

# OET Case Notes

Pharmacy · Intermediate · Advice letter · to Patient

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## Pharmacy — Advice Letter for a New Warfarin Patient

### THE CASE NOTES

**Patient:** Mrs Joan Pickering, 67 years old

**Reason:** Newly started on warfarin following a deep vein thrombosis (DVT) in the left leg

**Dose:** Warfarin, dose adjusted to INR; current 3 mg daily; take at the same time each evening

**Monitoring:** Regular INR blood tests at the anticoagulation clinic; target INR 2.0–3.0

**Interactions:** Avoid starting new medicines or supplements without checking; limit alcohol; keep vitamin K intake (green vegetables) consistent rather than changing suddenly

**Warning signs:** Unusual bruising, bleeding gums, blood in urine or stool, prolonged bleeding from cuts

**Practical:** Carry the anticoagulant alert card; tell any dentist or doctor she takes warfarin

**History:** Hypertension (amlodipine); occasional ibuprofen for knee pain — advise paracetamol instead

**Task:** Write an advice letter to Mrs Pickering explaining how to take her new warfarin safely and what to watch for.

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### WHAT TO INCLUDE

- + **How and when to take the dose, and that it can change with INR**  
The core instruction. The patient must understand the dose is not fixed and depends on blood tests.
- + **The need for regular INR monitoring**  
Without it the therapy is unsafe; this is the single most important behaviour to convey.
- + **Bleeding warning signs and what to do**  
Examiners reward a clear safety net in advice letters above almost any other content choice.
- + **Switch from ibuprofen to paracetamol**  
A concrete, decision-relevant interaction the patient can act on immediately.

### WHAT TO LEAVE OUT

- **The pharmacology of warfarin / vitamin K antagonism**  
Mechanism detail is wrong for a patient audience and breaches the register. Explain the why in plain terms instead.
- **Her hypertension management**  
Unrelated to the warfarin advice unless it bears on an interaction; including it dilutes the purpose.

### CRITERION IN FOCUS · CONCISENESS & CLARITY

Advice letters to patients live or die on register. Clinical terminology, dense sentences and jargon all cost Conciseness & Clarity and Genre & Style marks. The 2026 emphasis on clarity makes plain, actionable wording essential.

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