prescription record. The focus is on the acute change, not the stable long-term plan.
- **Social isolation detail beyond a brief mention**
Relevant as context for urgency (lives alone), but the family logistics — son 40 minutes away — do not change the clinical decision.

CRITERION IN FOCUS · PURPOSE

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A nursing referral earns Purpose marks only when the recipient knows within the first sentence both the clinical situation and the specific action requested. 'I am writing to request urgent review of Mr Osei, who is experiencing a moderately severe COPD exacerbation that may require hospital admission' is complete. 'I am writing regarding Mr Osei' is not.

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