

LISTENING SUB-TEST – QUESTION PAPER

CANDIDATE NUMBER:

LAST NAME:

FIRST NAME:

OTHER NAMES:

Your details and photo will be printed here.

PROFESSION:

VENUE:

TEST DATE:

CANDIDATE SIGNATURE: _____

Passport Photo

TIME: APPROXIMATELY 40 MINUTES

INSTRUCTIONS TO CANDIDATES:

DO NOT open this question paper until you are told to do so.

One mark will be granted for each correct answer.

Answer **ALL** questions. Marks are **NOT** deducted for incorrect answers.

At the end of the test, you will have two minutes to check your answers.

At the end of the test, hand in this **Question Paper**.

DO NOT remove OET material from the test room.

HOW TO ANSWER THE QUESTIONS:

Part A: Write your answers on this **Question Paper** by filling in the blanks.

Example: Patient: Ray Sands

Part B & Part C: Mark your answers on this **Question Paper** by filling in the circle using a 2B pencil.

Example:

A

B

C



BLANK



Occupational English Test

Listening Test

This test has three parts. In each part you'll hear a number of different extracts. At the start of each extract, you'll hear this sound: --beep--

You'll have time to read the questions before you hear each extract and you'll hear each extract **ONCE ONLY**. Complete your answers as you listen.

At the end of the test you'll have two minutes to check your answers.

Part A

In this part of the test, you'll hear two different extracts. In each extract, a health professional is talking to a patient.

For **questions 1-24**, complete the notes with information you hear.

Now, look at the notes for extract one.



Extract 1: Questions 1-12

You hear a physiotherapist talking to a new patient called Ray Sands. For **questions 1-12**, complete the notes with a word or short phrase.

You now have thirty seconds to look at the notes.

Patient Ray Sands

- 18 months ago** • back injury sustained (lifting **(1)** _____)
- 1 year ago** • sciatica developed
- 6 months ago** • clear of symptoms
- Last month** • recurrence of symptoms

Patient's description of symptoms

- pain located in **(2)** _____
- pain described as **(3)** _____
- loss of mobility
- problems sleeping
- mentions inability to **(4)** _____ as most frustrating aspect
- **(5)** _____ sensation (calves)
- general numbness in affected area

Occupation • **(6)** _____ (involves travel/some manual work)

- Initial treatment**
- prescribed NSAIDs
 - application of **(7)** _____ (provided some relief)

- Referrals**
- **(8)** _____ (briefly)
 - sports injury specialist for manipulation and exercise programme

- Further treatment**
- epidural injections
 - **(9)** _____
 - electrical impulses
 - decided not to try **(10)** _____
 - patient attributes recovery to **(11)** _____

- Previous diagnosis**
- sciatica probably related to **(12)** _____
 - reports no history of pain in buttocks



Extract 2: Questions 13-24

You hear a consultant dermatologist talking to a patient called Jake Ventor. For **questions 13-24**, complete the notes with a word or short phrase.

You now have thirty seconds to look at the notes.

Patient Jake Ventor

Reason for referral • skin lesion

Patient's description of condition

- on the **(13)** _____ of his left hand
- preceded by **(14)** _____
- then **(15)** _____ form and join up
- surrounding erythema
- GP describes appearance of lesion as **(16)** _____
- normally resolves within two weeks

History of condition

- first experienced in 1990s when living in China
- also had a lesion on his **(17)** _____ – never recurred there
- recurs regularly on different parts of his left hand
- not becoming more **(18)** _____
- no apparent link to general state of health, **(19)** _____ or stress

Medical history

- **(20)** _____ on lower back in 2006 – no sign of recurrence
- reports no history of **(21)** _____

Information given

- advised that **(22)** _____ was unlikely to be effective
- told him to take care if the skin is **(23)** _____

Outcome

- says his quality of life isn't affected
- a **(24)** _____ will be arranged

That is the end of Part A. Now look at Part B.



Part B

In this part of the test, you'll hear six different extracts. In each extract, you'll hear people talking in a different healthcare setting.

For **questions 25-30**, choose the answer (**A**, **B** or **C**) which fits best according to what you hear. You'll have time to read each question before you listen. Complete your answers as you listen.

Now look at question 25.

25. You hear a nurse briefing her colleague about a patient.

What does she warn her colleague about?

- (A) The patient is allergic to some types of antibiotics.
- (B) Care must to be taken to prevent the patient from falling.
- (C) Oxygen may be needed if the patient becomes breathless.

26. You hear the manager of a care home for the elderly talking to the nursing staff.

He says that errors in dispensing medication to patients usually result from

- (A) interruptions while calculating dosages.
- (B) a failure to check for patients' allergies.
- (C) administering drugs late in the day.

