

**Passport Photo** 

# **LISTENING SUB-TEST** – QUESTION PAPER

CANDIDATE NUMBER:

LAST NAME:

FIRST NAME:

MIDDLE NAMES:

PROFESSION:

VENUE:

TEST DATE:

#### CANDIDATE DECLARATION

By signing this, you agree not to disclose or use in any way (other than to take the test) or assist any other person to disclose or use any OET test or sub-test content. If you cheat or assist in any cheating, use any unfair practice, break any of the rules or regulations, or ignore any advice or information, you may be disqualified and your results may not be issued at the sole discretion of CBLA. CBLA also reserves its right to take further disciplinary action against you and to pursue any other remedies permitted by law. If a candidate is suspected of and investigated for malpractice, their personal details and details of the investigation may be passed to a third party where required.

Candidate details and photo will be printed here.

CANDIDATE SIGNATURE:

#### 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.

You must 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)

) C





# **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 that you hear.

Now, look at the notes for extract one.



# Extract 1: Questions 1-12

You hear a gastroenterologist talking to a patient called Andrew Taylor. For **questions 1-12**, complete the notes with a word or short phrase that you hear.

You now have thirty seconds to look at the notes.

Patient	Andrew Taylor	
Background	• has had (1)	_ over long period
	reports frequent (2)	in the last year
	most recently (3)	has become a problem
	word used to describe symptoms – (4)	
	pre-existing skin condition aggravated	
	frequent (5)     bowel condition	_ patient didn't initially link these to
Effects of condition	n on everyday life	
	• works as an (6)	
	situation at work means patient is (7)	
	complains of lack of (8)	
	has noticed an increase in insomnia	
Diet	claims to be consuming sufficient (9)	
	claims to keep hydrated	
	has experimented with excluding (10)	from diet
	<ul> <li>very slight reduction in caffeine intake</li> </ul>	
	has undergone (11) problematic	– no indications of anything
Medication	has taken an anti-spasmodic – not very effective	
	now trying (12)	



# Extract 2: Questions 13-24

You hear a hospital neurologist talking to a new patient called Kathy Tanner. For **questions 13-24**, complete the notes with a word or short phrase that you hear.

You now have thirty seconds to look at the notes.

Patient Kathy Tanner

#### Background to condition

- experienced discomfort and a (13) \_\_\_\_\_\_ feeling in neck whilst driving
- osteopathy exacerbated problem
- used (14)\_\_\_\_\_\_to relieve symptoms in neck

#### Further developments in condition and diagnosis

- describes a pulling sensation (dragging her head to the right)
- doctor recommended (15)
- diagnosis of spasmodic torticollis (ST)
  - condition described as (16)
  - resulted in feelings of depression

# Treatment history

(a) from home • some months of (17)

- visited two neurologists without success
- prescribed (18) (anti-spasmodic)
- joined an ST support group
- bought (19) to provide extra support

# (b) from university hospital

- treatment using (20) \_\_\_\_\_\_ injections
  - side effects included difficulties (21)\_\_\_\_\_
  - reports treatment as increasingly ineffective
- supplemented by (22)\_\_\_\_\_
- experienced confusion and (23)
- · analgesic relief: morphine self-administered via

(24)\_\_\_\_\_



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.

Fill the circle in completely. Example: ©

**(**A)

25. You hear an optometrist talking to a patient who's trying contact lenses for the first time.

What is the patient concerned about?

- A his blurred vision
- B soreness in his eyes
- c) how to remove the lenses
- 26. You hear a nurse asking a colleague for help with a patient.

Why does the nurse need help?

- (A) The patient's condition has deteriorated.
- (B) The patient is worried about a procedure.
- C The patient is reporting increased pain levels.
- 27. You hear a senior nurse talking about a new initiative that has been introduced on her ward.

What problem was it intended to solve?

