

Our Ref
Date:



Mr/Ms Referring Manager

PRIVATE AND CONFIDENTIAL

Dear

Re: Employee Name DOB:
Address.

Thank you for referring the above named lady to Occupational Health; a home visit was carried out today. I understand Ms X is currently on long term sick leave after sustaining a fractured hip during a fall on 28/05/13; the purpose of the assessment is to establish her current health status and identify a potential return to work date, advice on supporting Ms X once back at work is also required. Ms X is aware of the general content of this report and I have her verbal consent to disclose any medical information contained herein to you.

Background

Ms X reported being an ordinarily healthy individual with no underlying condition, no history of serious illness/injury and no history of mental illness. She leads a fairly active lifestyle, sleeps well, has a normal appetite and denies personal/domestic stressors. Ms X tells me she is ordinarily a good attendee and enjoys her work. She takes prescribed medication for a chronic medical condition but this in my opinion should not affect her attendance/performance at work or her cognitive skills. The condition was diagnosed "years ago" is medically well managed and does not cause Ms X any after effects.

On 28/05/13 at 11.05am an ordinary day at work, Ms X was feeling well when she entered a doorway and "slipped on sticky tape on the floor" being used as a temporary repair to flooring; she fell onto her right hip/thigh and at the time did not feel pain. Appropriately the Health & Safety manager drove her home whereupon her husband took her to the A/E department; they discharged Ms X suggesting a soft tissue injury was present advising rest. However her symptoms of pain increased over the following week causing her GP to refer her for an X-Ray, a diagnosis of hair line hip fracture was made with a plan to treat her conservatively; rest and pain killing medication. Mr and Mrs X were advised by the hospital Specialist that she would be fit to fly to India for a holiday. Ms X was reviewed by the hospital Specialist yesterday and a further fit note for 4 weeks was issued.

Current Situation

I found Ms X clinically well, without symptoms and in good spirits; she was still resting her right leg but is mobile and independent. I understand although she flew without difficulty to her week's holiday in India the trip was somewhat spoilt because of pain in her right hip. Ms X advised me she has been given stronger pain killers which are now effective. Ms X is worried about her absence from work and feels she must be housebound as she is "off sick". I have encouraged and reassured her to gently mobilise; maybe a gentle swim, "potter to the shops" or see friends now and then. I have provided her with some bespoke advice about the danger of immobility and the need to prevent circulation problems, muscle wasting, blood clots and infections that are often attributable to

immobility and prolonged sitting. I have provided advice on sensible eating and exercising interspersed with rest as she recovers.

Specific Questions

Please accept the following advice in response to questions raised on the referral form:

Is this person fit for normal duties?

No. Ms X is recovering from a hairline hip fracture and the treatment for this is rest and pain killers gradually increasing her gentle exercise and weight bearing on the affected hip.

Does the employee have a health problem that prevents them carrying out their normal duties?

X-Ray has shown Ms X to have a hairline fracture of the right hip but it would be difficult to say definitively this was caused by her rather light fall (on 28/05/13) as hairline fractures can often be found in the hips of individuals over 50 because of age related osteoporosis. A hairline hip fracture is in fact a crack across the top of the thigh bone and from the clinical history taken today it seems Ms X has a 'non-displaced hairline hip fracture' that the Specialist considers to be stable hence allowing her trip to India.

Are they receiving treatment or undergoing investigations?

Ms X remains in secondary care, (reviewed yesterday) and is likely to be reviewed again in 6-8 weeks-time. Today she reports an improvement in her pain levels and I am encouraged by her independence and mobility during her holiday and today. She is under the care of her GP and I suggest she return for review if she recognises the return of pain or swelling in her right hip. Self-exercise and gradually increasing her walking is also part of her recovery programme and I have encouraged her to start this.

Will there be any restrictions on carrying out his/her duties from now on or when returning to work?

I am confident Ms X will be fit to return to work in 4 weeks-time; a brief phased return (2 weeks) maybe beneficial and I suggest this be negotiated with her manager. We discussed Ms X work at length and she did not identify any concerns about returning; I am confident no restrictions will be needed but a common sense attitude may be important!

Are there any adaptations to duties, equipment or work place which may enable the person to do their job?

None identified today but I suggest a pre return to work meeting with her manager so that any health limitations Ms X has on her return to work can be identified and allowed for.

Is there any help or treatment you could recommend?

Maintain contact with Ms X during her absence from a welfare perspective.

Keep her updated on any changes or developments in her role

Ensure Ms X does not return to a back log of work and unreasonable pressures

Regular managerial reviews following her return to ensure Ms X is coping satisfactorily

Consider any Health & Safety training that may be relevant to avoid similar incidents

Ms X to ensure she is eating and drinking sufficiently during her working day

I hope this report has been useful but if you wish to discuss it or I can be of any further assistance please do not hesitate to contact me.

Yours sincerely with kind regards

Specialist Practitioner Occupational Health
Valentine Occupational Health
NMC Pin No: