

ANSWER KEY- LISTENING, READING AND WRITING (NURSING) FOR SAMPLE TEST 3

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

SAMPLE

LISTENING SUB-TEST – ANSWER KEY

PART A: QUESTIONS 1-12

- 1 left knee
- 2 (an) insect bite
- 3 cholesterol
- 4 excruciating
- 5 drive
- 6 septicaemia / septicemia / blood poisoning
- 7 (playing) rugby
- 8 anti(-)inflammatories / NSAIDs
- 9 (awful) diarrhoea / diarrhea
- 10 liquid morphine / morphine sulphate
- 11 (an) ice pack
- 12 skin rash

PART A: QUESTIONS 13-24

- 13 jet lag
- 14 meningitis
- 15 Malarone
- 16 sweating / diaphoresis
- 17 bad headache / severe headache / splitting headache
- 18 jaundice
- 19 (really) racing
- 20 eyes
- 21 stomach pain / abdominal pain / abdominal discomfort
- 22 hepatitis / hep A
- 23 cold sores (on [her] [upper] lip) / cold sores (all over [her] [upper] lip) / Herpes labialis
- 24 lumpectomy

LISTENING SUB-TEST – ANSWER KEY

PART B: QUESTIONS 25-30

- 25 A worried that he may have damaged a filling
- 26 B reassuring them that their workload won't increase
- 27 B possible post-operative side effects
- 28 C treating the side-effects of an operation
- 29 A prompt preparation is the most effective way to minimise patient risk.
- 30 B impressed by how little time he spent in the hospital.

PART C: QUESTIONS 31-36

- 31 B He compared it to the experience of a relative dying.
- 32 A Under-reporting by patients makes it hard to know how frequent it is.
- 33 B is fixed in a strange position.
- 34 C reported pain levels that impact on their daily lives.
- 35 C made to move a simulation of the missing limb in their minds.
- 36 B it can be used by patients after discharge.

PART C: QUESTIONS 37-42

- 37 A is fairly common so should be more accurately diagnosed.
- 38 C the effects of smoking.
- 39 B diagnosis of HS may require a full patient history.
- 40 A may recur after disappearing for many years.
- 41 A reflected a lack of sympathy and understanding.
- 42 B restrict their intake of dairy products.

READING SUB-TEST – ANSWER KEY PART A

SAMPLE

READING SUB-TEST – ANSWER KEY

PART A: QUESTIONS 1-20

- 1 B
- 2 C
- 3 D
- 4 D
- 5 A
- 6 tissue damage
- 7 scarring
- 8 sensation
- 9 hot clothing
- 10 hypothermia
- 11 tetanus
- 12 blisters
- 13 antibiotics
- 14 thickness
- 15 2 / two
- 16 20ml
- 17 10% / ten percent
- 18 Tramadol
- 19 orally
- 20 72 hours

READING SUB-TEST – ANSWER KEY PARTS B & C

SAMPLE

READING SUB-TEST - ANSWER KEY

PART B: QUESTIONS 1-6

- 1 A failure to do so would put other people in danger.
- 2 B ensure that the patient's personal care plan is also transferred.
- 3 C care providers being unaware of an issue.
- 4 B can order medicines from the pharmacy in some cases.
- 5 C the ICU is fully responsible for a patient in their care.
- 6 B speculating on the possible causes of the incident.

PART C: QUESTIONS 7-14

- 7 C can cause debilitating symptoms.
- 8 D The distinction between them and allergies is not widely appreciated.
- 9 C why the skin-prick test may not accurately diagnose food intolerance.
- 10 A the factors triggering an allergic reaction still remain unclear.
- 11 B They directly contradict each other.
- 12 D the order of events most commonly found prior to allergic attacks
- 13 C It may be avoidable if certain precautions are taken.
- 14 A attempts to improve eating habits.

PART C: QUESTIONS 15-22

- 15 A reference to some recent findings relating to heart disease
- 16 D reduced growth.
- 17 A Their focus has been too narrow.
- 18 B to assess the relative significance of two risk factors for newborns
- 19 A Lower-income mothers generally give birth to lower weight babies.
- 20 D Poorer residents have a genetic advantage over those with higher incomes.
- 21 C an explanation for a finding.
- 22 D the speed with which results are seen

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: NURSING****SAMPLE RESPONSE: LETTER OF TRANSFER**

Community Health Nurse
Eastern Community Health Centre
456 East Street
Centreville

22 January 2019

Dear Nurse

Re: Mr Peter Dunbar
DOB 18.03.1932

Thank you for accepting Mr Dunbar into your care for the regular monitoring of his diabetes and encouragement to comply with his medication and dietary regimens. Mr Dunbar is moving to Centreville to live with his daughter.

Since October 2018, Mr Dunbar has shown signs of diabetic neuropathy and consequently mobilises with a walking stick. His type 2 diabetes is controlled by metformin and through his diet, however, he remains resistant to any form of treatment, and has not been compliant with his medication regimen, reporting poor memory as the primary cause of his neglect. On occasion he also double doses. Contrary to advice, Mr Dunbar has continued to consume excessive amounts of alcohol, fatty foods, salt and sugar since the death of his wife last year, contributing to his current condition. While his daughter will now be cooking for him, she will require some guidance related to his needs.

In June 2018, he suffered a myocardial infarction for which he was hospitalised at City Hospital in Newtown. He was diagnosed with atrial fibrillation on the same admission and was subsequently prescribed warfarin and sotalol. His hypertension is controlled by Ramipril. As with his other medication, Mr Dunbar is intermittent in his compliance.

Thank you for your continued management of this patient.

Yours faithfully,

Nurse