- (A) patients' confusion over information given by the doctor
- (B) relatives not being able to discuss issues with the doctor
- c) patients not discussing all their concerns when meeting the doctor



28. You hear two radiologists talking about the type of scan to be given to a patient.

They agree to choose the method which will

- (A) allow them to see the whole of the appendix.
- (B) probably give the most accurate results.
- (c) have the fewest risks for the patient.
- **29.** You hear part of a surgical team's briefing.

The male surgeon suggests that the patient could

- (A) require specialist equipment during surgery.
- (B) benefit from a specific anaesthetic procedure.
- (c) be at risk of complications from another health issue.
- **30.** You hear a senior research associate talking about a proposal to introduce inter-professional, primary healthcare teams.

What hasn't been established about the teams yet?

- (A) the best way for collaboration to take place
- (B) the financial impact that they are likely to have
- (c) the aspects of medical care they are best suited to

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.

Fill the circle in completely. Example: 🖲

(A)

#### Extract 1: Questions 31-36

You hear a presentation by a specialist cancer nurse called Sandra Morton, who's talking about her work with prostate cancer patients, including a man called Harry.

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

- 31. What does Sandra Morton see as the main aim in her work?
  - (A) to inform patients about the different treatments on offer
  - (B) to publicise the availability of tests for the condition
  - (c) to raise awareness of the symptoms of the illness
- 32. When Harry was offered a routine health check at his local surgery, he initially
  - (A) resisted the idea due to his wife's experience.
  - (B) felt that he was too fit and well to be in need of it.
  - (c) only agreed to attend because his doctor advised him to.
- 33. During Harry's investigations for prostate cancer at a hospital clinic, he
  - (A) felt part of the examination procedure was unpleasant.
  - (B) found it hard to cope with the wait for some results.
  - (c) was given false hope by a preliminary blood test.



- 34. What was Harry's response to being diagnosed with prostate cancer?
  - (A) He found himself reacting in a way he hadn't anticipated.
  - (B) He was unconvinced by the prognosis he was given.
  - (c) He immediately researched treatment options online.
- 35. What typical patient response to the illness does Sandra mention?
  - (A) an unwillingness to commence appropriate medication
  - (B) a failure to seek advice regarding different treatment options
  - c a reluctance to talk about the embarrassing aspects of treatment
- **36.** Sandra believes that community follow-up clinics are important because they
  - (A) offer patients more personal aftercare.
  - B are proven to be less traumatic for patients.
  - c provide rapid treatment for patients developing new symptoms.

#### Now look at extract two.



# Extract 2: Questions 37-42

You hear a neurologist called Dr Frank Madison giving a presentation about the overuse of painkillers.

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

- 37. In Dr Madison's experience, patients who become addicted to painkillers
  - (A) are more likely to move on to hard drugs.
  - (B) come from a wide variety of backgrounds.
  - c usually have existing psychological problems.
- 38. Dr Madison thinks some GPs over-prescribe opioid painkillers because these
  - (A) have a long-standing record of success.
  - (B) enable them to deal with patients more quickly.
  - c) represent a relatively inexpensive form of treatment.
- **39.** Dr Madison regrets that management of acute pain
  - (A) is often misunderstood by the general public.
  - B receives inadequate attention in medical training.
  - **(c)** fails to distinguish between different possible triggers.
- 40. Dr Madison's main concern about painkillers being readily available is that
  - (A) patients may build up a resistance to them.
  - (B) they may be taken in dangerous amounts by patients.
  - c) they may interact adversely with patients' other medication.



- 41. Dr Madison refers to the case of an osteoarthritic patient called Ann to highlight
  - (A) the unsuitability of opioids for patients with particular conditions.
  - (B) the effect on patients' working lives of dependence on painkillers.
  - c) the extreme fear patients may have of living without pain medication.
- 42. Ann's GP initially failed to identify her dependence because
  - (A) she managed to conceal its physical effects from him.
  - (B) he was unaware that she had another source of drugs.
  - c he lacked experience in dealing with problems like hers.

#### That is the end of Part C.

You now have two minutes to check your answers.

# THAT IS THE END OF THE LISTENING TEST

