Cellulitis: visiting, follow-up and safety advice

Assume that today's date is 5 November 2026. Mr Carragher is recovering at home and has attended the clinic for a nursing review today. This is original independent practice material. You are a registered nurse at the clinic where Mr Zachary Carragher is receiving treatment. Using the case notes, write a letter to his agreed friend, Ms Kirstin Lunny, explaining the clinician's recorded review arrangements and instructions for obtaining urgent and emergency help. Also answer her questions about catching cellulitis during visits and briefly explain how he can reduce future skin infections. Keep preventive actions directed to Mr Carragher and preserve her agreed practical role without assigning clinical duties or responsibility for monitoring him. Address the letter to Ms Kirstin Lunny, 18 Orchard Road, SW1V 2AB, United Kingdom. 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 Zachary Carragher	☐	☐	☐
2. DOB: 14/02/1969 (57 yrs)	☐	☐	☐
3. Lives alone; independently manages washing, dressing and medicines	☐	☐	☐
Social background			
4. Consent: share recovery and prevention advice with friend Ms Kirstin Lunny; agreed grocery deliveries, check-ins and transport to review	☐	☐	☐
5. Friend's role: practical support only; no medicine administration, wound care or nursing assessment requested	☐	☐	☐
6. Friend's questions: stop visits to avoid catching cellulitis? What can pt do to prevent another episode?	☐	☐	☐
7. Retired bus driver; enjoys collecting vintage railway tickets	☐	☐	☐
8. Sister privately described pt as selfish during a dispute over inheritance	☐	☐	☐
9. Complained that receptionist was rude about parking arrangements	☐	☐	☐
Medical history			
10. Mild eczema; occasional dry skin on legs	☐	☐	☐
11. Appendicectomy aged 19; uncomplicated recovery	☐	☐	☐
12. No diabetes or immunosuppressive treatment	☐	☐	☐
13. No known medicine allergies	☐	☐	☐
Assessment and progress			
14. 03/11/26: painful, red, swollen L lower leg; attended clinic	☐	☐	☐
15. Small gardening scratch preceded symptoms; now closed	☐	☐	☐
16. Clinician diagnosed cellulitis; no abscess identified	☐	☐	☐
17. Oral antibiotics started 03/11; supplied with complete dispensing instructions	☐	☐	☐
Assessment and progress			
18. 05/11 nurse review: afebrile, feels well, eating/drinking normally	☐	☐	☐
19. Pain/swelling ↓; redness no longer spreading	☐	☐	☐
20. Skin intact; no discharge or dressing required	☐	☐	☐
21. Nurse explanation: infection in deeper skin; not passed person to person; no need to stop ordinary social visits because of cellulitis	☐	☐	☐
Treatment and prevention advice			
22. Clinician's instruction: finish prescribed antibiotic course, even when feeling better	☐	☐	☐
23. Recovery advice: elevate leg on pillows when sitting/lying to reduce swelling	☐	☐	☐
24. Bacteria may enter through small skin breaks; prevention: keep skin clean, moisturise dry areas regularly, continue usual eczema care; reduces risk, not a guarantee	☐	☐	☐
25. Future minor cuts/grazes: pt to wash hands → rinse wound with clean water → cover with sterile plaster/dressing; redness, swelling or ↑ pain → urgent GP/111	☐	☐	☐
Follow-up and safety plan			
26. Clinician booked review: same clinic, 06/11/26, 10:00; attend even if improving; friend driving	☐	☐	☐
27. Urgent advice: spreading redness or worsening pain/swelling → urgent GP appointment or 111; do not await review	☐	☐	☐
28. Emergency advice: 999 immediately for very high temperature/shivering, fast breathing, confusion, fainting or cold, clammy skin	☐	☐	☐
29. Future gardening: gloves, protective clothing and suitable footwear to reduce cuts/scrapes	☐	☐	☐
30. Pt has clinic contact details and written treatment, review and escalation advice; verbal advice understood	☐	☐	☐