

# OET Case Notes

Occupational Therapy · Beginner · Referral letter · to General Practitioner (GP)

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## OET Case Notes: OT Home Safety Referral (Beginner)

### THE CASE NOTES

**Patient:** Mrs Dorothy Walsh, 78 years old

**Living situation:** Lives alone in a two-storey home; family nearby but not co-resident

**Reason for assessment:** Home safety assessment requested by GP following a recent near-fall on the stairs

**Assessment findings:** Moderate fall risk (Berg Balance Scale 42/56); staircase handrail absent on left side; bathroom has no grab rails; step thresholds throughout

**Current mobility:** Ambulant independently but reports dizziness on rising

**Medical background:** Type 2 diabetes, managed hypertension — no recent medication review

**Modifications arranged:** Stair grab rail installation arranged; fall-prevention programme recommended

**OT plan:** Review in 6 weeks once modifications in place; requesting GP medication review for dizziness on rising

**Task:** Write a referral letter to Mrs Walsh's GP, Dr James Brennan, outlining the home assessment findings, the risks identified, and requesting a review of her medications in relation to the reported dizziness.

### WHAT TO INCLUDE

- + **The reason for assessment and the specific fall risk found**  
Purpose must be clear in the opening sentence; an examiner should understand the reason for the letter before the second line.
- + **The dizziness on rising and the request for a medication review**  
This is the clinical handover — the key action being transferred to the GP. Omitting it makes the letter incomplete.
- + **The home modifications already arranged**  
Telling the GP what has already been done frames the remaining gap clearly and prevents duplicate action.

### WHAT TO LEAVE OUT

- **The full Berg Balance Scale scoring methodology**  
One score with context is sufficient. Explaining the tool wastes words and shifts focus from the clinical message.
- **Detailed management of the diabetes or hypertension**  
These are context only. The GP manages them — your job is to flag the postural-dizziness link, not re-manage the conditions.

### CRITERION IN FOCUS - ORGANISATION & LAYOUT

A referral letter has a clear three-part structure: reason for writing, findings, action requested. Markers notice when the action (medication review) appears before the findings, or when recommendations are buried mid-paragraph. Organise chronologically: assessment, what you found, what you have done, what you need from the reader.

Write this letter, then get it marked at [writingcorrectionservice.com/oet-writing-services](http://writingcorrectionservice.com/oet-writing-services)