

Introduction

A) Normal Referral Letter:

- Thank you for seeing Mr Jones, a 40-year-old forklift driver, who wants to return to his work after a back injury. Thus, your assessment regarding his workplace would be highly appreciated.
- I am writing to refer Joshua, a 2-month-old male infant, who is presenting with constipation and symptoms suggestive of mild dehydration. Therefore, your further assessment and management would be highly appreciated.
- Thank you for seeing Mr Seymour, a 60-year-old retired academic, who is presenting with very painful left first toe consistent with gout. Therefore, etc.

B) Requesting an Urgent Assessment:

- I am writing to request an urgent review of Ms Duval, a 24-year-old lady, who has demonstrated features suggestive of hypothyroidism **most likely, Grave's disease.**
- Thank you for seeing Mr XXX, who is having an acute exacerbation of asthma and pneumonia. Thus, your urgent management is highly required.

C) Two Associated Conditions on Referral:

- Thank you for, whose symptoms are suggestive of severe depression and possible bipolar disorder. Thus,etc.
- Thank you for, whose features are consistent with reactive depression along with anxiety. Thus,etc.

D) Discharge To a GP:

- I am writing to update you regarding Ms Garcia who was referred with suspected meningitis. Your further follow-up would be highly appreciated as her diagnosis is now confirmed.
- I am writing to update you regarding Ms Johnson who is being discharged today after a total knee replacement surgery. Thus, your follow-up would be appreciated.

E) Discharge/Referral To another Doctor:

- I am writing to update you regarding Mr XXX who has been diagnosed with And he is being discharged today. Your follow-up would beetc.
- I am writing to refer Mr XXX who is being discharged after he has been diagnosed with Your advice in order to cope with his latest diagnosis is highly appreciated.
- I am writing to inform you regarding Mr XXX who is being discharged from our hospital/department into your care. He was admitted into our hospital/department due to Thus, your further management/continuous follow-upetc.

History

- Mr XXX is a heavy drinker and has been suffering from recurrent first toe inflammation since 2010. He is non-compliant with his regular medications including colchicines,etc. His family history is notable for RA related to his father.
- Joshua was delivered vaginally at 38 weeks' gestation with no complications. Kindly note, his birth weight was 3250gm.
- Mr XXX is married and has 3 children. He is a smoker and he drinks alcohol frequently/occasionally. It is worth mentioning that he is allergic to pethidine, penicillin and radioactive contrast agents.
- Mr XXX has been smoking for 4 years. Regarding his medical history, he is allergic to cats and he has a history of hay fever/ he is allergic to pollens. In addition, he suffers from eczema. He was admitted into a hospital 2 times. Kindly note, his sister is asthmatic.
- Mr XXX who is married, is a father of three.etc.
- Mr XXX has been a patient in my clinic for the past 9 years. He has a medical history of asthma which has been managed accordingly.
- Mr XXX, who is married and has 2 children, is a heavy smoker. His past medical history is unremarkable, and he has no known allergy.
- Mr XXX is a smoker and has had depression since September 2012, for which he takes Zoloft.
- Ms XXX, who has no family members in Australia lives alone after splitting up with her boyfriend recently. She is a smoker and a drinker. Please note, she is allergic toetc.

- Mr XXX is married and has 4 children, His pasty medical history is unremarkable except for asthma which is well-controlled. Kindly note, he has a strong family history of depression.
- Mr XXX, who is an overweight real estate agent, has been suffering from depression for 2 years, for which he takes Zoloft.
- Mrs XXX has seen me on several occasions in the past 5 months, during which time she has had frequent episodes of heart flutter and her blood pressure has been fluctuating.

