

Home safety follow-up after wrist fracture



Assume that today's date is 23 October 2026. Mrs Paredes is being discharged home this afternoon. You are an occupational therapist on the orthopaedic ward of the local hospital. Using the information in the case notes, write a letter of referral to Ms Fang Bitar, a community occupational therapist, requesting a home assessment, the installation of rails and a review of Mrs Paredes's daily living skills. Address the letter to Ms Fang Bitar, Community Occupational Therapist, Community Occupational Therapy Service, Community Health Centre, 42 High Street. 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).

Patient details

- | | I | C | O |
|--|--------------------------|--------------------------|--------------------------|
| 1. Name: Mrs Lucia Paredes | ☐ | ☐ | ☐ |
| 2. DOB: 14/03/1945 (81 yrs) | ☐ | ☐ | ☐ |
| 3. Address: 15 Church Lane | ☐ | ☐ | ☐ |
| 4. Admitted: 19/10/26; discharge: 23/10/26 | ☐ | ☐ | ☐ |

Social background

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|---|--------------------------|--------------------------|--------------------------|
| 5. Widow (husband died 2019); lives alone; R-handed | ☐ | ☐ | ☐ |
| 6. Single-storey house; 3 steps at front door, no rail; shower over bath | ☐ | ☐ | ☐ |
| 7. Daughter lives interstate, phones daily; unable to visit until Dec | ☐ | ☐ | ☐ |
| 8. Neighbour helps with shopping 1x/wk | ☐ | ☐ | ☐ |
| 9. Sings in church choir; enjoys knitting | ☐ | ☐ | ☐ |
| 10. Daughter told staff she and her brother are 'not speaking' after argument over late father's estate | ☐ | ☐ | ☐ |

Medical history

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|--|--------------------------|--------------------------|--------------------------|
| 11. Hypertension: amlodipine daily | ☐ | ☐ | ☐ |
| 12. Osteoarthritis both knees; uses walking stick outdoors | ☐ | ☐ | ☐ |
| 13. Nocturia: gets up 2-3x/night to toilet | ☐ | ☐ | ☐ |
| 14. Bilateral cataract surgery 2016 | ☐ | ☐ | ☐ |
| 15. Appendicectomy 1972 | ☐ | ☐ | ☐ |
| 16. Allergies: penicillin (rash) | ☐ | ☐ | ☐ |

Admission

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|---|--------------------------|--------------------------|--------------------------|
| 17. Fall 19/10 approx 02:00: tripped on loose bath mat in dark on way to toilet; on floor ~2 hrs before able to phone neighbour | ☐ | ☐ | ☐ |
| 18. X-ray: undisplaced R distal radius fracture; no other injuries; no head strike | ☐ | ☐ | ☐ |
| 19. Managed non-operatively: below-elbow plaster cast for 6/52 | ☐ | ☐ | ☐ |
| 20. Analgesia: regular paracetamol; pain well controlled | ☐ | ☐ | ☐ |
| 21. Bone density scan requested; GP to follow up | ☐ | ☐ | ☐ |

OT assessment

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|---|--------------------------|--------------------------|--------------------------|
| 22. Mobility (physio): independent with walking stick indoors, previously outdoors only | ☐ | ☐ | ☐ |
| 23. Unable to do buttons, cut food or open jars one-handed (L hand only) | ☐ | ☐ | ☐ |
| 24. Showering: unable to step over bath edge safely → no showering in bath until bath board/rails fitted; seated wash at basin agreed, carer to supervise; cast must be kept dry, cast protector supplied | ☐ | ☐ | ☐ |
| 25. Toilet: low seat, nothing to hold; difficulty standing up using one hand → toilet frame with raised seat supplied; trialled on ward, transfers safe + independent; delivered home 23/10 | ☐ | ☐ | ☐ |
| 26. Kitchen: managing simple meals with adapted cutlery; kettle tipper trial successful | ☐ | ☐ | ☐ |
| 27. Alert and orientated; keen to remain at home | ☐ | ☐ | ☐ |
| 28. Previously declined personal alarm ('don't want to be a nuisance'); now agreeable | ☐ | ☐ | ☐ |
| 29. Complained hospital food 'tasteless' and night nurse 'rude' | ☐ | ☐ | ☐ |

Plan

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| 30. Community OT referral: home visit within 1/52; assess bathroom/toilet; grab rails (shower/bath, toilet) + front step rail; consider bath board, night lighting; review toilet frame; review ADLs | ☐ | ☐ | ☐ |
| 31. Personal alarm application started; until installed, agreed to keep mobile phone with her day and night | ☐ | ☐ | ☐ |
| 32. Fracture clinic 30/10: check X-ray | ☐ | ☐ | ☐ |
| 33. Cast care: seek urgent medical review if ↑ pain, numbness, swelling or colour change in fingers | ☐ | ☐ | ☐ |
| 34. Interim home support confirmed (short-term community care): carer visits every a.m. from 24/10 for supervised wash + help with dressing; domestic help 1x/wk. Aged care assessment requested for ongoing support | ☐ | ☐ | ☐ |
| 35. Discharge summary sent to GP; GP review in 1/52 | ☐ | ☐ | ☐ |
| 36. Neighbour checked home before discharge: loose bath mat removed; plug-in night light fitted in hallway | ☐ | ☐ | ☐ |