

# OET Case Notes

Pharmacy · Proficient · Discharge letter · to Patient

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## Pharmacy — Discharge Advice for a Patient Starting a DOAC after a DVT

### THE CASE NOTES

**Patient:** Mr Oluwaseun Adeyemi, 38 years old, fit and well prior to this admission

**Diagnosis:** Provoked DVT (left calf extending to popliteal vein) following a 14-hour flight 5 days ago

**Rivaroxaban regimen:** Rivaroxaban 15 mg TWICE daily with food for the first 21 days; then 20 mg ONCE daily with food for 3 months total; prescribed by haematologist

**Taking with food — critical:** Rivaroxaban must be taken with food (especially 20 mg dose) for adequate absorption; taking on an empty stomach significantly reduces bioavailability

**Bleeding warnings — stop and seek help immediately:** Unusual or unexpected bleeding: blood in urine, blood in stool (black or dark red), coughing or vomiting blood, severe unexplained headache or dizziness, excessive bruising — call 999 or go to A&E

**OTC interactions — do not take:** No NSAIDs (ibuprofen, naproxen — buy-without-prescription) as they significantly increase bleeding risk; no aspirin unless prescribed by a doctor; do not take St John's Wort

**Dental and procedural alert:** Must inform dentist, surgeon or any healthcare professional before any procedure — rivaroxaban may need to be stopped beforehand

**No INR monitoring required:** Unlike warfarin, rivaroxaban does not require blood test monitoring; no diet restrictions required (no vitamin K concern)

**Duration and review:** 3 months total; haematology review at week 8 to assess whether to extend beyond 3 months; do not stop without medical advice

**MHRA alert card:** Patient given an NPSA anticoagulant alert card — must carry it at all times

**Task:** Write a discharge advice letter to Mr Adeyemi explaining how to take rivaroxaban safely, what bleeding symptoms to watch for, and what medications to avoid.

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### WHAT TO INCLUDE

- + **The two-phase dose schedule (15 mg BD for 21 days, then 20 mg OD) and that both must be taken with food**  
A patient who stays on the higher dose beyond day 21 receives an incorrect dose; one who takes the 20 mg on an empty stomach gets subtherapeutic anticoagulation. Both are safety risks and both must be prevented by the letter.
- + **The specific bleeding warning signs that require immediate emergency care**  
Anticoagulation bleeding is the most serious risk — patients must recognise the signs and know the action (call 999 or go to A&E) without delay.
- + **No ibuprofen, naproxen (even OTC), or St John's Wort**  
NSAIDs are the most commonly self-purchased analgesics. A patient with a calf DVT who takes ibuprofen for leg pain dramatically increases bleeding risk.

### WHAT TO LEAVE OUT

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– **A comparison of rivaroxaban vs warfarin**

One sentence covers the key patient-facing difference: 'unlike warfarin, this tablet does not require regular blood tests.' A comparison is not part of the discharge counselling task.

– **The pathophysiology of the DVT**

One brief orientation sentence is enough: 'Rivaroxaban prevents your blood from clotting further while the existing clot dissolves.' The mechanism of factor Xa inhibition does not belong in a patient advice letter.

## CRITERION IN FOCUS · CONTENT

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DOACs are high-alert medications. The Content grade falls if any of these are missing: (1) the two-phase dosing schedule with the food requirement, (2) emergency bleeding signs and the emergency action, (3) the NSAID/aspirin avoidance instruction, (4) the must-inform-healthcare-professionals instruction before any procedure. All four are clinically non-negotiable.

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