CliniVerba

OET HQ BY DR. NASIR

OET WRITING SUB-TEST

MEDICINE

Writing Case Notes · Free Sample · Cases 1-2 of 15

2026 EDITION | FREE SAMPLE

Dr. Nasir Bukhari

Founder, CliniVerba · OET HQ

cliniverba.com · YouTube: @docnasirofficial

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In this sample

CASE	WRITING TASK	LETTER TYPE
No. 1	Suspected Acute Coronary Syndrome: Urgent Cardiology Referral	Referral letter
No. 2	Fractured Neck of Femur After Fall: Orthopaedic Referral	Referral letter

+ 13 more writing cases in the complete 2026 set. Get it at **cliniverba.com**

How the OET Writing sub-test works

- You have 45 minutes in total: 5 minutes to read the case notes and 40 minutes to write.
- You write ONE letter (usually a referral, discharge or transfer letter) to the person named in the task, using only the information in the case notes.
- The body of the letter should be about 180 to 200 words. Select the relevant notes; do not copy everything.
- Your letter is assessed on six criteria: Purpose, Content, Conciseness and Clarity, Genre and Style, Organisation and Layout, and Language.
- Each case here is set out exactly as it appears in the exam, and every case is written fresh for 2026 and calibrated to the current exam difficulty index.

Get your letter corrected

- Write your letter under exam conditions (45 minutes, no dictionary, no notes).
- Then, for corrections, visit cliniverba.com. Our OET-trained team marks your letter against all six criteria and shows you exactly what to fix.
- Practise, get corrected, and repeat. That is how our students clear the Writing sub-test.

WRITING SUB-TEST · MEDICINE **CASE 1 OF 2**

TIME ALLOWED: READING TIME: 5 MINUTES · WRITING TIME: 40 MINUTES

Read the case notes below and complete the writing task which follows.

Case 1: Suspected Acute Coronary Syndrome: Urgent Cardiology Referral

Notes:

PATIENT DETAILS

Name	Mr Daniel Okoye
Age	58 years
Marital status	Married, two adult children
Occupation	Long-haul truck driver
Next of kin	Grace Okoye (55, wife)
Today's date	18/03/2025

SOCIAL HISTORY

- Smoker, 25 cigarettes daily for 30 years; declined nicotine replacement twice
- Alcohol 20 standard drinks/week
- Sedentary; irregular meals, frequent takeaway food while driving
- Sleeps 5-6 hours per night, often broken

PAST MEDICAL HISTORY

- Essential hypertension (2014)
- Hypercholesterolaemia (2016), last total cholesterol 6.4 mmol/L
- Type 2 diabetes mellitus (2019), last HbA1c 8.1%
- Father died of myocardial infarction aged 54; brother had coronary stent aged 50
- **Allergy:** nil known

CURRENT MEDICATIONS

Medication	Dose	Frequency
Perindopril	5 mg	Once daily
Atorvastatin	20 mg	Nocte
Metformin	1 g	Twice daily

CONSULTATION 04/03/2025

- Central chest tightness on exertion for 6 weeks, relieved by rest within 5 minutes
- No radiation, no dyspnoea at that time; attributed symptoms to indigestion
- BP 158/94 mmHg, pulse 88/min regular, BMI 31 kg/m²
- ECG: sinus rhythm, no acute changes
- Advised bloods, commenced aspirin 100 mg daily; smoking cessation discussed

CONSULTATION TODAY 18/03/2025

Subjective

- Episodes now occurring at rest, three in past week, lasting up to 20 minutes
- Pain radiating to left arm and jaw, associated with sweating and nausea
- Breathless climbing one flight of stairs; woke last night with chest heaviness

- Continues to drive interstate; concerned about losing licence

Objective

Blood pressure	164/96 mmHg
Pulse	94/min, regular
Respiratory rate	20/min
Oxygen saturation	96% on room air
Temperature	36.8 °C

- Heart sounds dual, no murmur; chest clear; no peripheral oedema
- ECG today: T-wave inversion in leads V4, V6
- Troponin (point of care): mildly elevated

ASSESSMENT

Crescendo angina, suspected non-ST-elevation acute coronary syndrome.

