

Part A – Text booklet

Sample Test

You must record your answers for **Part A** in the **Part A – Answer booklet** using **pen or pencil.**

Please print in BLOCK LETTERS

Candidate number	
Family name	
Other name(s)	
City	
Date of test	
Candidate's signature	

YOU MUST NOT REMOVE OFT MATERIAL FROM THE TEST ROOM

The OET Centre

GPO Box 372 Melbourne VIC 3001 Australia Telephone: +613 8656 4000 Facsimile: +613 8656 4020 www.occupationalenglishtest.org

Reading: Part A – Text booklet

Instructions

TIME LIMIT: 15 MINUTES

- Complete the summary on pages 1 and 2 of Part A Answer booklet using the information in the four texts (A1–A4) below.
- You <u>do not</u> need to read each text from beginning to end to complete the task. You should scan the texts to find the information you need.
- Gaps may require 1, 2 or 3 words. Answer ALL questions. Marks are NOT deducted for incorrect answers.
- You should write your answers next to the appropriate number in the right-hand column.
- Please use **correct spelling** in your responses. **Do not** use abbreviations unless they appear in the texts.

Text A1

Vasectomy: Texts

Title: Risk of Prostate Cancer After Vasectomy (2003)

Authors: Krishnamurthy, McLeod & Williams

Context: Vasectomy is a common method of contraception, but concern exists about a reported association with risk of prostate cancer.

Objective: To examine whether vasectomy increases risk of prostate cancer.

Design, Setting, and Participants: National population-based case-control study of 923 new cases of prostate cancer among men aged 40 to 74 years from the Australia Cancer Registry who were on the general electoral roll. Controls (n = 1224) were randomly selected from the general electoral roll, with frequency matching to cases in 5-year age groups. Cases (3-15 months after diagnosis) and controls were interviewed by telephone over a 3-year period.

Main Outcome Measures: Relative risk (RR) of prostate cancer for men who had had a vasectomy vs those who had not.

Results: There was no association between prostate cancer and vasectomy (RR, 0.92; 95% confidence interval [CI], 0.75-1.14) nor with time since vasectomy (RR, 0.92; 95% CI, 0.68-1.23 for ≥25 years since vasectomy). Adjustment for social class, geographic region, religious affiliation, and a family history of prostate cancer did not affect these RRs.

Conclusions: Vasectomy does not increase the risk of prostate cancer, even after 25 years or more.

Text A2

Vasectomy Statistics from Britain (2008)

men aged 16-69: percentage who had had a vasectomy (2001-2008)

2001	2002	2003	2004	2005	2006	2007	2008
17	15	18	17	18	18	17	18

percentage who had had a vasectomy: by age (2008)

16–29	30–34	35–39	40–44	45–49	50–54	55–64	65–69
I	6	15	19	20	30	31	30

Text A3

Male sterilisation (vasectomy) – FAQs for patients

- **Q:** How will I feel after the operation?
- **A:** Your scrotum will probably be bruised, swollen and painful. Wearing tight-fitting underpants, to support your scrotum, day and night for a week may help. You should avoid strenuous exercise for at least a week. For most men pain is quite mild and they do not need any further help. The doctor or nurse should give you information about how to look after yourself.
- **Q:** Are there any serious risks or complications?
- **A:** Research shows that there are no known serious long-term health risks caused by having a vasectomy.
 - Occasionally, some men have bleeding, a large swelling, or an infection. In this case, see your doctor as soon as possible.
 - Sometimes sperm may leak out of the tube and collect in the surrounding tissue as sperm granulomas. These may cause inflammation and pain immediately, or a few weeks or months later. If this happens, they can be treated.
 - Some men may experience ongoing pain in their testicles. This is known as chronic pain. Treatment for this is often unsuccessful.
 - The large majority of men having a vasectomy will have a local anaesthetic but sometimes a general anaesthetic is used. All operations using a general anaesthetic carry some risks, but serious problems are rare.
- **O:** Can sterilisation be reversed?
- **A:** Sterilisation is meant to be permanent. There are reversal operations but they are not always successful. The success will depend on how and when you were sterilised. Reversal can be difficult and may cost a great deal because of this.

Text A4

Reverse vasectomy: a case study

Gary married young and had three children in his twenties. He had a vasectomy at 31. Then his first marriage broke down. He met Sarah and they decided they also wanted a family. Gary paid to have a reverse vasectomy operation but it wasn't successful. A second operation with a different urologist did succeed, and Sarah is now pregnant with their first child. Gary felt that the original vasectomy was the right thing to do at the time, but with hindsight he now believes men under 40 should not rush into having one if there is even the smallest chance they may want a child in the future.



