## **OET30 Listening Mock Test 1**

#### 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 cardiologist talking to Sarah, a patient with a pacemaker. For questions 1-12, complete the notes with a word or short phrases.

You now have 30 seconds to look at the notes.

r ou n	ow have 30 seconds to look at the notes.
Patier	nt: Sarah
Sarah	's medical history:
	Had surgery in (1) to correct her heart problem. Her parents tried to explain that she had (2)
Histor	ry of surgery and Sarah's memories:
	It was (3) after surgery. Her lips and nails were (4)
Patier	nt's exercise and fitness:
	She kept (5) consistently as she was getting older.
	She used to dance for (6) a week.
	She is still (7) regularly.
	She gets (8) every now and then.
Drink	ing habits and heart condition:
	She has (9) drinks once a week.
	Has (10) chest pain.
	Noticed (11) easily

➤ Her family history of heart diseases is (12) \_\_\_\_\_.

## Extract 2: Questions 13-24

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH You hear a GP talking to Kevin about his accident.

For questions 13-24, complete the notes with a word or short phrases.

You now have 30 seconds to look at the notes.

1	V. (14)	222		S) 20
Po	tio	mt.	K	evin

- ➤ He is (13) \_\_\_\_\_\_ years old.
- ➤ His (14) \_\_\_\_\_\_ is lower than average.
- ➤ He (15) \_\_\_\_\_ for about 100-150 kilometers a week.

#### Family medical history:

- ➤ His mother is a (16) \_\_\_\_\_.
- ➤ His father had a (17) \_\_\_\_\_.

## Kevin's health problems and medical treatment in West Africa:

- ➤ Had a lot of (18) \_\_\_\_\_ troubles.
- ➤ Had (19) \_\_\_\_\_ constantly.
- ➤ He received (20) \_\_\_\_\_ medical care.

#### Patient's bicycle accident and onset of pain:

- ➤ Smashed himself on (21) \_\_\_\_\_\_.
- After the accident they went to the (22) \_\_\_\_\_.
- Pain started after having (23) \_\_\_\_\_\_.
- Pain appeared after (24) \_\_\_\_\_\_ level went down.

#### That is the end of Part A. Now look at Part B.

#### Part B

In this part of the test, you will hear six different extracts. In each extract, you will 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 will have time to read each question before you listen. Complete your answers as you listen.

## Now look at question 25.

- **25.** Which of the following information is INCORRECT regarding the patient's condition?
  - A. His dose of morphine has been increased
  - B. He is on Amoxi-clav
  - C. He takes hypertension medication
- 26. According to the brief given by the nurse

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- A. It took 10 mins of CPR to reach Return Of Pulse
- B. On arrival, the patient's O2 sat was 69%
- C. He has a history of parathyroid cancer.

#### **27.** According to the extract

- A. The patient is 65 years old
- B. Her presenting features were suggestive of pneumonia
- C. The patient is to be commenced on antibiotics and steroids

#### 28. According to the extract

- A. The patient was diagnosed with lung cancer for the first time in 2009
- B. When he arrived to the ER, his PO2 sat was 68%
- C. The patient has a history of shortness of breath since one month

## 29. Regarding the patient's analgesia

- A. The pain is well controlled
- B. The patient is not allowed to take analgesia anymore
- C. Her last dose of analgesia was 3.30 mg

## **30.** According to the extract

- A. The patient is diagnosed as a case of stroke.
- B. His daughter reported that he was speaking irregularly.
- C. The patient is showing non-compliance regarding taking his antihypertensives

#### 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 Professor Grobman, who's a Professor of Obstetrics and Gynecology.

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

- 31. What does professor Grobman believe to be the problem with induced labor?
  - A. That it inevitably leads to cesarean section.
  - B. That a belief was built on the basis of misunderstanding of certain results.
  - C. That the procedure has not been performed correctly.
- 32. The population undergoing induced labor are described as biased because

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- A. There was a greater number of women who underwent induced labor when compared with those who did not.
- B. The difference in the gestational age between the two groups. C. They had a medical problem that made inducing labor an indication.
- 33. What point does professor Grobman make by comparing induced to spontaneous labor?
  - A. Induced labor is optional.
  - B. Induced labor precedes caesarean section.
  - C. Spontaneous labor is safer.
- 34. What is the concern with regard to caesarean delivery truly about?
  - A. The patient being experiencing child birth for the first time.
  - B. The patient having co-morbid conditions.
  - C. The bad outcome when it comes to the baby's health.
- 35. What would professor Grobman like to decrease the rate of?
  - A. Caesarean sections.
  - B. Vaginal deliveries.
  - C. Unnecessary interventions.
- 36. Women who were randomized to normal vaginal delivery had \_\_\_\_\_ outcomes when compared to those going through induced labor
  - A. Worse.
  - B. Better.
  - C. The same.

Now look at extract two.

#### Extract 2: Questions 37-42

You hear an interview with Serge Negus and Kathleen Bainbridge, about Phantom smells. You now have 90 seconds to read questions 37-42.

- 37. Serge states that he lost his sense of smell as a result of
  - A. A fractured skull.
  - B. A broken nose.
  - C. Nerve damage.
- 38. Why didn't Serge mind experiencing phantom smells?
  - A. The experience wasn't that bad.
  - B. He realized that it is common and could happen to anyone.
  - C. It is untreatable anyway.

