

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

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### 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 you hear.

Now, look at the notes for extract one.

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### Extract 1: Questions 1-12

You hear an endocrinologist talking to a patient called Silvana Hillier who has been referred by her GP. For **questions 1-12**, complete the notes with a word or short phrase.

You now have thirty seconds to look at the notes.

**Patient** Silvana Hillier

**Medical history** • (1) \_\_\_\_\_ diagnosed eighteen months ago

• failure to (2) \_\_\_\_\_ (over previous year)

• severe influenza (three months ago)

**Current symptoms:** • periods are (3) \_\_\_\_\_

• more frequent bowel movements

• (4) \_\_\_\_\_ hair

• eyes appear (5) \_\_\_\_\_

• palpitations

• intolerance to (6) \_\_\_\_\_

• excessive sweating

• reports (7) \_\_\_\_\_ (hands)

• thickened skin on (8) \_\_\_\_\_

**Other:** • current mood described as (9) \_\_\_\_\_

• severe fatigue

• mother suffers from (10) \_\_\_\_\_

**Action required:** • blood tests

• (11) \_\_\_\_\_ test

• scan of (12) \_\_\_\_\_

**Extract 2: Questions 13-24**

You hear a gastroenterologist talking to a patient called James Cunningham. For **questions 13-24**, complete the notes with a word or short phrase.

You now have thirty seconds to look at the notes.

**Patient** James Cunningham

**Medical History** • has been overweight for some years

- (13)\_\_\_\_\_ monitored annually
- cholesterol level high (statins prescribed)

**Initial symptoms** • nausea and (14)\_\_\_\_\_

- feelings of (15)\_\_\_\_\_ caused concern
- reported (16)\_\_\_\_\_ of skin.
- swollen abdomen
- noticed visible (17)\_\_\_\_\_ (on skin above waist)

**Diagnosis** • blood tests carried out; evidence that liver function impaired

- (18)\_\_\_\_\_ revealed inflammation of liver
- Cirrhosis diagnosed (cause = non-alcoholic fatty liver disease).
- emergency treatment needed for (19)\_\_\_\_\_ in oesophagus
- prescribed (20)\_\_\_\_\_

**Initial treatment** • cut down on salt intake

- recommended to increase (21)\_\_\_\_\_ in diet
- (22)\_\_\_\_\_ have been effective

**Further treatment** • exercise - (23)\_\_\_\_\_ programme suggested

- aware of need to prevent (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.

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- 25.** You hear a radiologist talking to a patient about the MRI scan he's going to have.

Her main reason for talking to him is

- (A) to explain the procedure to be followed.
- (B) to reassure him about his concerns.
- (C) to clarify why the test is necessary.

- 26.** You hear a nurse handing a patient over to a colleague.

What does she want her colleague to do?

- (A) accompany the patient to her afternoon appointment
- (B) check that items brought in for the patient comply with guidelines
- (C) provide a mobility aid ready if the patient wants to use the bathroom

- 27.** You hear an orthopaedic nurse talking to a patient about her forthcoming hip arthroplasty.

What is the patient most concerned about regarding her condition?

- (A) possible difficulties using walking aids.
- (B) having people stay with her for so long.
- (C) how soon her other hip will need replacing.

28. You hear an administrator speaking to staff on a general surgery ward.

He says that time may be wasted when

- (A) information about a patient is unavailable.
- (B) a second opinion is requested by a patient.
- (C) details about a patient aren't clearly presented.

29. You hear an ophthalmologist talking to a patient who has watery eyes.

What does the patient think may be causing the condition?

- (A) side effects of a particular medication
- (B) an allergy related to his place of work
- (C) irritation caused by climatic conditions

30. You hear a senior doctor answering questions from a group of medical students.

What advice does she give them?

- (A) Don't assume older members of the teaching staff have little to offer.
- (B) Focus on getting to grips with the latest medical equipment.
- (C) Treat colleague's time-saving strategies with caution.

**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.

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### Extract 1: Questions 31-36

You hear an interview in which a senior nurse called Anna Ratchford is talking about hygiene issues relating to nurses' uniforms.

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

- 31** Anna suggests that the article about nurses' uniforms
- (A) was correct in focusing on a range of common washing temperatures.
  - (B) didn't examine the effects of washing in domestic machines sufficiently.
  - (C) should no longer be relied upon due to recent developments in hospitals.
- 32** What is Anna's view of the domestic washing guidelines in hospitals?
- (A) She's unsure how strict national guidelines are.
  - (B) She thinks the stated minimum temperature is too low.
  - (C) She's concerned by the fact that some vary in certain key aspects.
- 33** Anna says the work carried out in 2017 was important because
- (A) it showed most micro-organisms exist on clothing for about a week.
  - (B) it indicated that unwashed uniforms were a potential domestic hazard.
  - (C) it proved that a temperature of 40°C was sufficient to remove all bacteria.

34. Anna points out that the UK food industry differs from many hospitals by
- (A) insisting that work clothing is only to be worn in the workplace.
  - (B) recommending a particular temperature for washing work clothing.
  - (C) suggesting some work clothing could be washed in laundries at work.
35. Anna believes some nurses do not follow the domestic washing guidelines because
- (A) they want to follow current social trends and be environmentally friendly.
  - (B) they think the hospital laundries will damage their uniforms over time.
  - (C) they know that using their washing machines every day is expensive.
36. What does Anna think hospitals should do to improve infection prevention?
- (A) Upgrade their own guidelines on washing uniforms at home.
  - (B) Require all staff to change out of their uniforms before leaving work.
  - (C) Introduce specific training on how to keep uniforms free from bacteria.

**Now look at extract two.**

## Extract 2: Questions 37-42

You hear a geriatrician called Dr Daniel Booker giving a presentation about the surgical care of elderly patients.

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

**37.** In describing the medical history of an elderly patient called Jane, Dr Booker suggests that

- (A) her cardiac problems needed more intensive treatment.
- (B) her state of health was unusual for someone of her age.
- (C) her multiple chronic conditions were generally well managed.

**38.** In the ED, tests and examinations carried out on Jane gave conflicting evidence of

- (A) a twisted bowel.
- (B) a mass in the abdomen.
- (C) an obstruction in the caecum.

**39.** Dr Booker explains that in Jane's case, an endoscopy was omitted because

- (A) her condition hadn't yet been stabilised.
- (B) her age made the procedure problematic.
- (C) surgery needed to be carried out urgently.

**40.** When describing the preparation for Jane's surgery, Dr Booker gives examples of

- (A) the actions taken to support a successful outcome.
- (B) the ways in which patient involvement was encouraged
- (C) how some unexpected problems were eventually overcome.

41. When discussing Jane's aftercare, Dr Booker suggests that
- Ⓐ elderly patients are best treated in an intensive care unit.
  - Ⓑ the presence of family members can reduce post-operative risks.
  - Ⓒ longer-term catheter use may be necessary for less mobile patients.
42. Dr Booker says an important lesson to be learned from Jane's case is that
- Ⓐ a full recovery often requires long-term follow up care.
  - Ⓑ emergency surgery may involve a more prolonged hospital stay.
  - Ⓒ postsurgical complications may be more dangerous than the operation.

**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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