Starting peritoneal dialysis: transfer

Original independent practice. Assume that today's date is 3 November 2026. Mr Nanayakkara's training care transfers tomorrow; independent home dialysis has not been authorised. Allow 45 minutes: 5 minutes for reading and 40 minutes for writing. You are a registered nurse in a renal dialysis unit. Using the case notes, write a transfer letter to Ms Sanduni Alahakoon, Renal Home-Therapy Nurse, Community Dialysis Service, 32 Station Road, SE8 4AB, United Kingdom. Explain Mr Buddika Nanayakkara's progress, the skills still requiring supervision, the arrangements for continuing training and treatment, and his written escalation instructions. In your answer: expand the relevant notes into complete sentences; do not use note form; use letter format. The body of the letter should be approximately 180–200 words.

Choose one box per line: I = Include / C = Compress / O = Omit. Answers and reasons are on the webpage (scan QR).

	I	C	O
Patient details			
1. Name: Mr Buddika Nanayakkara	☐	☐	☐
2. DOB: 22/09/1967 (59 yrs)	☐	☐	☐
3. Address: 16 Mill Road, SE8 4AB, United Kingdom	☐	☐	☐
4. Transfer of training care: 04/11/26	☐	☐	☐
Social background			
5. Lives with wife; keen to help but has not received dialysis training	☐	☐	☐
6. Daughter helps with transport; unavailable during working hours	☐	☐	☐
7. Prefers written instructions alongside demonstrations; reads English independently without visual difficulty	☐	☐	☐
8. Complained that receptionist mispronounced his surname	☐	☐	☐
Medical history			
9. Advanced CKD associated with longstanding hypertension	☐	☐	☐
10. No previous experience of home dialysis	☐	☐	☐
11. Appendicectomy in childhood; no ongoing problems	☐	☐	☐
Treatment and training progress			
12. 15/10: peritoneal dialysis catheter inserted	☐	☐	☐
13. 28/10: training began; required repeated help preparing work surface and organising equipment	☐	☐	☐
14. 30/10: supervised peritoneal dialysis exchanges commenced at renal unit	☐	☐	☐
15. 02/11: handwashing + work-surface preparation now correct without prompts	☐	☐	☐
Treatment and training progress			
16. Touched connection surface; prompted to stop and seek nursing help	☐	☐	☐
17. Still needs prompting to inspect drained fluid	☐	☐	☐
18. 03/11: catheter exit site dry; no redness or discharge	☐	☐	☐
19. Effluent clear; no abdominal pain or fever	☐	☐	☐
20. Initial mild nausea settled; eating usual meals	☐	☐	☐
21. Anxious about contamination despite adequate hand dexterity; requests further supervised practice	☐	☐	☐
Documented renal-team plan			
22. Team plan: all exchanges directly nurse-supervised at unit until competency documented	☐	☐	☐
23. From 04/11: home-therapy nurse to continue unit-based training and reassess skills	☐	☐	☐
24. Renal unit retains dialysis prescribing and treatment delivery during training	☐	☐	☐
25. Written team plan: cloudy effluent/abdominal pain/fever → attend renal unit immediately; ED if inaccessible	☐	☐	☐
26. Exit-site redness/pain/discharge → same-day renal review	☐	☐	☐
27. Today: correctly repeated escalation instructions using written card; practical skills remain incomplete	☐	☐	☐
Home preparation			
28. 02/11 home assessment: clean preparation area; suitable storage	☐	☐	☐
29. Home supplies arranged; independent treatment not yet authorised	☐	☐	☐
30. Enjoys repairing radios; hopes to resume when less tired	☐	☐	☐

Teachers: free class packs at oetace.com/oet/teachers