1st Paragraph (Initial Visits)

- **On 00/00/0000**, the patient initially presented complaining ofetc. Her pain was associated with; therefore, she was commenced onetc. **However, three weeks later**, the patient attended with a new complaint of etc. Examination showedetc. As a result, she was managed with Which didn't help/improved her condition. Consequently, tests and investigations were ordered to be reviewed the next visit.
- **During initial visit on 00/00/0000**, the patient reported weakness inetc. On the review visit one week later, he presented with/admitted that/came complainingetc. His tests showedetc. Therefore, he was advised to modify his lifestyle and to stop smoking.
- **At the age of six weeks**, Joshua was presented with his mother who was concerned that despite he had been growing well, his bowel action was infrequent and his stool was hard. His examination was unremarkable with satisfactory weight gain. Therefore, the mother was reassured and was advised toetc. **However, 2 weeks later**, Joshua's condition was worsening as his sleep and feeding pattern were disturbed. The prior advice was modified to be and Coloxyl was prescribed.
- **On 00/00/0000**, Mr XXX initially presented with His X-ray revealed no abnormalities; therefore, he was referred to and was given a sick-leave certificate for 30 days. **On the subsequent visits**, he came complaining of persistent along with despite of his compliance with exercise. Thus , etc.

2nd Paragraph (Today's Visit)

- **Today**, Mrs Walter came complaining of depression, tiredness, sleeping troubles **along with** suicidal thoughts. Moreover, she reported that she had no energy to etc. Furthermore, she had lost further 9 kilograms due to loss of appetite.
- **On today's visit**, Mrs Clarke complained of etc. On examination, there were signs of etc. The X-ray and CT revealed etc. Consequently, she was counselled on the potential diagnosis **together with** the need for further investigations.
- **On today's review**, Mr XXX's gout episode is subsiding. X-ray result has shown etc. Furthermore, pathology test results have revealed etc. In addition to previous visit's advice, I have recommended urgent synovial fluid sample in the next episode.
- **On examination of Mr Foster today**, he is still suffering from the same symptoms because he is continuously smoking and does not take his medicine regularly. Some strategies regarding smoking cessation were discussed with him namely, nicotine patch, information brochures and involvement with supporting groups. An appointment was made within 7 weeks.
- Today, Mr XXX is in remission state while the X-ray has revealed degenerative changes of the left first metatarsophalangeal joint. Therefore, he has been asked to take allopurinol.

Conclusion

- In view of the above, my provisional diagnosis is Therefore, I am referring him for your further assessment and possible MRI imaging.
- In light of the above, I am referring Mr XXX for further treatment and investigations.
- In view of the above, I am referring this patient for a possible bronchoscopy and biopsy . Your further management would be greatly valued.
- Given the previous history, I believe that Mrs XXX needs your urgent management. I would be grateful if you would discuss child care and household maintenance with her husband.
- In view of the above, I am referring this patient to see if he requires any surgical intervention.
- In view of the above, I am referring this patient for your further neurological assessment.
- In view of the above, I would appreciate if you would advise Ms XXX's family on seeking medical advice **in case of** any signs of unexplained illness. Moreover, chemoprophylaxis for her close contacts is highly recommended.
- In light of the above, an assessment of Mr Jones' workplace is required, as well as advice about what certain duties he can perform there.
- Given the previous history, I would be grateful if you could advise Mr Jones regarding the duties he can perform and assess his workplace.
-, I am referring Mr XXX, upon his request, for

- , I am therefore referring this patient for further management including probable intervention.
- , it is requested that an abdominal CT scan shall be taken for an accurate diagnosis.
- , I am referring the patient after being discharged for further management.
- The patient was well/The condition of the patient was good at the time of discharge from the hospital/our department. I would request you to please, look into the case and provide the suitable treatment.
- The patient was feeling well/better at the time of discharge apart from the problem related to menorrhagia/pancreatitis/DM. Thus, great care is needed as the problem is severe this time.
- , but still there is a need to control his blood sugar.

If There is attached data:

- I have attached a copy of his pathology results.
- All reports are being attached to this letter.

At The End

Should there be any queries, kindly do not hesitate to contact me.

Use each template according to the required scenario in the exam.

Mohamed Hosameldin (m7osam91@gmail.com)