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- 39. What is Serge telling us about the slightly bad smell that he had?
  - A. He couldn't find the place where it is coming from.
  - B. It was unfamiliar to him.
  - C. He would choose never being able to smell again.
- 40. According to Kathleen's definition of phantosmia, which of the following is true?
  - A. It is always perceived as of something is burning.
  - B. The patient is considered to be hallucinating.
  - C. It is not a true phenomenon.
- 41. What does Kathleen say about the study that she participated in?
  - A. They used batteries as the source of odour.
  - B. They included a question about phantom smells within the already established survey.
  - C. Over 7000 people reported experiencing phantom smells at least once.
- 42. What is the interviewer's opinion regarding the study?
  - A. Its results might be somehow inaccurate.
  - B. It was tested on a small number of subjects.
  - C. Its outcomes were surprisingly predictable.

## 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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#### LISTENING SUB-TEST – ANSWER KEY

## **PART A: QUESTIONS 1-12**

- 1. 1991
- 2. Transposition of the great vessels
- 3. Difficult to walk
- 4. Blue
- 5. Dancing
- 6. Five hours
- 7. Walking / taking classes
- 8. Headaches
- 9. 3-4 drinks
- 10. No
- 11. Bruising
- 12. Negative

## **PART A: QUESTIONS 13-24**

- 13.33
- 14. Cholesterol
- 15. Bicycles
- 16. Heavy smoker
- 17. Pace maker
- 18. Stomach
- 19. Diarrhea
- 20. Minimal
- 21. The asphalt
- 22. Coffee shop
- 23. Coffee
- 24. Adrenaline

## **PART B: QUESTIONS 25-30**

- 25.C
- 26. B
- 27.B
- 28. A
- 29. A
- 30. C

## **PART C: QUESTIONS 31-36**

- 31.B
- 32.C
- 33.A
- 34. A

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35.C

36. A

## PART C: QUESTIONS 37-42

37.C

38. A

39.B

40.B

41.B

42. A

## END OF KEY

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## **OET30 Listening Mock Test 2**

## **Extract 1: Questions 1-12**

You hear Rose, a neonatal intensive care nurse, talking to Peter about his newborn twin. For questions 1-12, complete the notes with a word or short phrases. You now have 30 seconds to look at the notes

have 30 seconds to look at the notes.
Father's name: Peter
Initial details:
<ul> <li>Twin babies born (1) weeks early.</li> <li>Olive is named after (2)</li> </ul>
Olive's current situation:
<ul> <li>She is small and does not have a lot of (3)</li> <li>She was taken to a (4)</li> <li>She does not have enough (5) fat to keep her warm.</li> </ul>
Nurse's comment regarding the incubator stay:
<ul> <li>They will start by giving fluids and a trial for (6) feed will be initiated.</li> <li>She will get out when she can maintain her (7)</li> <li>No set weight or (8)</li> </ul>
History of pregnancy and Olive's condition:
<ul> <li>They started scan by the (9) week.</li> <li>They missed a couple of scans because it was (10)</li> <li>Olive's placenta contained less (11)</li> <li>Her oxygen saturation is (12) which is normal.</li> </ul>
Extract 2: Questions 13-24
You hear an optometrist talking to Michael, a man with macular degeneration. For questions 13-24, complete the notes with a word or short phrases. You now have 3

30 seconds to look at the notes.

**Patient: Michael** 

Patient's comments on his eyes and previous optometrist visits:

		LISTENING MATERIALS – NOT FOR SALE
ACK		LEDGEMENT – OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH  His last visit to the optometrist was (13) ago.
		He purchased his most recent glasses (14) ago.
		He has difficulty reading printed (15) books.
		In 2006, he noticed (16) in reading lines.
		Ophthalmologist referred him to a (17) specialist.
		Specialist noticed (18) in front of retina.
		Prescribed lucenitus (19) to be taken monthly.
		He visits specialist every (20)
Pa		it's treatment and outcomes:
	>	Doctors were (21) He had (22) injections.
OI	oton	netrist's explanation of Amsler chart:
	>	Most of the time, people do not use it (23) He needs to (24) one eye when using it.
Th	at i	s the end of Part A. Now look at Part B.
		Part B
		part of the test, you will hear six different extracts. In each extract, you will eople talking in a different healthcare setting.
yo	u he	<b>lestions 25-30</b> , choose the answer ( <b>A</b> , <b>B</b> or <b>C</b> ) which fits best according to what ear. You will have time to read each question before you listen. Complete your rs as you listen.
No	w le	ook at question 25.
25.	•	Which of the following information is INCORRECT regarding the patient's condition?
	B.	He is on amiodarone Has a wounded right sacrum His glucose was high, so he received insulin
26.	•	What is this nurse's opinion regarding the new nurses
	B.	They want to be given everything without effort They cannot manage 40 beds effectively They want to work hard but they do not have the experience
27.	i •o	According to the extract
		The charge nurse had personal problems The new nurse felt respected

C. They were both stressed at work

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- 28. Regarding the patient's vital data
  - A. Oxygen saturation is 90%
  - B. Heart rate is 131 bpm
  - C. Respiratory rate is 11
- **29.** According to the extract
  - A. Patient's condition is un-usual
  - B. The bleeding is resulting from the uterine contraction
  - C. The targeted oxygen saturation is 96%
- **30.** According to the extract
  - A. The patient is shocked
  - B. The patient had been vomitting blood
  - C. The patient was started on blood transfusion

#### 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 Professor John McNeil, who's an expert of preventive medicine. You now have 90 seconds to read questions 31-36.

