

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.

Extract 1: Questions 1-12

You hear an ENT specialist talking to the father of a patient called Jack Harris, who has been referred with hearing problems. For **questions 1-12**, complete the notes with a word or short phrase.

Patient: Jack Harris (age 5)

Medical History:

- Jack's hearing appeared normal at (1) _____ screening test.
- Some ear infections – responded to antibiotics
- Last year had (2) _____ – resolved

Reason for referral:

- Jack often requested (3) _____ during conversations
- If someone who was (4) _____ him asked a question, he didn't always answer
- A routine screening test carried out at (5) _____ - indicated a possible problem with his right ear

Family history:

- Jack's (6) _____ is almost totally deaf
- older sister had otitis media, treated by insertion of (7) _____

Tests and diagnosis:

- Jack's left ear had some non-occluding (8) _____
- A (9) _____ was normal
- SRT testing – no (10) _____ from right ear
- The doctor then diagnosed (11) _____

- This diagnosis was confirmed with a test of (12) _____ activity

Extract 2: Questions 13-24

You hear a rheumatologist talking to a patient called Sandra Delgado for questions 13-24, complete the notes with a word or short phrase.

Patient: Sandra Delgado

Background:

- Has worked in (13) _____ for thirty years
- Keen swimmer
- Describes her personality as naturally (14) _____

Medical History 2007:

- First signs of condition
- Suddenly felt as if she had severe (15) _____
- Woke up the next morning with inflamed joints and unable to move
- Was hospitalised but no specific diagnosis was made

2007-2012 throughout this period experienced:

- Constant (16) _____ and onset of depression
- Joint and muscle pain, plus very frequent (17) _____
- Migraine and occasional (18) _____
- N.b. was recommended (19) _____ by her GP, refused to attend

2012-2014

- Referred to arthritis clinic and diagnosed with lupus
- Prescribed (20) _____ drugs, but proved to be allergic to them
- Found to have high cholesterol – takes statins

2014 - present

- Condition in remission for two years
- Developed severe migraine and problems with (21) _____
- Diagnosed with anti-phospholipid syndrome (takes aspirin for this)
- Inflamed (22) _____ (successful operation)
 - And now only suffers occasional (23) _____ of pain
- Recently had problems with hips and knees (describes the pain as (24) _____)

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.

25. You hear a GP talking to a patient about a gastroscopy.

What is the patient concerned about?

- (A) The pain he'll experience during the procedure
- (B) Any potential after-effects of the procedure
- (C) Whether the procedure is really necessary

26. You hear an emergency doctor talking to his team about patients who present with abdominal pain.

What problem is he highlighting?

- (A) The dangers of delaying a diagnosis
- (B) The difficulty of accessing existing medical records
- (C) The unreliability of some information gleaned from patients

27. You hear a nurse briefing a colleague about a patient.

What does his colleague need to talk to the patient about?

- (A) The removal of her catheter
- (B) The management of her pain
- (C) The monitoring of her breathing

28. You hear two nurses conducting a patient handover.

What should the incoming nurse discuss with the patient?

- (A) Why a particular diet is needed
- (B) Why the nutritionist can't change her diet
- (C) What alternatives are available for her diet

29. You hear a GP talking to a young mother.

What does the patient want?

- (A) Advice about her baby's progress
- (B) Reassurance that a procedure is safe
- (C) Some information about childhood ailments

30. You hear part of an update meeting in which a hospital manager is briefing a group of senior nurses.

He is making them aware of the need to

- (A) Demonstrate a new procedure to other staff.
- (B) Give feedback on a proposed initiative.
- (C) Modify current practices.

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.

Extract 1: Questions 31-36

You hear an endocrinologist called Dr Martha Heywood giving a presentation about female athletes who experience the condition called hypothalamic amenorrhea (HA).

31. Dr Heywood says that she's chosen to talk about HA because

- (A)** It's relatively under researched at present
- (B)** She has a large number of patients presenting with it.
- (C)** Treatment for it will benefit from a multi-disciplinary approach.

32. what did the athlete called Linda feel about having HA?

- (A)** Puzzled about the specific cause of it
- (B)** Relieved because it aided her performance
- (C)** worried that it' might cause infertility in later life

33. Dr Heywood was surprised that a recent report on infertility in athletes found that

- (A)** such a high proportion of athletes have HA.
- (B)** Many more women are taking up extreme sports.
- (C)** The influence of genetics hasn't been fully considered.

34. Why does Dr Heywood cite the research into ballet dancers with HA?

- (A)** It highlights the role of diet in the condition.
- (B)** It indicates that starting young increases problems.
- (C)** It relates the condition to a particularly stressful physical activity.

35. The athlete that Dr Heywood calls Stacey feels angry she has HA because

- (A) She likes to feel that she's in control.
- (B) Other people fail to understand her problem.
- (C) She knows she has made poor decisions in the past.

36. Dr Heywood feels that medical treatments for HA are most effective

- (A) If psychological support is also provided.
- (B) After patients have made changes to their lifestyles.
- (C) When they are undertaken immediately after diagnosis.

Extract 2: Questions 37-42

You hear an interview with a neurologist called Dr Alan Lode, who's talking about developments in the treatment of spinal cord injuries.

You now have 90 seconds to read questions 37-42

37. Dr Lode says that most of his quadriplegic patients

- (A) Want above all to regain use of their hands and arms.
- (B) See having to use a wheelchair as their biggest problem.
- (C) Hope to overcome most of their problems at some stage in the future.

38. Dr Lode explains that one disadvantage of the original Brindley device is related to

- (A) The danger of infection.
- (B) The method of implantation.
- (C) The need for manual control.

39. Dr Lode says the adapted Brindley device is now being used with artificial limbs to

- (A) Increase their range of movement.
- (B) Help them to respond more rapidly.
- (C) Improve the user's control over them.

40. Dr Lode says that both humans and dogs with spinal injuries may

- (A) Show some improvement following mechanical intervention.
- (B) Be helped by the injection of cells from elsewhere in the body.
- (C) Regain bladder control more easily than the ability to move around.

41. Dr Lode explains that it's especially difficult to get damaged nerve fibres to reconnect when

- (A) The severed nerve endings are very far apart.
- (B) Sensory nerves rather than motor nerves are affected.
- (C) Scar tissue is present between the ends of the nerves.

42. Dr Lode predicts that there may be dramatic improvements in

- (A) The development of new connections between brain cells in adults.
- (B) The chances of recovery for young children with spinal cord injuries.
- (C) The restoration of the protective coating around nerve cells in adults.