SAM AGENCY GOET WINNERS



IRS Test 2

Listening test

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 you hear.

Now, look at the notes for extract one.

Extract 1. Questions 1 -12

You hear a doctor talking to Tom Levin, a patient with some concerns. For **questions 1-12**, complete the notes with a word or a short phrase.

You now have thirty seconds to look at the notes.

Patient	:	Tom Levin
Developments before	:	kept it under control from the gap year
admission		• recurred towards the end of the (1)
		period
		• started to put a bit (2)
		to push themselves, some people took (3)
		observed (4) building up
Effects of elevated mood	:	• felt that it was his (5)
		started to enjoy the opportunity
Client's reasoning	:	• did not (6) to the best of his ability
		and hence did not achieve the first
Further description	:	felt like he was let off the (7)
		substance abuse took a hold
		• was before the (8) were announced
		• used a lot of cocaine and (9)
Predominant thoughts	:	wanted himself to be the person (10)
		wanted to know
		thought he was the man (11) the town
Defense Mechanism	:	 did not have to deal with the symptoms during the university
		• let it take (12) of him

Extract 2: Questions 13-24

You hear a pediatrician called Dr Thomas talking to the mother of a toddler called Ethan. For **questions 13-24**, complete the notes with a word or short phrase.

You now have thirty seconds to look at the notes.

Patient :	Ethan Lucas
Description of the condtion:	 started on (13) red patches (14) and on legs had (15) went (16)
Past visit :	 blood tests done viral infection confirmed called the doctor because rashes turned (17) baby was very fuzzy
Possible severe condition :	patches could be fatal if (18)found to be negative
Diagnosis :	 rash goes away and reappers when rubbed child is alert (19)
Medication suggested :	 (21) or benadryl basic anti-allergy medicines prednizone may be prescribed if condition worsens makes children (22) and irritable
Duration of illness :	could last for 7 to 10 days
Possible trigger factors :	 (23)taken food such as peanuts or (24) should stop food, if it triggers allergy

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.

25. You hear a doctor explain gastroscopy to a patient.

What is the purpose of the doctor's explanation?

- (A) to make the patient sign the consent form before the procedure
- (B) to reduce the patient's fear of side effects before the procedure
- (C) to explain possible side effects before signing the consent form
- **26.** You hear a doctor checking a patient's details with a colleague.

What aspect is the doctor focusing on?

- (A) the patient's detailed identity
- (B) the patient's drug administration
- (C) the patient's overall progress
- 27. You hear a dentist talking to a patient about implant surgery.

What has the patient misunderstood about the proposed treatment?

- (A) which tooth would be replaced
- (B) the extent of surgery required
- (C) how much it would cost

- 28. Yo hear a sports nutritionist talk on challenges in routine work

 What must they be wary of?
 - (A) adopting to opinion flouted by the sportsperson
 - (B) contradictory messages being circulated around
 - (C) struggles faced by athletes for optimum BMI
- **29.** You hear a surgeon conducting a debriefing meeting with his team

What problem are they going to follow up immediately?

- (A) procedures not running to schedule
- (B) equipment not being readily available
- (C) paperwork not being dealt with efficiently
- **30.** You hear a nurse handing over to a colleague at the end of her shift.

What does the incoming nurse need to do for the patient?

- (A) contact the doctor about his pain management
- (B) arrange for him to be taken for physiotherapy
- (C) set up some monitoring of his mental acuity

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 to 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.

Extract 1: Questions 31 to 36

You hear an interview with Dr Larry Appel regarding low GI diet.

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

- **31.** What was the reason for the second study?
 - (A) to find the effect of salt on blood pressure
 - (B) to identify the effect of salt on blood pressure
 - (C) to scrutinise ethe effect of fruit and vegetable diet
- **32.** What was the finding of the omnicarb study?
 - (A) low glycaemic index was helpful
 - (B) signals that are related to LDL
 - (C) no effects of low glycaemic index
- **33.** What was gauged from the study on comparision of diets?
 - (A) low glycaemic index has no effect on risk factors
 - (B) insulin resistance showed a difference in control diet
 - (C) LDL cholesterol increased in a low GI diet

