

LISTENING SUB-TEST – QUESTION PAPER

CANDIDATE NUMBER:

LAST NAME:

FIRST NAME:

MIDDLE NAMES:

PROFESSION:

VENUE:

TEST DATE:

Candidate details and photo will be printed here.

Passport Photo

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 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)
(B)
(C)



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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 paediatrician talking to the mother of a six-year-old boy called Daniel. 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 Daniel Lemmings (6 years old)

Description of physical complaint

- skin on Daniel's hands is both **(1)** _____
- Daniel's pain described as **(2)** _____
 - no itching or scratching
 - occasionally accompanied by **(3)** _____
- Daniel's condition began last **(4)** _____
- Daniel's symptoms worsened by **(5)** _____

Treatments already tried

- over-the-counter remedies (e.g., skin products)
- home remedies, e.g.:
 - wearing silk gloves at night
 - treating with **(6)** _____
- uses his sister's **(7)** _____
- seems to improve during the **(8)** _____

Background information

- Daniel has no problems at school
- People describe Daniel's character as **(9)** _____
- Daniel has tantrums
 - finds any **(10)** _____ hard to handle
- Daniel is overly worried about **(11)** _____ on his food

Mother's concerns

- She worries he may be developing **(12)** _____
- She wants advice on how to deal with the situation



Extract 2: Questions 13-24

You hear a consultant gastroenterologist talking to a patient called Vincent Sykes. For **questions 13-24**, complete the notes with a word or short phrase that you hear.

You now have 30 seconds to look at the notes.

Patient Vincent Sykes

- Symptoms**
- loss of weight
 - stomach feels **(13)** _____ soon after starting meals
 - **(14)** _____ sensation when swallowing food
 - stools are pale and **(15)** _____
 - stomach described as **(16)** _____
 - some jaundice
 - says his skin feels **(17)** _____
 - extreme fatigue
 - pain in stomach area, spreading to back
 - pain is worse when he's **(18)** _____
 - he describes pain as feeling like **(19)** _____

- Background**
- has always liked **(20)** _____ foods
 - now retired from work
 - employed 30 years in a **(21)** _____
 - used to smoke 20 cigarettes daily
 - moderate drinker

- Medical history**
- **(22)** _____ infection two years ago
 - last year diagnosed with **(23)** _____
 - blood clot in leg six months ago (treated with warfarin)
 - last month diagnosed with **(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
 B
 C

25. You hear a palliative care nurse talking to an elderly patient.

What is the patient most concerned about?

- A a change in her weight
 B her new treatment regime
 C some abdominal discomfort

26. You hear a pharmacist talking to a customer who is in pain.

What is the customer seeking help about?

- A an increase in her arthritic pain
 B discomfort due to a bite splint
 C a potential drug interaction

27. You hear a dietitian talking to a patient about a new treatment plan for diabetes.

How does the patient react to the plan?

- A She's unsure whether she could manage it.
 B She wonders how effective it would be.
 C She's keen to give it a try.



28. You hear a senior nurse advising a trainee about a condition called venous thromboembolism (VTE).

She stresses that the trainee should

- (A) pay special attention to identifying the symptoms.
- (B) ask for help immediately whenever there are any concerns.
- (C) follow the standard treatment procedure whenever possible.

29. You hear an eye specialist talking to her patient.

What is the specialist doing?

- (A) reassuring him about the prognosis for his vision
- (B) expressing concern about the extent of his recovery
- (C) confirming that his experience matches the clinical evidence

30. You hear a cardiologist updating hospital colleagues about trials of urine testing.

He reports that urine testing of hypertensive out-patients has led to

- (A) improved adherence to BP treatment.
- (B) a reduction in the level of BP medication needed.
- (C) the offer of optional BP therapies to high-risk groups.

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
 B
 C

Extract 1: Questions 31-36

You hear a micro-biologist called Dr Jane Finn giving a presentation about the overuse of antibiotics

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

31. What reason does Dr Finn give for the rise in antibiotic use in the decade to 2010?
- A the ready availability of the drugs online
 - B the time pressures that doctors were working under
 - C the fear felt by doctors of failing to treat possible infections
32. What reservation does Dr Finn have about a recent fall in the number of antibiotics prescribed in the UK?
- A It seems to have no effect on drug resistance rates.
 - B It may be causing actual harm to certain patients.
 - C It doesn't reflect an even pattern of distribution.
33. Dr Finn criticises recent news reports on completing antibiotic treatment because
- A they are based on inaccurate evidence.
 - B they are likely to leave readers confused.
 - C they fail to differentiate between infections.



34. Dr Finn mentions the incidence of MRSA in UK hospitals to exemplify how
- (A) infections can spread through a range of channels.
 - (B) infection control requires a wide-ranging approach.
 - (C) an infection develops resistance to different antibiotics.
35. What does Dr Finn find most shocking about antibiotics being used on livestock?
- (A) They are routinely consumed by healthy animals.
 - (B) There is a probable link with drug resistance in humans.
 - (C) The total amount given to animals exceeds that used by humans.
36. Dr Finn welcomes the progress that has been made in the
- (A) production of new antibiotics by pharmaceutical firms.
 - (B) control of levels of antibiotic waste in the environment.
 - (C) selective use of antibiotics to target specific infections.

Now look at extract two.



Extract 2: Questions 37-42

You hear a rheumatologist called Michael Evans talking about osteoarthritis.

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

37. What does Michael suggest about helping patients with osteoarthritis?
- (A) It's easiest when the patient is young.
 - (B) It may involve dealing with a range of problems.
 - (C) It will be more difficult if the condition is genetic.
38. Why does Michael mention obesity in relation to osteoarthritis in the hands?
- (A) to show how assumptions about it can be wrong
 - (B) to explain the role of fat molecules in its development
 - (C) to illustrate how attention to diet can alleviate the symptoms
39. What does Michael say about osteoarthritis of the knee?
- (A) People with the condition are unlikely to benefit from running.
 - (B) Running is probably effective as a means of preventing it.
 - (C) Marathon runners should take precautions to avoid it.
40. What does Michael say about damage to the cruciate ligament amongst netball players?
- (A) Professional players are more likely to suffer this kind of injury.
 - (B) This can be avoided by training players how to move correctly.
 - (C) Players who receive surgery for this are at higher risk of osteoarthritis.



41. What does Michael say about the use of imaging techniques to diagnose knee osteoarthritis?

- (A) It may fail to reveal the full extent of the problem.
- (B) An unexpected cause for the pain may be identified.
- (C) The results are unlikely to affect the treatment given.

42. What does Michael say about recent developments in osteoarthritis treatment?

- (A) New drugs may be able to restore joint tissues.
- (B) Stem cell injections have only a short-term effect on the joint.
- (C) Lifestyle changes have reduced the need for joint replacements.

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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