**Final evaluation**

**REFERRAL LETTER**

A **referral letter** is a letter a doctor writes to refer a patient to another health institution or to a specialist asking for help in order to achieve the right diagnosis of the patient. Here are some hints that may help you to make a referral letter. Study them carefully and be ready to write your own referral letter. ( Send it to juliancm@infomed.sld.cu )

**-To: Pediatric Service January22th, 2021**

 **Dr. Moya**

HEADING

**-Dr. Moya**

**DATE**

**-Dear Dr. Moya**

**I have a case I´d like you to see. This is …..**

**I´d like you to see this case. This is…**

**INTRODUCTION**

**I would be most grateful if you were so kind as to see Mrs. Smith. This is…**

**I´d appreciate very much if you could asses this case. This is ….**

**Body** (case report)

**a 45 year old mechanic man who came to the consultation….**

**Thanks for your attention**

**Thank you very much for seeing this case**

**I really appreciate your help**

**CLOSURE**

**Thanks very much for your help**

**Yours sincerely/truly/ faithfully,**

 **Dr. Jones**

**EXAMPLES**

 **(English book page 22)**

**Clinical Details** *Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Dear \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*I would be most grateful if you were so kind as to see : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ This \_\_\_\_\_\_ year - old \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ gives a history of \_\_\_\_\_\_\_\_\_\_\_\_.*

*This has occurred several times before but never so severe.*

*( …)*

*Likely diagnosis: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Thank you for seeing her.*

*Yours sincerely,*

*Signature*: *м*ƒ هطضهض

**(English book page 22)**

TO : Jim Reynolds, MD January, 2008

 Head of Allergy Department.

 University Hospital

This is a l3-year –old Caucasian girl with a long history of bronchial asthma since age 5 who was seen at our service complaining of shortness of breath and dry hacking cough of 2 days‘ duration. On admission, the girl also complained of chest tightness and wheezing as well. Two days prior to this she had had a cold. Throughout her life she has experienced several asthma attacks mainly in winter time. She has been taking Ketotifen and Intal regularly. Her father has been an asthmatic patient since age 4 and her mother has been allergic to some medications. The patient doesn‘t smoke.

On the physical examination of the respiratory system, there were diminished breath sounds, dry inspiratory rales, intercostals retraction, and flaring of the nares. At the moment of her admission the respiratory rate increased; BP was 110/90 mm Hg. And the patient had a fever of 103 ºF. No abnormalities were found on the cardiovascular system .There was no cyanosis, but the patient seems to be very anxious.

The diagnosis of acute bronchial asthma was made on the basis on the clinical picture and the physical examination, Initially; She was given oxygen by mask and Salbutamol by inhalation. But the patient doesn‘t seem to respond well to treatment and we have decided to refer her to your specialized service for further evaluation of her condition.

We would appreciate very much if you could assess this patient and start her on the right treatment.

Please, keep us informed.

Thanks very much for your help.

Yours faithfully ,

*Gerard Valdivia, M.D*