FOR OFFICE US	SE ONLY
ASSESSOR NO.	
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Part A – Answer booklet





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Reading: Part A - Answer Booklet

Instructions

TIME LIMIT: 15 MINUTES

- Complete the following summary using the information in the four texts, A1-A4, provided on pages 2 and 3 of the Text Booklet.
- You <u>do not</u> need to read each text from beginning to end to complete the task. You should scan the texts to find the information you need.
- Gaps may require 1, 2 or 3 words. You will not receive any marks if you write more than 3 words.
- You should write your answers next to the appropriate number in the <u>right-hand column</u>.
- Please use **correct spelling** in your responses. **Do not** use abbreviations unless they appear in the texts.

Summary	Answers
Vasectomy	1.
One method of contraception is male sterilisation or vasectomy. Statistics for 2008 showed that	2.
₍₁₎ of adult men aged under ₍₂₎ in Britain had undergone a vasectomy and that	3.
this proportion had beenduring the previous five years.	4.
Patients are informed that vasectomy is a	5.
procedure $\dots_{(4)}$ serious risks or complications. After the operation, which is $\dots_{(5)}$ carried	6.
out under local anaesthetic, the man will often experience pain from bruising and swelling of	7.
his ₍₆₎ General advice is to wear ₍₇₎ to provide support. Physical exertion should ₍₈₎	8.
for seven days as a minimum. If the site of the operation becomes(9)or greatly swollen,	9.
or if there is bleeding, the patient should seek immediate medical attention. After the operation	10.
and for several months subsequently,(10) may form if there is any leakage of sperm into the	11.
₍₁₁₎ ; these can be painful but are ₍₁₂₎	12.

2 TURN OVER

Summary	Answers
Men with vasectomies have been shown	13.
(13) at a higher risk of prostate cancer.	14.
Researchers in Australia contacted(14) men aged between 40 and 75 who had been	
diagnosed with ₍₁₅₎ in the preceding	15.
₍₁₆₎ months. A control group of men with a matching ₍₁₇₎ profile was also interviewed.	16.
The length of time since(18) did not affect the relative risk, nor did other possible factors	17.
(e.g ₍₁₉₎ of prostate cancer, social class, ₍₂₀₎ and/or location).	18.
Vasectomy is not intended to be a(21) change. Consequently, reversal is difficult and	19.
this can make it ₍₂₂₎ A successful outcome cannot be guaranteed. In one case, a man	20.
had to have ₍₂₃₎ before his vasectomy was properly reversed. Having already fathered	21.
₍₂₄₎ by the age of 30, he had believed his original decision to have a vasectomy was	22.
responsible. However, he now advises men in their ₍₂₅₎ to wait unless they are absolutely	23.
certain theya child. Statistics from Britain for 2008 seem to ₍₂₇₎ this advice: the percentage of men who had had a vasectomy	24.
changes gradually from $\dots_{(28)}\dots$ of those aged 16-29 to $\dots_{(29)}\dots$ of those aged 50-54.	25.
10 20 to ₍₂₉₎ of those aged 60 64.	26.
	27.
	28.
	29.
	TOTAL SCORE (Marker's use only)

END OF PART A
THIS ANSWER BOOKLET WILL BE COLLECTED



Part A – Answer key

Vasectomy

Sample Test

The following conventions have been followed in preparing the key:

- / indicates an acceptable alternative within an answer
- OR indicates an acceptable (complete) alternative answer
- () words, figures, or ideas in brackets are not essential to the answer they are also not a sufficient substitute on their own for the main idea
- NOT indicates an unacceptable answer or part of an answer

No other answers except those included in the key will be considered acceptable. Responses that have been incorrectly spelt will not be awarded any marks, neither will answers that contain more than three words.

Part A: Vasectomy

Answer key

Total of 29 questions

1	18% OR 18 percent
2	70 (years old)
3	(relatively/fairly) steady/constant/level/unchanged/stable/consistent OR almost/roughly the same OR (very/quite) similar OR maintained OR sustained
4	free from/of (any) (known) OR without (any) (known) OR with no (known)
5	normally OR usually OR generally OR in most cases OR most often
6	scrotum
7	tight(-fitting) underpants/underwear
8	be avoided
9	infected
10	(sperm) granulomas
11	surrounding tissue(s)
12	treatable
13	not to be OR to not be
14	923
15	prostate cancer
16	3-15 OR 3 to 15 OR three to fifteen
17	age
18	(a/any) vasectomy OR vasectomy/ surgery (was performed/done)
19	(a) family history
20	religion OR religious affiliation
21	temporary OR reversible
22	(quite/very) expensive OR costly
23	two operations/(surgical) procedures/surgeries
24	three/3 children
25	(twenties and) thirties OR (20s and) 30s OR (20's and) 30's
26	won't/wouldn't (ever) want/have OR will/would not want/have OR will/would never want/have OR 'll not/never want/have OR don't (ever) want OR do not want OR never want
27	support OR confirm OR verify OR reflect OR corroborate OR correspond with
28	1% OR 1 percent
29	30% OR 30 percent