- 31. What important information does professor McNeil point up to regarding the study?
  - A. The increasing number of people taking Aspirin every morning.
  - B. The longer life-span of those administering Aspirin every morning.
  - C. That participants had no history of cerebrovascular events.
- 32. What does professor McNeil say regarding the results of the trials concerning the link between Aspirin and cancer?
  - A. More clinical trials are needed in order to come to an answer.
  - B. The exact effect is not yet confirmed.
  - C. It proves that people who take Aspirin are more liable to die of cancer.
- 33. How does professor McNeil describe the course of bleeding as a complication?

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- A. Progressive.
- B. Continuous.
- C. Regressive.
- **34.** What aspect of the study is considered important and needs further research?
  - A. Effects of Aspirin on the course of some diseases on the long run.
  - B. The fact that people who are overweight might require larger doses.
  - C. The similarity of odds regarding the development of dementia when comparing the two arms of the study.
- 35. The study was conducted over a period of five years to notice if the patient's age is related to
  - A. The long term complications.
  - B. Patients' compliance.
  - C. The influence of Aspirin.
- 36. Which of the following reasons does not require daily intake of Aspirin as to professor McNeil's opinion?
  - A. Upon doctor's advice.
  - B. prophylaxis from the occurrence of some diseases.
  - C. prophylaxis from the reoccurrence of some diseases.

#### Now look at extract two.

#### Extract 2: Questions 37-42

You hear an interview with Dr. Miranda Davies-Tuck, who's a perinatal epidemiologist. You now have 90 seconds to read questions 37-42.

- 37. "planned home-birth" is a choice made by some women upon their
  - A. financial status.
  - B. personal preference.
  - C. previous experience.
- **38.** Which of the following does not categorize a women as being at high risk?
  - A. high birth weighted babies.
  - B. fetal mal-presentations.
  - C. previous elective caesarian section.
- 39. In low risk women, the lower rate of morbidity in home delivered babies is a result of it being
  - A. well planned.
  - B. performed in a more friendly environment.

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- C. less likely to involve advanced medical equipment.
- **40.** What does Dr. Davie-Tuck mention as the reason behind the higher mortality rates in home deliveries of high risk women?
  - A. The co-morbid conditions.
  - B. The barriers that hinder their transfer to the hospital.
  - C. Not yet identified
- 41. What is Dr. Davie-Tuck excited about regarding the studies in her country?
  - A. That they are mimicking those from international studies.
  - B. That they are growing in number and effectiveness.
  - C. That it helped a lot in the process of risk assessment.
- 42. Which of the following is a method that was used to overcome the barriers involving transferring high risk women to the hospital?
  - A. Providing more experienced midwives.
  - B. Establishing for a more appropriate midwife-obstetrician interaction.
  - C. Maintaining continuous after-birth follow-up.

#### 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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#### LISTENING SUB-TEST – ANSWER KEY

## **PART A: QUESTIONS 1-12**

- 1. Four
- 2. Wife's grandmother
- 3. Reserve
- 4. Incubator
- 5. Brown fat
- 6. Milk
- 7. Temperature
- 8. Set time
- 9. Fifth
- 10. Stressful
- 11. Fluid
- 12.99

## **PART A: QUESTIONS 13-24**

- 13. six months
- 14. a year
- 15. phone
- 16. waviness
- 17. retinal
- 18. accumulation of fluid
- 19. injection
- 20. six months
- 21. disappointed
- 22.25
- 23. properly
- 24. cover

## **PART B: QUESTIONS 25-30**

- 25.B
- 26. A
- 27. All true except B
- 28. A
- 29.C
- 30. All true except C

## **PART C: QUESTIONS 31-36**

- 31.C
- 32.B
- 33.B
- 34. A

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35.C

36.B

## PART C: QUESTIONS 37-42

37.B

38. A

39.C

40.C

41. A

42.B

## END OF KEY

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## **OET30 Listening Mock Test 3**

## Extract 1: Questions 1 - 12

You hear a Pharmacist talking to a patient called Matthew Jenkins. For questions 1-12, complete the notes with a word or short phrase. You now have thirty Seconds to look at the notes

Patient: Matthew Jenkins
Has problems with
(1)
(2)
(3)
Medical History
Has had similar symptoms in the past and took
(4) to alleviate constipation pt in "a little pain"
Suggested to take the medication called:
<ul> <li>Mebeverine</li> <li>In tablet form</li> <li>Allergy check:</li> <li>Allergic to (5)</li> <li>(6) mg</li> <li>Itablet (7) a day</li> </ul>
Works in:
(8)
<ul> <li>Work requires entertaining guests.</li> <li>Pt is (9)by condition and prefers drinks to dinner</li> </ul>
Points raised:
<ul> <li>Worried that condition (10)</li> <li>GP recommends changes to (11)</li> </ul>

OET30 LISTENING MATERIALS — NOT FOR SALE ACKNOWLEDGEMENT — OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH  Age: (12)
Extract 2: Questions 13 – 24
You hear a Nurse talking to a patient called Nicole Von.
For questions $13 - 24$ complete the notes with a word or short phrase. You now have thirty Seconds to look at the notes
Patient: Nicole Von
Existing patient
Age
(13)
Medical History:
<ul> <li>Condition (14)</li> <li>Takes medication via (15)</li> <li>Feels Fine today</li> </ul>
Injection:
<ul> <li>➤ Had injection in right arm (16)</li> <li>➤ and will take injection in left arm (17)</li> </ul>
Personal details check:
Address:
<ul> <li>(18) 18Street, London, W115LL</li> <li>Today's date: (19)/2018</li> </ul>
Name of Drug administered:
<ul> <li>Hydroxycobalamin</li> <li>Frequency 2 days every- (20) weeks</li> <li>Route - (21)</li> <li>Usual side effects - Nausea and/ or (22)</li> </ul>
Next of Kin:
Matthew (Son)

# > Stephanie (granddaughter)

Adam (grandson)

> (23) \_\_\_\_\_ daughter-in-law)

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#### District nurses' number given in case pt:

➤ Needs anything at night or (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.

