

**OCCUPATIONAL ENGLISH TEST**  
**WRITING SUBTEST: PHYSIOTHERAPY**  
**TIME ALLOWED: READING TIME: 5 MIN**  
**WRITING TIME:40 MIN**

Read the case notes and complete the writing task which follows

**Notes**

Assume that today's date is 10 Feb 2019

You have been treating a Patient, Emily Smith, who has rheumatoid arthritis, you are writing a letter back to her doctor, Dr. Jones

**Patient Details:**

- Patient: Mrs. Emily Smith
- Age: 50
- Occupation: Office Manager
- Date of Assessment: February 10, 2019
- Referral Source: General Practitioner

**Presenting Complaint:**

- Persistent joint pain, swelling, and stiffness affecting multiple joints, notably wrists, hands, and knees.
- Morning stiffness lasts for more than 30 minutes.
- Fatigue and malaise interfering with daily activities.
- Functional limitations, particularly in gripping objects and performing fine motor tasks.

**Medical History:**

- Hypothyroidism: Under control with (Cytomel)
- Previous episodes of joint pain and swelling, managed conservatively with pain relievers.

**Assessment Findings:**

**Subjective Data:**

- worsening joint symptoms over the past few months, significantly impacting her quality of life.
- Morning stiffness lasts for approximately 1 hour, gradually improving with movement and activity.
- Difficulty in performing household chores, typing at work, and holding utensils due to hand and wrist involvement.
- Fatigue and generalized weakness, affecting her ability to concentrate and complete tasks.

**Objective Data**

- Symmetric joint involvement observed, with swelling, tenderness, and limited range of motion in wrists, hands, and knees.
- Palpable synovial thickening noted in bilateral wrist and hand joints.
- Grip strength reduced, with evidence of muscle wasting in the hands.

- Laboratory investigations pending to confirm diagnosis and assess disease activity markers (e.g., Rheumatoid factor, Anti-cyclic citrullinated peptide antibodies).

### **Treatment Goals:**

1. Alleviate Pain and Inflammation: Implement strategies to reduce joint pain and swelling, improving Mrs. Smith's comfort and mobility.
2. Preserve Joint Function: Prevent or minimize joint deformities and maintain optimal range of motion in affected joints.
3. Enhance Functional Independence: Enable Mrs. Smith to perform activities of daily living with greater ease and efficiency.
4. Educate Patient: Provide information on RA management, including self-care techniques, joint protection strategies, and medication adherence.

### **Intervention Plan:**

1. Physical Therapy:
  - Joint mobilization techniques to improve flexibility and reduce stiffness.
  - Therapeutic exercises focusing on strengthening surrounding muscles and maintaining joint range of motion.
  - Patient education on proper body mechanics and energy conservation techniques.
2. Pain Management:
  - Application of heat or cold therapy to alleviate pain and inflammation.
  - Collaboration with the rheumatologist to initiate appropriate pharmacological management.
3. Assistive Devices: Provision of adaptive aids (e.g., ergonomic keyboard, assistive utensils) to support functional activities.
4. Lifestyle Modifications: Guidance on pacing activities, rest breaks, and stress management to minimize disease flare-ups and fatigue.

### **Follow-Up:**

Mrs. Smith will be scheduled for regular follow-up appointments to monitor her response to treatment, assess disease progression, and modify interventions as necessary.

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## **WRITING TASK**

Using the information interventions case notes, write a letter back to the referring doctor, Dr. Felicia Jones, Fit family practice, 25 North road, Newtown.