SAM AGENCY OET WINNERS



Practice Book T. 5

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 consultant rheumatologist talking to a patient called Suzanne Hinds. For **questions 1-12**, complete the notes with a word or short phrase.

You now have 30 seconds to look at the notes.

Patient	Su	zanne Hinds		
Symptoms	Mo •	uth: chapped lips		
	•	painful (1)		
	•	increased number of (2)		_
	•	dryness		
	•	tongue appears (3)		
	Eye			
	•	eyelids described as (4)		_ on waking
	•	frequent irritation		
	•	itchiness made worse by (5)		
	•	self-treating with (6)		
	•	recurring (7)		
	•	increased sensitivity to light		
	•	vision described as cloudy		
	Thi			
	•	patient says it sometimes feels (8)		
	•	regular difficulty in (9)		
	•	some swelling		
Background details	•	works as a tour guide		
	•	moderate smoker for 15 years		
	•	family history of (10)		
Recommended tests	•	saliva flow rate test		
	•	(11)	_biopsy	
	•	(12)	test - possibly	

Extract 2: Questions 13-24

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

You now have thirty seconds to look at the notes.

Patient	Tol	Toby Smithers							
Background	•	initial stomach upset							
	•	main symptom (13)							
Original presenting factors									
Original procedumy race	•	feeling (14) immediately after meals							
	•	extremely (15) (especially at night)							
	•	no history of (16)							
GP's initial diagnosis	•	main symptoms similar to those associated with							
		(17)							
GP's interim treatment plan									
	•	advised to keep (18) intake high							
	•	suggested separating eating and drinking by 30 mins							
	•	suggested a (19) '' regime for meals							
Tests	•	both (20) clear							
	•	(21) performed							
	•	(22)confirmed and treated							
	•	eradication confirmed by (23)							
Current situation	•	original presenting factor persists							
	•	works as a (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.		

25. You hear a consultant talking to a woman whose father has just been admitted to hospital.

What does she want to know about his condition?

- (A) how serious it is
- (B) how much pain it's causing
- how long before there will be a diagnosis
- **26.** You hear a trainee nurse receiving feedback from her tutor about the ward round she's just completed.

What would have improved the nurse's performance?

- (A) eliciting information from the patient
- (B) keeping the patient better informed
- © updating patient notes more fully
- 27. You hear a hospital nurse briefing a colleague about a patient with Chronic Obstructive Pulmonary Disease, or COPD.

What does he want his colleague to do?

- (A) encourage greater mobility
- (B) organise a visit by a dietitian
- (C) consult with the medical team

28. You hear two hospital managers talking about a training session for people who do voluntary work with patients. What do the managers think about the course? (A) Too few people attended to make it worthwhile. (B) The content may need revising for future sessions. (C) The feedback from participants wasn't encouraging. 29. You hear a pharmacist talking to a doctor about a patient's medication. What is the pharmacist doing? (A) reporting side effects checking the dosage recommending an alternative 30. You hear a surgeon talking to a member of his team as they are finishing a surgical procedure. The surgeon says their next priority should be (A) to complete a routine administrative task. (B) to report a faulty piece of equipment. (C) to locate an appropriate bed.

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.

Extract 1: Questions 31-36

You hear an interview with Dr Bob Dean, who's talking about a trial he conducted to assess different ways of treating the condition known as 'tennis elbow'.

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

- 31. Dr Dean says that patients with tennis elbow
 - (A) may be unaware that they have the condition at first.
 - B tend to come from a remarkably narrow range of occupations.
 - (c) can easily avoid the condition by adopting correct working practices.
- 32. In the physiotherapy programme used in Dr Dean's trial,
 - (A) the treatment given was tailored to the needs of each patient.
 - B patients had to build up their strength before starting it.
 - © some patients found the treatment too painful.
- 33. What does Dr Dean say about the role of 'smart rest' in the trial?
 - (A) It wasn't appropriate for certain types of tennis elbow.
 - (B) It formed the basis of two of the three treatment options.
 - (C) It kept all patients physically active despite the condition.