You'll have time to read the question before you listen. Complete your answers as you listen. Now look at question 25.

- 25. You hear a trainee doctor receiving feedback from a senior.

  During the practice ISBAR handover, why was the doctor unable to give a background?
  - A. She doesn't look after the patient
  - B. She doesn't work on that ward
  - C. She doesn't work in the hospital
- You hear a consultation between a GP and a patient. When did the patient's dizziness start?
  - A. All of a sudden
  - B. Two weeks ago
  - C. Two months ago
- 27. You hear a podiatrist discussing multi-disciplinary care.
  Which of the following professionals does she discuss working with?
  - A. Orthopaedic Nurses
  - B. Podiatrists
  - C. Osteopathic practitioners.
- 28. You hear two nurses discussing malaria. How long is Malaria is asymptomatic for?
  - A. 7-8 days
  - B. 8-17 days
  - C. 7-18 days

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- 29. You hear a vet discussing a new cure.

  Leptospirosis may pass to humans from dogs via contact with the dog's:
  - A. Saliva
  - B. Urine
  - C. Faeces
- 30. You hear a pharmacist discussing a new drug What does the pharmacist use to treat staph infection?
  - A. Oxylin
  - B. Oxylin Sodium
  - C. Penicillin

#### 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 a General Practitioner, called Elizabeth Walker, giving a presentation on child health and well being.

- 31. According to Dr Walker, what are vaccination rates in some urban areas in England?
  - A. 95%
  - B. 92%
  - C. 80%
- 32. Throughout the year 2010-2015, how many patients has the average health visitor caseload reduced by?
  - A. 400
  - B. 120
  - C. 280
- 33. Dr Walker suggests a vaccination should not be provided to an infant before the age of...?
  - A. 8 weeks

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- B. 6 months
- C. 6 weeks
- 34. How many people were killed from diphtheria in one year in the US?
  - A. 0
  - B. 175,000
  - C. 15,000
- 35. What was the average number of diphtheria cases annually in the UK during the 21" century?
  - A. 500,000
  - B. 175,000
  - C. 15,000
- **36.** Which side-effect of the vaccine does Dr Walker not mention?
  - A. Weight gain
  - B. Anaphylactic reaction
  - C. Muscle and joint pain

#### Now look at extract two

## Extract 2: Questions 37-42

You hear a doctor called Shirley Massey giving a talk on strokes and their aftermath. You now have 90 seconds to read questions 37-42.

- 37. How many stroke-related deaths were there 15 years ago?
  - A. Approximately 64,000
  - B. Approximately 18,000
  - C. Approximately 32,000
- **38.** In 2007, what was the average age of males suffering a stroke?
  - A. 65
  - B. 68
  - C. 69
- **39.** What is the direct cause of ischemic strokes?
  - A. blood vessel bursts on the surface or within the brain
  - B. Blockages that prevent blood reaching the brain
  - C. Neither
- **40.** What percentage of stroke survivors have will experience another in five years?

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- A. 50%
- B. 10-15%
- C. C- 25%
- 41. How many children experience haemorrhagic strokes annually?
  - A. 800
  - B. 400
  - C. 200
- **42.** A child is how much more likely to suffer a stroke if they have not had all their routine vaccinations?
  - A. 6 times
  - B. 8 times
  - C. 10 times

#### That is the end of Part C

You now have two minutes to check your answers.

#### **END OF THE LISTENING TEST**

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#### LISTENING SUB-TEST – ANSWER KEY

## PARTS A, B & C

## **PART A: QUESTIONS 1-12**

- 1. Nausea
- 2. Constipation
- 3. Diarrhea
- 4. Laxatives
- 5. No medication
- 6. 135
- 7. three times / 3 x
- 8. Investments
- 9. Embarrassed
- 10. is getting worse
- 11. diet
- 12.39

## **PART A: QUESTIONS 13-24**

- 13.62
- 14. Pernicious anaemia
- 15. Injection
- 16. previously / before
- 17. today/ this time
- 18.18 Winstanley
- 19.03/06/2018
- 20.2
- 21. Intramuscularly/ IM
- 22. Headaches
- 23. Eloise
- 24. has (a) severe reaction

