OET Case Notes

Occupational Therapy · Proficient · Transfer letter · to Burns Rehabilitation Occupational Therapist

oetwritingcorrection.com

Occupational Therapy — Transfer to Burns Rehab OT for Upper Limb Contracture Pr

THE CASE NOTES

Patient: Mr Isaac Mbeki, 29 years old; chef; sustained deep partial-thickness and full-thickness burns to both forearms and hands in a commercial kitchen fire 3 weeks ago

Burns: Bilateral forearms and dorsal hands; approximately 14% TBSA; split-thickness skin grafts applied day 5; grafts stable; wound dressings ongoing

Splinting regimen (active): Resting hand splints bilaterally: wrists in 30° extension, MCPs in 70-80° flexion, IPs in full extension, thumbs in palmar abduction — anti-contracture position; worn 23 hours/day; removed for therapy only

Current therapy: Passive range of motion maintained by OT and physiotherapy; beginning active-assisted finger flexion exercises (2 sessions daily); wrist range: 0–25° active extension bilaterally

Priority concerns: Dorsal hand grafts at highest risk of MCP extension contracture; thumb web space contracture risk (bilateral); functional hand use for grip requires active MCP flexion 60° minimum

ADL status: Dependent in all personal care and meal preparation; psychologically struggling with impact on career (chef); referred to liaison psychology

Equipment: Custom thermoplastic splints fitted and documented; splint wearing regimen included with this transfer

Goal: Maintain joint range for functional grip; progress to 60° MCP flexion bilaterally within 6 weeks; prepare for return to cooking activities as a long-term goal

Task: Write a transfer letter to the burns rehabilitation OT, Ms Niamh Hogan, providing the clinical information needed to continue the contracture prevention programme.

Task: Write a transfer letter to the burns rehabilitation OT, Ms Niamh Hogan, providing the clinical informatio needed to continue the contracture prevention programme.

WHAT TO INCLUDE

+ **The anti-contracture splinting position and the 23-hour wearing regimen**
  Splint discontinuity is the primary contracture risk at transfer. The receiving therapist must know the exact anti-contracture position to replicate the splint or adjust it safely. The wearing regimen — 23 hours/day, removed for therapy only — must continue without interruption.

+ **The current active extension range (0–25° bilaterally) and the 60° MCP flexion goal**
  The rehabilitation programme starts from this baseline and advances toward the functional grip goal. Without both numbers, the receiving OT cannot calibrate progression.

+ **The priority risk: dorsal hand grafts at highest risk of MCP extension contracture and thumb web space contracture**
  This tells the receiving OT where to concentrate monitoring and intervention. All burns have contracture risk; this letter identifies the specific high-risk sites for this patient.

WHAT TO LEAVE OUT

– **The acute burns medical management: fluid resuscitation, systemic infection management, anaesthesia**
  The medical team has transferred this to the burns rehabilitation unit. The OT transfer letter covers the splinting and functional rehabilitation programme — not the acute medical history.

oetwritingcorrection.com · Get your letter marked against all 6 OET criteria from $12
OET Writing Specialist · PhD · 11,000+ letters marked since 2014

- **The psychology referral detail**
  A separate care stream. One clause: 'referred to liaison psychology given the impact on his career identity.' The receiving OT is informed; they do not manage the psychological treatment.

CRITERION IN FOCUS · CONTENT

Burns OT transfer letters are graded on whether the anti-contracture programme can continue without interruption. The three non-negotiables: (1) the splint position in joint angles, (2) the wearing regimen, (3) the specific contracture risk sites. A letter that describes the burns without the splint position, or gives the wearing regimen without the anti-contracture angles, fails Content — the receiving therapist cannot safely continue from an incomplete handover.

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

oetwritingcorrection.com