27. You hear part of a morning briefing on a hospital ward.

What is the plan for the patient today?

- (A) Her emotional state will be carefully observed.
- (B) She will be transferred to a more specialised unit.
- (C) A social worker will come to see what help she needs.



28. You hear part of an ante-natal consultation at a GP practice.

What does the patient want to know about?

- Ⓐ the advisability of a home birth
- Ⓑ ways of avoiding post-natal depression
- Ⓒ what painkillers might be available during labour

29. You hear a trainee doctor telling his supervisor about a problem he had carrying out a procedure.

The trainee feels the cause of the problem was

- Ⓐ treatment administered previously.
- Ⓑ the patient's negative reaction.
- Ⓒ inappropriate equipment.

30. You hear a doctor talking to a teenage boy who has a painful wrist.

The doctor wants to establish whether

- Ⓐ a fracture may be misaligned.
- Ⓑ the swelling may be due to a sprain.
- Ⓒ there may be more than one bone affected.

That is the end of Part B. Now look at Part C.



Part C

In this part of the test, you'll hear two different extracts. In each extract, you'll hear health professionals talking about aspects of their work.

For **questions 31-42**, choose the answer (**A**, **B** or **C**) which fits best according to what you hear. Complete your answers as you listen.

Now look at extract one.

Extract 1: Questions 31-36

You hear an interview with a cardiologist called Dr Jack Robson, who's an expert on Chagas disease.

You now have 90 seconds to read **questions 31-36**.

31. Why does Dr Robson regard Chagas as a neglected disease?
- (A) because of the social groups it mainly affects
 - (B) because patients often don't realise they're infected
 - (C) because its impact is severe in a relatively small number of cases
32. Dr Robson says that concerns over Chagas in the USA are the result of
- (A) a rise in the number of people at risk of being infected with the disease.
 - (B) a greater awareness of how many people there have the disease.
 - (C) an increased prevalence of the insect which carries the disease.
33. A patient called Marisol recently asked Dr Robson to test her for Chagas because
- (A) she was worried about the health of any children she might give birth to.
 - (B) she wanted to know whether it was safe for her to donate blood.
 - (C) she thought she had symptoms associated with the disease.



34. What problem does Dr Robson identify in the case of a patient called Jennifer?

- Ⓐ an unwillingness to accept that she was ill
- Ⓑ an inability to tolerate the prescribed medicine
- Ⓒ a delay between the initial infection and treatment

35. What does Dr Robson say about his patient called Juan?

- Ⓐ The development of his illness was typical of people with Chagas.
- Ⓑ An incorrect initial diagnosis resulted in his condition worsening.
- Ⓒ The medication he took was largely ineffective.

36. Dr Robson thinks the short-term priority in the fight against Chagas is to

- Ⓐ increase efforts to eliminate the insects which carry the parasite.
- Ⓑ produce medication in a form that is suitable for children.
- Ⓒ design and manufacture a viable vaccine.

Now look at extract two.



Extract 2: Questions 37-42

You hear an occupational therapist called Anna Matthews giving a presentation to a group of trainee doctors.

You now have 90 seconds to read **questions 37-42**.

37. Anna says that the main focus of her work as an occupational therapist is
- (A) designing activities to meet the changing needs of each patient.
 - (B) making sure she supports patients in reaching their goals.
 - (C) being flexible enough to deal with patients of all ages.
38. When Anna first met the patient called Ted, she was
- (A) unable to identify completely with his attitude.
 - (B) optimistic that he would regain full mobility.
 - (C) mainly concerned about his state of mind.
39. Because Ted seemed uninterested in treatment, Anna initially decided to focus on
- (A) what he could achieve most easily.
 - (B) allowing him to try and help himself.
 - (C) making him come to terms with his injuries.
40. Anna feels that, in the long term, her therapy helped Ted because
- (A) it led him to become less emotional.
 - (B) it made him appreciate the need for patience.
 - (C) it showed him there was something to work towards.



41. Anna describes the day Ted had his plaster casts removed in order to

- Ⓐ demonstrate how slow any progress can seem to patients.
- Ⓑ illustrate the problems caused by raising a patient's hopes.
- Ⓒ give advice on what to do when patients experience setbacks.

42. Anna suggests that when patients like Ted recover enough to go home, they are often

- Ⓐ too ambitious in what they try to achieve initially.
- Ⓑ able to build on the work of the occupational therapist.
- Ⓒ held back by the over-protective attitude of family members.

That is the end of Part C.

You now have two minutes to check your answers.

THAT IS THE END OF THE LISTENING TEST



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