

ANSWER KEY- LISTENING, READING AND WRITING (MEDICINE) FOR SAMPLE TEST 2

LISTENING SUB-TEST – ANSWER KEY PARTS A, B & C

SAMPLE

LISTENING SUB-TEST – ANSWER KEY

PART A: QUESTIONS 1-12

- 1 heartburn (after meals)
- 2 bloating
- 3 constipation
- 4 (so) unpredictable
- 5 migraines
- 6 accountant
- 7 anxious
- 8 energy
- 9 fibre
- 10 dairy (products)
- 11 (extensive) food allergy tests
- 12 anti(-)depressants **OR** (an) anti(-)depressant

PART A: QUESTIONS 13-24

- 13 stiff
- 14 (a) heat pad **OR** (a) heatpad
- 15 physio(therapy)
- 16 untreatable
- 17 chiropractic treatment
- 18 Baclofen
- 19 (an orthopaedic/orthopedic) chair **OR** (a) chair
- 20 botulinum toxin **OR** botox **OR** BTX
- 21 swallowing
- 22 (various) oral medications/meds
- 23 memory loss **OR** loss of memory **OR** amnesia
- 24 (a) pump

LISTENING SUB-TEST – ANSWER KEY

PART B: QUESTIONS 25-30

- 25 A his blurred vision
- 26 B The patient is worried about a procedure.
- 27 C patients not discussing all their concerns when meeting the doctor
- 28 C have the fewest risks for the patient.
- 29 B benefit from a specific anaesthetic procedure.
- 30 B the financial impact that they are likely to have

PART C: QUESTIONS 31-36

- 31 C to raise awareness of the symptoms of the illness
- 32 B felt that he was too fit and well to be in need of it.
- 33 B found it hard to cope with the wait for some results.
- 34 A He found himself reacting in a way he hadn't anticipated.
- 35 C a reluctance to talk about the embarrassing aspects of treatment
- 36 A offer patients more personal aftercare.

PART C: QUESTIONS 37-42

- 37 B come from a wide variety of backgrounds.
- 38 B enable them to deal with patients more quickly.
- 39 C fails to distinguish between different possible triggers.
- 40 C they may interact adversely with patients' other medication.
- 41 A the unsuitability of opioids for patients with particular conditions.
- 42 C he lacked experience in dealing with problems like hers.

END OF KEY

READING SUB-TEST – ANSWER KEY PART A



READING SUB-TEST – ANSWER KEY

PART A: QUESTIONS: 1 – 20

- 1 D
- 2 C
- 3 B
- 4 D
- 5 A
- 6 B
- 7 C
- 8 headache(s)
- 9 hepatitis C **OR** hep C
- 10 ALF **OR** acute liver failure
- 11 renal failure (**NOT**: renal dysfunction)
- 12 methionine
- 13 (activated) charcoal
- 14 speed of absorption
- 15 right upper quadrant
- 16 nausea **OR** vomiting **OR** nausea and vomiting **OR** vomiting and nausea
- 17 enzyme-inducing
- 18 100 **OR** a hundred **OR** one hundred
- 19 12 **OR** twelve
- 20 supportive (treatment)



READING SUB-TEST – ANSWER KEY PARTS B & C

READING SUB-TEST – ANSWER KEY

PART B: QUESTIONS 1-6

- 1 C can delegate responsibility for the cupboard keys to another ward.
- 2 A give a valid reason for conducting it.
- 3 A help maximise its efficiency.
- 4 B They enable a patient to receive more of the prescribed medicine.
- 5 A benefits to patients of using bedrails can outweigh the dangers.
- 6 A They may be useful for patients who are not fully responsive.

PART C: QUESTIONS 7-14

- 7 A It was entirely preventable.
- 8 C Staff focus their attention on a limited number of issues.
- 9 A understands why healthcare employees have to make certain choices.
- 10 D The information recorded on them does not always reflect reality.
- 11 D lack of consistency
- 12 B It isn't clear who ought to be tackling the situation.
- 13 B illustrate a fundamental obstacle.
- 14 D the approach they take to deal with challenges

PART C: QUESTIONS 15-22

- 15 C to illustrate the strange nature of migraine aura
- 16 B did not result in a definitive conclusion.
- 17 C the simultaneous occurrence of CSD and aura
- 18 A migraine could cause a structural change.
- 19 D the suggestion that infant colic may be linked to migraine
- 20 A It fails to filter out irrelevant details.
- 21 B a more positive aspect of the research.
- 22 B They are unlikely to be permanent.

WRITING SUB-TEST – SAMPLE RESPONSE

INSTRUCTIONS TO CANDIDATES

You must write your answer for the Writing sub-test in the **Writing Answer Booklet**.

You must **NOT** remove OET material from the test room.

Occupational English Test**WRITING SUB-TEST: MEDICINE****SAMPLE RESPONSE: LETTER OF REFERRAL**

Dr Lisa Smith
Endocrinologist
City Hospital
Newtown

10 February 2019

Dear Dr Smith,

Re: Mrs Priya Sharma
DOB: 08/05/58

Thank you for seeing Mrs Priya Sharma, a type 2 diabetic, for further management of her blood sugar levels.

Mrs Sharma was diagnosed with NIDDM in 1999. She has been monitoring her BP and sugar levels at home since then. She has a strong family history of diabetes and is allergic to penicillin. Her weight is steady (BMI of 24) and an eye examination in October 2017 indicated no issues.

She initially presented on 29/12/18 concerned that her blood sugar levels were no longer well controlled. Her BP that day was 155/100 and her recent sugar levels were ranging between 6 and 18mmol/L. Her medication included metformin 500mg b.d. and glipizide 5mg x2 mane. I instituted Atacand 4mg x1 mane.

A pathology report received on 05/01/2019 showed HbA1c levels of 10% and GFR greater than 60ml/min. Her cholesterol was high (6.2).

On 12/01/19, I prescribed Lipitor 20mg mane. I also increased her metformin regime to 750mg b.d. Since then, her home-monitored BP has been within range and her cholesterol has fallen to 3.2. Her non-fasting blood sugars are 7-8mmol/L, but her fasting blood sugar levels are usually in the 16+ range, which is high. Therefore, I am referring her to you for your specialist advice.

Yours sincerely,

Doctor