



OET WRITING SUB-TEST

# SPEECH PATHOLOGY

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

2026 EDITION

FREE SAMPLE



**Dr. Nasir Bukhari**

Founder, CliniVerba · OET HQ

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## In this sample

| CASE         | WRITING TASK                                        | LETTER TYPE     |
|--------------|-----------------------------------------------------|-----------------|
| <b>No. 1</b> | Handover: stroke aphasia and dysphagia              | Handover letter |
| <b>No. 2</b> | Outcome report: Parkinson's intensive voice therapy | Report letter   |

**+ 13 more writing cases** in the complete 2026 set. Get it at [cliniverba.com](https://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](https://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 · SPEECH PATHOLOGY**

**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: Handover: stroke aphasia and dysphagia**

**Notes:**

Assume that today's date is 19 March 2026.

**PATIENT DETAILS**

|                        |                                                                                                             |
|------------------------|-------------------------------------------------------------------------------------------------------------|
| <b>Name</b>            | Mr Stanley Obeng                                                                                            |
| <b>DOB</b>             | 08 Feb 1955 (71 y.o.)                                                                                       |
| <b>Social</b>          | Retired postmaster; lives with wife (supportive, main communication partner); enjoys crosswords, bowls club |
| <b>Diagnosis</b>       | Left MCA ischaemic stroke: 10 Feb 2026; right hemiparesis (walking with stick)                              |
| <b>Medical history</b> | Hypertension; atrial fibrillation (on anticoagulant)                                                        |
| <b>Discharge</b>       | Home with wife, 20 Mar 2026                                                                                 |

**COMMUNICATION: course and current status**

- Moderate non-fluent (expressive) aphasia + mild apraxia of speech
- Comprehension: functional for everyday conversation; occasional breakdown with long/complex instructions
- Expression: short phrases (3-4 words), word-finding difficulties ++; benefits from extra time, phonemic cues
- Reading: single words/short sentences OK; writing: impaired (also affected by hemiparesis)
- Therapy provided: daily word-retrieval therapy (semantic feature analysis), phrase-level scripts for daily routines; communication book prepared (family photos, needs, bowls club)
- Wife trained as communication partner: slow rate, one question at a time, yes/no options, writing key words; managing well
- Mood: occasional frustration; motivated, engages well; humour intact

**SWALLOWING: course and current status**

- Initially minced-moist diet + mildly thick fluids (coughing on thin fluids week 1)
- Upgraded 09 Mar: soft & bite-sized diet (IDDSI 6) + thin fluids; no signs of aspiration since
- Requires unhurried meals; fatigue towards evening: smaller evening meal advised

**COMMUNITY PROGRAM REQUESTED**

- Continue word-retrieval + conversation-level therapy; suggested 2x/week initially
- Progress functional goals: phone use, ordering at bowls club café
- Ongoing communication partner support for wife
- Review swallowing at first visit; upgrade towards regular diet as tolerated
- Consider local aphasia group when appropriate

## WRITING TASK

You are the speech pathologist on the stroke rehabilitation ward at Brackenfield Hospital. Your patient, Mr Stanley Obeng, is being discharged home tomorrow and requires ongoing community speech pathology. Using the information in the case notes, write a letter to the community speech pathologist outlining his presentation, progress and ongoing needs. Address the letter to: Ms Erin Calloway, Community Speech Pathologist, Brackenfield Community Health Service, 22 Mason Street, Brackenfield.

### 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 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: Outcome report: Parkinson's intensive voice therapy**

**Notes:**

Assume that today's date is 26 June 2026.

**PATIENT DETAILS**

|                  |                                                                               |
|------------------|-------------------------------------------------------------------------------|
| <b>Name</b>      | Mr Giulio Ferrante                                                            |
| <b>Age</b>       | 69 years                                                                      |
| <b>Social</b>    | Retired greengrocer; lives with wife; very sociable: club card games weekly   |
| <b>Diagnosis</b> | Parkinson's disease (2019): on levodopa, stable                               |
| <b>Referral</b>  | Dr Rahim, Apr 2026: 'quiet voice, family reports constant requests to repeat' |

**INITIAL ASSESSMENT: 28 April 2026**

- Hypokinetic dysarthria: reduced loudness (average conversational level 61 dB), monotone, mild articulatory imprecision; voice fades over sentences
- Sustained /a/: 9 seconds; intelligibility approx. 70% in conversation with unfamiliar listener
- Pt unaware voice is quiet: perceives himself as shouting when louder (typical of PD)
- Swallowing screen: no current concerns; early-warning signs discussed

**TREATMENT: intensive loudness-based program**

- 4 sessions/week for 4 weeks (16 sessions): completed 12 Jun 2026; excellent attendance + daily home practice
- High-effort loudness recalibration drills; carryover tasks: phone calls, ordering coffee, card games
- Wife involved for home practice and feedback

**OUTCOMES: reassessed 24 June 2026**

- Conversational loudness 68 dB: sustained across tasks; sustained /a/ 17 seconds
- Intelligibility approx. 90% in conversation; improved pitch variation
- Pt + wife report phone conversations much easier; participating confidently at club again

**PLAN / RECOMMENDATIONS**

- Daily maintenance exercise program (10 min): written program provided; weekly maintenance group offered
- Speech pathology review 3 months (Sept 2026); earlier if voice declines, e.g., after medication changes
- Suggest noting outcome at next neurology review; swallowing currently normal: please re-refer promptly if coughing at meals develops

## WRITING TASK

You are a speech pathologist in private practice at Clearspring Speech Pathology, Ashbourne. Mr Giulio Ferrante was referred to you by his neurologist for treatment of reduced speech loudness related to Parkinson's disease, and has now completed an intensive treatment program. Using the information in the case notes, write a letter back to the referring neurologist outlining treatment and outcomes. Address the letter to: Dr Nadia Rahim, Consultant Neurologist, Ashbourne Specialist Centre, 5 Clinic Parade, Ashbourne.

### 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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