## PART B: QUESTIONS 25-30

- 25.B
- 26. B
- 27.C
- 28.C
- 29.B
- 30.B

## PART C: QUESTIONS 31-36

- 31.C
- 32.B
- 33.A

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- 34. C
- 35.B
- 36. A

## **PART C: QUESTIONS 37-42**

- 37. A
- 38. A
- 39.B
- 40. A
- 41. A
- 42.B

## END OF KEY

## **OET30 Listening Mock Test 4**

## Extract 1: Questions 1 -12

You hear a Cardiologist talking to a patient called Jessica Sanders. For Questions 1-12, complete the notes with a word or short phrase you now have thirty Seconds to look at the notes

look at the notes
Patient - Jessica Sanders
Consultation Notes
Information sought
Told pt that cyanosis is when there is
(1)to the skin and mucous membranes.
Peripheral cyanosis is caused by (2)in the red blood cells or problems getting oxygenated blood to (3)
Condition suspected and Explanation given:
(4) Condition is likely due to transposition of the (5) This results in the connection of the (6) to the left pumping chamber and (7) to the right pumping chamber. Condition accounts for (8) % of congenital heart disease
Treatment provided:
Prostaglandin (9) to keep the (10) open
Next steps:
Will need to perform a balloon atrial Septostomy
(which is a (11)) to provide a definitive (12)
Extract 2: Questions 13-24
You hear a Dentist talking to a patient called Chrissy White.
For questions $13 - 24$ complete the notes with a word or short phrase.
You now have thirty Seconds to look at the notes.

## OET30 LISTENING MATERIALS – NOT FOR SALE ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH **Chrissy White Existing patient** Patient -(13) \_\_\_\_\_ pain. **Symptoms** (14) \_\_\_\_\_ pain Started with **Previous visit** Had (15) \_\_\_\_\_ (3 months prior) Sent away with (16) \_\_\_\_\_ Pain caused by Several things Particularly when p drinks (17) \_\_\_\_\_ or when patient eats (18) \_\_\_\_\_ (19) \_\_\_\_\_ pain Type of pain Site 20) Pt prefers (21) Filling suggested to metal **Extraction initially** As makes pt (22) " \_\_\_\_\_" resisted b/c Next steps and method Extraction Administer local anesthetic Numb tissue and do tests on gums Expand tooth socket Will pop out tooth with (23 \_\_\_\_\_ Information to note Pain killers required due to

That is the end of Part A. Now look at Part B.

Occupation

## 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.

(24) \_\_\_\_\_

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.

acknowledgement – oet official, e2 language, irs, british academy, oet onilne, maiwa and swoosh  $Now\ look\ at\ question\ 25.$ 

- 25. You hear an occupational therapist discussing a case study.

  How did the occupational therapist describe her patient's post-operative care?
  - A. It was exemplary
  - B. It was examplary
  - C. It was ex-temporary
- 26. You hear the director of nursing and head of resourcing discussing recruitment When is the induction session?
  - A. 15<sup>th</sup>
  - B. 8TH
  - C. 12Th
- 27. You hear two vets discussing a journal article How long has gene therapy been seen as a way to cure disease?
  - A. over 5 years
  - B. over 10 years
  - C. over 20 years....
- 28. You hear an optometrist with a new machine.

How far away should patients who need reading glasses should from the eye chart?

- A. 40 cm
- B. 6 m
- C. Both
- 29. You hear a podiatrist discussing research. Which group(s) did the podiatrist study?
  - A. Sports Women
  - B. Dancers
  - C. Both
- 30. You hear members of a hospital committee discussing issues on the ward? What was the suggestion given to deal with the lowered rating?
  - A. Purchase more beds
  - B. Use seats as beds
  - C. Neither

That is the end of Part B. Now look at Part C.

Part C

ACKNOWLEDGEMENT – OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH 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 31-38, 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 31-38

You hear doctor, Quentin Carver, giving a lecture on neurological conditions. You now have 90 seconds to read questions 31-38.

- 31. In dementia, which part of the brain loses the nerve cells?
  - A. Substantia Nigra
  - B. Dopamine Centre
  - C. Cervius Cortex
- **32.** According to Dr Carver, how many people in England have Parkinson's disease?
  - A. 120,000
  - B. 1 in 500
  - C. 145,000
- 33. What is the statistic of dementia sufferers who are younger than 40 years?
  - A. 95%
  - B. 5%
  - C. 1 in 20
- 34. Which of the following is not a symptom associated with Parkinson's disease
  - A. Involuntary movement
  - B. Stiff and inflexible muscles
  - C. Memory loss.
- 35. Which of the following drugs does Dr Carver recommend as treatment for Parkinson's disease?
  - A. Levodopa
  - B. Levothyroxine
  - C. Lansoprazole
- **36.** How much has Parkinsons UK raised for Parkinson's research and support?
  - A. Over £85 million
  - B. Over £89 million
  - C. Over £8.5 million

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- 37. How much has the Michael J. Fox foundation raised for Parkinson's research and support?
  - A. Over £85 million
  - B. Over £850 million
  - C. Over £800 million
- **38.** The end of the fear of Parkinsons can be hastened by ...?
  - A. Increased charitable giving
  - B. Research and clinical trials
  - C. All of the above

#### Now look at extract two.

#### Extract 2: Questions 39-46

You hear Nurse Claire Alexander, giving a presentation on lifestyle and wellbeing You now have 90 seconds to read questions 39-46....