- **34.** What does the researcher think of the way ahead?
 - (A) study of confounding nutrients that travel together
 - (B) benefits could be attributed to other aspects
 - © finding that low glycaemic food are fibre rich
- **35.** What does the doctor think is crucial for obesity?
 - (A) cutting back on episodes of calorie consumption
 - (B) inexpensive methods to keeping individuals engaged
 - (C) tools that assist people to keep track by monitoring
- 36. What in the speaker's vies is the reason for chronic kidney disease?
 - (A) fluctuation in the body's acid base balance
 - (B) unchecked consumption of an adverse diet
 - © accumulated kidney damage due to ageing

Now look at extract two.

Extract 2: Questions 37 to 42

You hear a gastroenterologist called Catherine Frenette talking about new treatment options for liver cancer.

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

- **37.** Why does the interviewer describe the numbers as shocking
 - (A) incidence has been hugely higher in the past decade
 - (B) unresectable liver cancer was detected in the past decade
 - © underlying liver conditions mutated into liver cancer
- 38. How does Dr Frenette see alcohol-induced cirrhosis leading to liver cancer
 - (A) reducing it should be a primary focus on the fight against liver cancer
 - (B) fatty liver developed from alcoholism is leading to more liver cancer
 - © unlike popular perception, alcoholism is not the leading trigger factor
- **39.** Why are most liver cancers treated by liver doctors and not cancer doctors?
 - (A) there are not many treatment options available for liver cancers yet
 - (B) liver cancers typically have an underlying liver condition behind it
 - (C) the best treatment options are surgical including transplantations
- **40.** Why is it harder to diagnose liver cancer unlike other cancers?
 - (A) the symptoms are all over the place and hence not possible to diagnose
 - (B) liver conditions reveal fewer symptoms until they have progressed much
 - (C) they symptoms for liver diseases and liver cancer are radically varied

- **41.** How does the doctor regard liver function test?
 - (A) she considers it to be simple lab test that should be done more often
 - (B) she feels that test reports can sometimes be confusing and is unreliable
 - © she is critical about primary care doctors not conducting the test annually
- **42.** Why does the doctor think that liver cancer doesn't get the attention despite being a major concern?
 - A patients do not present due to the social stigma associated with liver problems
 - (B) liver cancer is ranked the fifth most common cause of cancer related deaths
 - it is one of the few cancer deaths that is contrastingly increasing in frequency

That is the end of Part C.

You now have two minutes to check your answers.

THAT IS THE END OF THE LISTENING TEST

LISTENING SUB-TEST 2

PART A: QUESTIONS 1 - 12

- 1 university
- 2 more
- 3 ritalin
- 4 momentum
- 5 time
- 6 perform
- 7 leash
- 8 exam results
- 9 MDMA
- 10 everyone
- 11 about
- 12 hold

PART A: QUESTIONS 13 - 24

- 13 Tuesday
- 14 (right) across (his) belly
- 15 runny nose
- 16 camping
- 17 purple / purplish
- 18 meningococcus
- 19 hives
- 20 immune response
- 21 claritin
- 22 grumpy
- 23 medication
- 24 eggs / strawberries / shell fish

PART B: QUESTIONS 25 - 30

25	С	to explain possible side effects before signing the consent form
26	В	the patient's drug administration
27	В	the extent of surgery required
28	В	contradictory messages being circulated around
29	Α	procedures not running to schedule
30	С	set up some monitoring of his mental acuity

PART C: QUESTIONS 31 - 36

31	Α	to find the effect of salt on blood pressure
32	С	no effects of low glycaemic index
33	С	LDL cholesterol increased in a low - GI diet
34	В	benefits could be attributed to other aspects
35	В	inexpensive methods to keeping individuals engaged
36	В	unchecked consumption of an adverse diet

PART C: QUESTIONS 37 - 42

37	Α	incidence has been hugely higher in the past decade
38	С	unlike popular perception, alcoholism is not the leading trigger factor
39	В	liver cancers typically have an underlying liver condition behind it
40	В	liver conditions reveal fewer symptoms until they have progressed much
41	Α	she considers it to be simple lab test that should be done more often
42	Α	patients do not present due to the social stigma associated with liver problems