Obstructive sleep apnoea before surgery: transfer

This is original independent practice material. Assume that today's date is 6 November 2026. Mr Harte has attended the sleep clinic before his planned inpatient surgery. Allow 45 minutes: 5 minutes for reading and 40 minutes for writing. You are a registered nurse in the sleep clinic. Using the case notes, write a transfer letter to Ms Yen Quach, Surgical Preassessment Nurse, to support coordination of Mr Hayden Harte's care before admission. Ms Quach already holds his surgical booking details and previous surgical history, but has not received his current sleep-clinic information. Explain the relevant findings and identify the arrangements requiring follow-up. Address the letter to Ms Yen Quach, Surgical Preassessment Nurse, Planned Inpatient Service, 48 Park Road, NW8 7RG. 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 Hayden Harte	☐	☐	☐
2. DOB: 14/03/1966 (60 yrs)	☐	☐	☐
3. Sleep-clinic review: 06/11/26; surgical preassessment booked 10/11/26	☐	☐	☐
4. Planned inpatient R total knee replacement: 20/11/26; osteoarthritis	☐	☐	☐
Social background			
5. Lives with wife; independent with personal care and medicines	☐	☐	☐
6. Wife available to transport him and his CPAP equipment	☐	☐	☐
7. Retired accountant; prefers routine sleep-clinic appointment letters by post	☐	☐	☐
8. Complained receptionist was unfriendly when confirming appointment	☐	☐	☐
Medical history			
9. OSA confirmed by sleep study in 2023	☐	☐	☐
10. Previous loud snoring and daytime tiredness → improved with CPAP	☐	☐	☐
11. Allergies: nil known	☐	☐	☐
Current assessment			
12. Reports CPAP every night, at existing prescribed settings	☐	☐	☐
13. Nasal mask; applies and removes independently without assistance	☐	☐	☐
14. No recent mask leakage, skin irritation or machine faults	☐	☐	☐
15. No recent ↑ daytime sleepiness or other symptom deterioration	☐	☐	☐
16. Never smoked; no current cough or respiratory infection symptoms	☐	☐	☐
17. Appendicectomy aged 17; uncomplicated recovery	☐	☐	☐
Treatment and progress			
18. Brought nasal mask and tubing today; machine and power lead left at home	☐	☐	☐
19. Sleep clinician today: continue prescribed nightly CPAP before admission	☐	☐	☐
20. No CPAP adjustment requested; prescription held by sleep clinic, not yet sent to preassessment; pressure values not included in these notes	☐	☐	☐
21. Earlier preassessment questionnaire: no sleeping tablets; today reports GP-prescribed zopiclone PRN, used twice in past month	☐	☐	☐
22. Patient asks whether to stop zopiclone before operation	☐	☐	☐
Plan			
23. Surgical team note: anaesthetic review before admission; assess OSA and sedative use; document postoperative breathing monitoring and analgesia arrangements	☐	☐	☐
24. No medicine changes authorised; individual perioperative medicine instructions to come from anaesthetist	☐	☐	☐
25. Sleep clinician: bring CPAP machine, nasal mask, tubing and power lead on admission	☐	☐	☐
26. Preassessment nurse: coordinate anaesthetic review; confirm complete admission equipment; obtain existing CPAP prescription from sleep clinic; communicate agreed plan to receiving ward	☐	☐	☐
27. Postoperative monitoring and analgesia arrangements not yet finalised	☐	☐	☐
28. Patient understands review needed; agrees to share sleep-clinic information	☐	☐	☐
29. Brother criticised wife's spending during recent family argument	☐	☐	☐
30. Sleep clinic remains available for CPAP equipment difficulties	☐	☐	☐