- **39.** Which of the following statements is not true?
  - A. As an obese adult, you are 7 times more likely to become a type-2 diabetic than an average weight adult
  - B. Obesity as an adult increases the risk of heart disease
  - C. Obesity as an adult triples the risk of early death
- **40.** Type two diabetes...?
  - A. Doubles the risk of mental health illness
  - B. Doubles the risk of early death
  - C. Doubles the risk of cardiac disease
- **41.** Number of obese children entering primary school....
  - A. was 60% higher than those leaving it
  - B. was 60% lower than those leaving it
  - C. was 16% higher than those leaving it
- **42.** According to Ms Alexander, in 2017, how many children were classified as severely obese?
  - A. at least 21,001
  - B. at least 22,001
  - C. at least 23,001
- **43.** What proportion of children had 5 portions of fruit and vegetable a day?
  - A. approximately 1 in 4

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- B. approximately 1 in 5
- C. Approximately 1 in 6
- **44.** What proportion of adults had 5 portions of fruit and vegetable a day?
  - A. approximately 1 in 4
  - B. approximately 1 in 5
  - C. approximately 1 in 6
- **45.** How many items were prescribed for obesity treatment in the year 2016?
  - A. 460,000
  - B. 450,000
  - C. 416,000
- **46.** Which of the following is not true? The money spent on obesity could fund:
  - A. 223,000 new teachers
  - B. 160,000 nurses
  - C. 80,000 doctors

#### That is the end of Part C.

You now have two minutes to check your answers.

## **END OF THE LISTENING TEST**

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

## LISTENING SUB-TEST – ANSWER KEY PARTS A, B & C

## **PART A: QUESTIONS 1-12**

- 1. bluish colour / colouration
- 2. low oxygen (levels)
- 3. the body
- 4. (Cyanotic) heart disease
- 5. great arteries.
- 6. pulmonary artery
- 7. aorta
- 8. up to five / 5%
- 9. medicine
- 10. duct
- 11. surgical operation / procedure
- 12. correction

## **PART A: QUESTIONS 13-24**

- 13. Extreme
- 14. Numbing
- 15. X-ray
- 16. penicillin
- 17. something hot
- 18. something cold (in that order)
- 19. sharp
- 20. all over (teeth)
- 21. composite (resin)
- 22. "feel woozy
- 23. pliers
- 24. 24. Receptionist.

## PART B: QUESTIONS 25-30

- 25. A
- 26. B
- 27. C
- 28. A
- 29.C
- 30.B

## **PART C: QUESTIONS 31-38**

- 31.A
- 32. A
- 33.C
- 34. B

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- 35. A
- 36. A
- 37.C
- 38.B

## PART C: QUESTIONS 39-46

- 39.C
- 40.C
- 41.B
- 42.B
- 43.B
- 44. C
- 45.B
- 46. A

## END OF KEY

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

## **OET30 Listening Mock Test 5**

## Extract 1: Questions 1 – 12

You hear a GP talking to a patient called Joshua Ferguson.

For questions 1-12, complete the notes with a word or short phrase,

Patient	Joshua Ferguson		
Main symptoms	(1)		
	(2)		
	(3) frequently		
Medications	Mebeverine		
	(4)		
Recently underwent			
Procedure	(5)		
<b>Equipment and process</b>	Narrow, flexible (6) inserted		
Involved	through the back passage		
Results were	(7)		
Social History	Smokes (8) a day		
	<ul> <li>Drinks (9) socially- around a small</li> <li>glass every week or so.</li> <li>Hasn't taken recreational drugs since twenties.</li> </ul>		
Provisional	(10) colic.		
Diagnosis	Related to potential kidney stones.		
Symptoms that	Raised (11)and raised		
Support Diagnosis	(12)		
You now have thirty secon	nds to look at the notes.		

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

## Extract 2: Questions 13 – 24

You hear an obstetrician talking to a patient called Gabi Simcox.

For questions 13-24, complete the notes with a word or short phrase.

You now have thirty seconds to look at the notes.

Patient	Gabi Simcox		
	Existing patient		
	Reason for visit (13)		
	First time		
Medical History	Information needed to calculate due date		
Last period started	(14)		
Days in cycle	(15)		
	Had routine 8 week (16)		
	(17) likely to happen 2 weeks either side of estimated date.		
	Estimate is anywhere between (18) and		
	(19) weeks.		
pmHx			
No fertility Problems	Conceived in first month		
fHx of	Diabetes		
No fHx of	(20)Hypertension		
Allergies	Nuts		
Blood information	Blood type: (21)		
	Likely to cause problem		
	if pt's blood is (22) and		
	if baby's blood (23)		
Injection required	(24)		

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

#### 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.

Now look at question 25

- 25. You hear a nurses' handover.

  How many cycles of compressions and breaths did the nurse provide?
  - A. 5:6
  - B. 100:120
  - C. 30: 2
- 26. You hear a team of midwives discussing a difficult delivery. What did Rae suspect?
  - A. Small pelvis or narrow birth canal
  - B. Obstructed labour
  - C. Physical blockage
- 27. You hear a paediatrician discussing a Jaundice Action Plan.

What does the practitioner suggest that the patient should do?

- A. Provide the baby with light therapy.
- B. Admit the baby to have phototherapy.
- C. Expose the baby to natural sunlight.
- 28. You hear a pair of district nurses discussing a new project Where were the participants living?
  - A. In Staines
  - B. In Spain
  - C. In Maine
- 29. You hear a dentist discussing the scaling and polishing procedure. What is the purpose of the scrape?
  - A. To remove plaque
  - B. To remove tartar

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- C. To remove both
- 30. You hear a nurse and patient discussing an upcoming trip. Which medication does the nurse recommend?
  - A. Malarone
  - B. Mosquito Repellant
  - C. Quinine

#### 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 31-46, 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 31-38**

You hear Doctor Paul Arnold, giving a lecture on respiratory systems. You now have 90 seconds to read questions 31-38.

