

Nursing — Referral to Physiotherapy for Post-Operative Mobilisation

THE CASE NOTES

Patient: Mrs Sandra McBride, 58 years old

Procedure: Right total knee replacement under spinal anaesthesia — day 2 post-operation; uncomplicated

Vital signs: Stable; afebrile; SpO2 98% on air; wound drain removed this morning

Current mobility: Sitting out in chair; transferred with standby assistance of two; has not yet attempted walking

Pain: Moderate pain on movement; NRS 6/10 at rest; on regular paracetamol, ibuprofen and PRN oramorph; pain being managed adequately for supervised mobilisation

VTE prophylaxis: Enoxaparin 40 mg OD; TED stockings in place

Knee dressing: Dry and intact; wound review by nurse tomorrow

Goal: Aim to mobilise to the bathroom and negotiate stairs before discharge, which is planned for day 4–5

Task: Write a referral letter to the physiotherapy team requesting an assessment and mobilisation plan for Mrs McBride.

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WHAT TO INCLUDE

+ The procedure and that it was uncomplicated — day 2 post-op

The physiotherapist needs the surgical context and the post-operative day to calibrate their mobilisation approach. Day 2 after an uncomplicated TKR has a standard physiotherapy expectation.

+ Current mobility status: transfers with standby assistance, has not yet walked

The physiotherapist's baseline. Without knowing where she starts, they cannot set appropriate goals or choose the right walking aid.

+ Pain is being managed adequately for supervised mobilisation

Signals to the physiotherapist that pain is not a barrier to starting — an important green light that affects their scheduling priority.

WHAT TO LEAVE OUT

– VTE prophylaxis details

Routine post-operative care that the physiotherapist does not need to action. It is part of the nursing care plan, not the physiotherapy referral.

– The exact analgesic regimen

State that pain is managed adequately; the specific drugs and doses are the nursing team's domain. The physiotherapist needs the functional implication, not the prescription.

CRITERION IN FOCUS · ORGANISATION & LAYOUT

A beginner nursing referral is a strong place to practise the three-part structure: (1) who the patient is and why you are writing, (2) the clinical picture and current status, (3) the specific request. Marking notes when the specific request — an assessment and mobilisation plan — appears before the clinical picture, or is buried in the middle.

Write this letter, then get it marked at oetwritingcorrection.com/oet-writing-services