(A) They were surprisingly conclusive in the short term. **B**) They underlined the advantages of timely intervention. (C) They confirmed the findings of an earlier piece of research. 35. Dr Dean would advise anyone experiencing tennis elbow for more than three months to avoid using any steroid-based medication at that point. be ready to start more invasive forms of treatment. (C) try a combination of physiotherapy and injections. 36. Dr Dean suggests that taking anti-inflammatories for tennis elbow is less effective than alternative forms of medication. (B) is trying to treat a symptom that may not actually exist. is an area that needs to be researched more thoroughly.

What did Dr Dean find interesting about the results of the trial?

Now look at extract two.

34.

Extract 2: Questions 37-42

You hear a presentation in which a researcher called Dr Sarah Jones is talking on the subject of weight loss interventions by GPs.

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

- **37.** Dr Jones suggests that few health professionals currently attempt weight loss interventions because they
 - (A) have often found them to be ineffective.
 - (B) lack confidence in the chances of success.
 - (C) rarely have time to spare for non-clinical issues.
- 38. The specific aim of the trial Dr Jones describes was
 - (A) to draw patients' attention to the need to lose weight.
 - (B) to reduce the time that weight-loss interventions take.
 - **(C)** to promote greater understanding of the dangers of obesity.
- 39. Dr Jones now feels practitioners can justify weight loss interventions because
 - A patients are currently less sensitive about weight-related issues.
 - (B) a huge majority of patients feel that it is a suitable topic for discussion.
 - (C) circumstances demand that action is taken even if patients are reluctant.

40. When describing the trialling of the programme, Dr Jones says she was surprised by (A) the fact that most patients offered a place did actually join it. (B) the positive attitude of patients who accepted the treatment. (C) the number of patients who dropped out early. From the outcomes of the trial we learn that 41. the results for all participants improved at a similar rate. (A) intervention was consistently more successful than non-intervention. (C) the advantages of intervention became less marked in the longer term. 42. What does Dr Jones feel are the implications of the findings of the trial? Areas other than weight loss may be suitable for similar initiatives. **(B)** Doctors may find that their role in the community starts to change. (C) There could be widespread benefits if they were applied nationally. That is the end of Part C. You now have two minutes to check your answers.

THAT IS THE END OF THE LISTENING TEST

OET PRACTICE 5

Listening - Answer

OET Listening: Answer Key
ANSWER KEY - PART A

Extract 1:

- 1. mouth ulcers / ulcers
- 2. dental cavities/ cavities/ caries/ fillings
- 3. cracked
- 4. sticky
- 5. air conditioning / air-con / AC
- 6. eye drops / drops
- 7. conjunctivitis / pinkeye / pink eye
- 8. rough
- 9. swallowing / swallowing food / getting stuff down
- 10. rheumatoid arthritis / RA
- 11. lower lip
- 12. thyroid function test / thyroid function

Extract 2:

- 13. vomiting
- 14. incredibly sleepy / sleepiness
- 15. thirsty / dehydrated
- 16. stomach cancer
- 17. gastric dumping syndrome
- 18. fluid
- 19. little and often
- 20. blood and urine/ blood urine / blood and urine tests / blood urine tests / urine and blood / urine blood / urine and blood tests / urine blood tests
- 21. endoscopy
- 22. helicobacter pylori / H. pylori / H pylori
- 23. urea breath test / breath test
- 24. teacher

ANSWER KEY - PART B

- 25. B how much pain it's causing
- 26. B keeping the patient better informed
- 27. C consult with the medical team
- 28. B The content may need revising for future sessions.
- 29. A reporting side effects
- 30. B to report a faulty piece of equipment.

ANSWER KEY - Part C

Extract 1:

- 31. A may be unaware that they have the condition at first.
- 32. A the treatment given was tailored to the needs of each patient.
- 33. C It kept all patients physically active despite the condition.
- 34. C They confirmed the findings of an earlier piece of research.
- 35. A avoid using any steroid-based medication at that point.
- 36. B is trying to treat a symptom that may not actually exist.

Extract 2:

- 37. B lack confidence in the chances of success.
- 38. A to draw patients' attention to the need to lose weight.
- 39. B a huge majority of patients feel that it is a suitable topic for discussion.
- 40. A the fact that most patients offered a place did actually join it.
- 41. B intervention was consistently more successful than non-intervention.
- 42. C There could be widespread benefits if they were applied nationally.