- 31. How many UK residents suffered from pulmonary disease in 2012?
  - A. 12.7 million
  - B. 8.0 million
  - C. 10.3 million
- 32. Lung cancer was responsible for what percentage of respiratory deaths between the years 2008-2012?
  - A. 6.1%
  - B. 5.6%
  - C. 6.0%
- 33. Which of the following is not a cause of lung disease?
  - A. Smoking
  - B. Inactive lifestyle
  - C. Genetics.
- **34.** Regarding air pollution, when compared to other European countries, where does the UK rank?
  - A. 2nd

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- B. 10th
- C. 20th
- 35. What proportion of COPD sufferers have not received a clinical diagnosis?
  - A. 23%
  - B. 33%
  - C. 66%
- **36.** Which of the following did Dr Arnold not mention as a treatment for lung disease?
  - A. Exercise more regularly
  - B. Bronchodilator inhalers
  - C. Stop smoking
- 37. What is the percentage number of deaths caused by lung disease in the female population?
  - A. 21.2%
  - B. 21.0%
  - C. 19.0%
- 38. In 2011, what proportion of hospital admissions were due to patients suffering from lung disease?
  - A. 8%
  - B. 10%
  - C. 8-10%

#### Now look at extract two.

#### Extract 2: Questions 39-46

You hear a doctor, Carl Harpenden, giving a presentation on diabetes. You now have 90 seconds to read questions 39-46.

- **39.** Which of the following statements are not true?
  - A. Diabetes causes blood sugar levels to become too high
  - B. 90% of diabetes sufferers have NIDDM
  - C. 6% of the UK population has diabetes
- **40.** High blood sugar levels can lead to...?
  - A. hypokalemia
  - B. hypoglycemia
  - C. hyperglycemia

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- 41. Which of the following is not a symptom of Type 2 diabetes?
  - A. Unusual tiredness
  - B. Low rates of urination
  - C. Blurred vision
- **42.** According to Dr Harpenden, what percentage of the UK population is overweight?
  - A. 28%
  - B. 63%
  - C. 85%
- **43.** By what percentage does obesity and BMI account for increased risk of experiencing type 2 diabetes?
  - A. 85%
  - B. 80%
  - C. 65%
- 44. An NHS report found that there are 24,000 excess deaths per year from diabetes sufferers, but what year was the report from?
  - A. 2013
  - B. 2012
  - C. 2011
- **45.** Which treatment is not primarily used to lower blood sugar levels in diabetes suffers?
  - A. Diarrhea
  - B. Metformin
  - C. Insulin
- **46.** Which of the following is not a side-effect of diabetes treatment?
  - A. Diarrhea
  - B. Bloating
  - C. Swollen knees

That is the end of Part C.

You now have two minutes to check your answer.

**END OF THE LISTENING TEST** 

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

### LISTENING SUB-TEST – ANSWER KEY

### PARTS A, B & C

### **PART A: QUESTIONS 1-12**

- 1. vomiting / vomited dark green liquid
- 2. pain
- 3. urinates
- 4. All in one multivitamin
- 5. Colonoscopy
- 6. camera
- 7. normal
- 8. 10 cigarettes a day
- 9. whisky
- 10. Renal
- 11. temperature
- 12. white (blood) cells.

### **PART A: QUESTIONS 13-24**

- 13. pregnancy
- 14.24th March
- 15.27
- 16. Ultrasound
- 17. birth
- 18.37
- 19.42
- 20. Cystic fibrosis
- 21. Rhesus Negative
- 22. different to baby's
- 23. mixes with pt's
- 24. Anti D

### PART B: QUESTIONS 25-30

- 25.C
- 26. B
- 27.C
- 28. A
- 29.C
- 30. A

### **PART C: QUESTIONS 31-38**

- 31.B
- 32. A
- 33.B

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- 34.B
- 35. A
- 36.C
- 37.C
- 38. A

### PART C: QUESTIONS 39-46

- 39. A
- 40. C
- 41.B
- 42.B
- 43. A
- 44. C
- 45.C
- 46. C

### **END OF KEY**

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

### **OET30 Listening Mock Test 6**

### Extract 1: Questions 1 - 12.

You hear an A & E doctor talking to a patient called Sarah Chapman. For questions 1-12, complete the notes with a word or short phrase. You now have thirty seconds to look at the notes.

Patient	Sarah Chapman
Chief complaint	Insomnia
Has problems with	(1) because of
	(2)
Medical History	
Notes about the Condition	Pt came for usual (3) checkup
	Difficulty walking started (4) difficulty sleeping
Medical History	
DOB	(5) /
Medications	Atorvastatin and (6)
	Is taking medication for (7) and type 2 diabetes
Social background	Hasn't smoked since (8) a day Used to smoke (9) a day
Recommendations	Book appointment with GP to discuss (10) medication
Action Items	Write to GP surgery to advise of pt's (11) Need to confirm (12)
Extract 2: Questions 13 – 24	

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

You hear a Nurse patient called Roberta Foss. For questions 13-24 complete the notes with a word or short phrase.

You now have thirty Seconds to look at the notes.

Patient	Roberta Foss
Pt suffers from	(13) Smokes 16 cigarettes a day ("lifelong smoker)
Medical History	
Uses	(14) daily
Other condition(s)	(15)
Evidence of	Heart disease
<b>Other medical issues:</b> Can't walk very far." Only g	goes
(16before out of base 3 hospital admissions within No (18) stays	
BP raised to (19)/	′ (20)
O2 saturation is (21)	on (22)
Next steps Tests	X-ray (23) blood gas
Other points to note	Pt has recently received
	(24) advice

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.