PLAN

- Urgent cardiology assessment; consider coronary angiography
- Aspirin 300 mg given in surgery today; glyceryl trinitrate spray prescribed
- Advised to cease driving pending specialist review
- Optimisation of blood pressure, lipids and glycaemic control
- Referral for cardiac rehabilitation and smoking cessation support

WRITING TASK

You are a general practitioner at Riverstone Family Medical Centre, 42 Grange Road, Riverstone NSW 2765. Write a letter of urgent referral to Dr Helen Marsh, Consultant Cardiologist, Westmead Cardiology Unit, Darcy Road, Westmead NSW 2145, requesting urgent assessment and management of Mr Daniel Okoye.

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**.

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case notes	role-plays	tests	tests

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WRITING SUB-TEST · MEDICINE **CASE 2 OF 2**

TIME ALLOWED: READING TIME: 5 MINUTES · WRITING TIME: 40 MINUTES

Read the case notes below and complete the writing task which follows.

Case 2: Fractured Neck of Femur After Fall: Orthopaedic Referral

Notes:

PATIENT DETAILS

Name	Mrs Edith Falconer
Date of birth	09/06/1952 (72 years)
Marital status	Widowed
Residence	Lives alone in single-storey unit; daughter visits twice weekly
Next of kin	Karen Falconer (48, daughter)
Date of presentation	07/05/2025, 14:20

PAST MEDICAL HISTORY

- Osteoporosis (2018), T-score -3.1; poor adherence to alendronate
- Atrial fibrillation (2020), rate controlled
- Hypothyroidism (2011)
- Two previous falls in past 12 months, no fracture
- **Allergy:** codeine (nausea and vomiting)

CURRENT MEDICATIONS

Medication	Dose	Frequency
Apixaban	5 mg	Twice daily
Metoprolol	25 mg	Twice daily
Thyroxine	75 mcg	Once daily
Cholecalciferol	1000 IU	Once daily

PRESENTING HISTORY

- Mechanical fall in bathroom this morning, slipped on wet tiles
- Unable to weight bear since; found by neighbour after two hours
- No loss of consciousness, no head strike, no chest or abdominal pain
- Last dose of apixaban taken 08:00 today
- Pain 8/10 in right groin, radiating to knee

EXAMINATION

Blood pressure	138/82 mmHg
Pulse	96/min, irregularly irregular
Respiratory rate	18/min
Temperature	36.5 °C
Oxygen saturation	97% room air
Abbreviated Mental Test Score	9/10

- Right leg shortened and externally rotated; marked pain on any movement

- Neurovascularly intact distally; skin over hip intact
- Superficial bruising right forearm; no other injuries

INVESTIGATIONS

- X-ray pelvis and right hip: displaced intracapsular fracture, right neck of femur
- Full blood count: Hb 108 g/L; platelets normal
- Urea and electrolytes: creatinine 96 µmol/L, eGFR 58 mL/min
- ECG: atrial fibrillation, rate 96/min; chest X-ray clear

MANAGEMENT IN EMERGENCY DEPARTMENT

- Fascia iliaca block performed; paracetamol 1 g IV and oxycodone 2.5 mg oral
- Intravenous fluids commenced; kept fasting from 15:00
- Apixaban withheld; group and hold sent

PLAN

- Urgent orthopaedic review for surgical fixation, ideally within 48 hours
- Anaesthetic and perioperative medical assessment
- Delirium and pressure area prevention; early mobilisation post-operatively
- Bone protection review and falls assessment before discharge

WRITING TASK

You are the Emergency Department registrar at Alfred Hospital, 55 Commercial Road, Melbourne VIC 3004. Write a letter of referral to Dr Simon Achari, Consultant Orthopaedic Surgeon, Orthopaedic Unit, Alfred Hospital, requesting urgent operative assessment of Mrs Edith Falconer.

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**.

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