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- 25. You hear part of a presentation on nutritional physiology. Which chronic ailment is not directly related to nutrition?
  - A. Diabetes
  - B. Cancer
  - C. Obesity
- 26. You hear a team of dentists discussing the acquisition of a new chair. What is the make and model number of the chair?
  - A. Keavo 350 Full Spec Dental Chair
  - B. Keavo 360 Full Spec Dental Chair
  - C. Keavo 460 Full Spec Dental Chair
- 27. You hear a podiatrist discussing intermittent claudication. What is the major complication of the disease?
  - A. Severe rest pain
  - B. Blockage in the artery
  - C. Pain in the leg
- 28. You hear a vet discussing a rabies vaccination. Where did the vet send the blood sample?
  - A. The EU
  - B. A Lab
  - C. The Parents
- 29. You hear a pair of optometrists preparing for a conference What aspect of glaucoma management receives the most attention?
  - A. The medication
  - B. The emotional
  - C. The physical
- 30. You hear a group of radiographers discussing some new equipment. What kind of image is a typical x-ray?
  - A. 3D
  - B. 2D
  - C. 1D

### 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 31-38

You hear a psychiatrist, Justin Harrisberg, giving a lecture on mental health

- 31. What feature of depression makes it unlike any other illness?
  - A. that it presents in multiple ways
  - B. difficulties with detection
  - C. that it affects individuals differently
- **32.** How many antidepressants were prescribed in 2015?
  - A. 61 million
  - B. 65 million
  - C. 4 million
- 33. What percentage of depression cases in the UK go without treatment?
  - A. 12%
  - B. 40%
  - C. 60%
- **34.** Which of the following is not an effect associated with depression?
  - A. Experiencing the ability to "snap-out of the line.
  - B. Experiencing extreme highs and lows
  - C. Experiencing extended periods of "feeling down"
- 35. One of the difficulties diagnosing depression stems from perception that....?
  - A. Suffers should be able to treat themselves
  - B. Suffers are afraid to seek help
  - C. Suffers are not believed
- **36.** In the year 2014, how many people over the age of 10 deaths by suicide?
  - A. 6,122
  - B. 18,000
  - C. 6,132
- 37. What percentage of all mental health patients did not receive appropriate treatment for their specific illness?
  - A. 90%
  - B. 80%

acknowledgement – oet official, e2 language, irs, british academy, oet onilne, maiwa and swoosh  $C.\ 75\%$ 

- 38. Suicide remains the biggest killer of which population in the UK?
  - A. Men over 50 years old
  - B. Men at 50 years old
  - C. Men under 50 years old.

### Now look at extract two.

### Extract 2: Questions 39-46

You hear a Doctor Francis Heinz, giving a presentation on Alzheimer's and early onset dementia.

You now have 90 seconds to read questions 39-46

- 39. According to the doctor, how many UK inhabitants currently suffer from dementia?
  - A. 225,000
  - B. 40,000
  - C. 850,000
- **40.** How many UK inhabitants will suffer from dementia?
  - A. 1 in 6 over 80 years old
  - B. 1 in 4 over 60 years old
  - C. 1 in 14 over 80 years old
- **41.** From the years 1974-2014 by how many years did the UK median population rise?
  - A. 40 years
  - B. 7 years
  - C. 33 years
- **42.** How much does Dr Heinz say that dementia costs the UK economy?
  - A. £55 billion
  - B. £11 billion
  - C. £26 billion.
- 43. What major problem regarding financial allocation towards Alzheimer's and dementia does Dr Heinz imply?
  - A. The country does not spend enough on treatment
  - B. The country does not spend enough on research
  - C. The country does not spend enough on fundraising.

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- **44.** According Dr Heinz, how much more financial assistance does cancer research receive than Alzheimer's research?
  - A. 7 times more
  - B. £74 million more
  - C. 10 times more
- 45. What challenge to future treatment plans for Alzheimer's and dementia does Dr Heinz point out?
  - A. A lack of future plans
  - B. A lack of future funding
  - C. A lack of future treatment
- **46.** By how many percent should the number of patients made available for clinical trials rise?
  - A. 4%
  - B. 10%
  - C. 6%

That is the end of Part C.

You now have two minutes to check your answers.

END OF THE LISTENING TEST

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

### LISTENING SUB-TEST – ANSWER KEY

### PARTS A, B & C

### **PART A: QUESTIONS 1-12**

- 1. legs
- 2. ache/cramps
- 3. annual
- 4. (long) before
- 5. 14/05/1952
- 6. Metformin
- 7. high cholesterol
- 8. 10 years (NOT 10 years ago)
- 9. 15
- 10. cholesterol
- 11. cramps
- 12. GP's details.

### **PART A: QUESTIONS 13-24**

- 13. COPD
- 14. Inhalers
- 15. Mild hypertension
- 16.30 yards
- 17.5
- 18. ICU
- 19.148 /
- 20.92
- 21.93%
- 22. room temperature
- 23. arterial
- 24. smoking cessation

### **PART B: QUESTIONS 25-30**

- 25.C
- 26. A
- 27.C
- 28.B
- 29.C
- 30.B

### PART C: QUESTIONS 31-38

31.A

## OET30 LISTENING MATERIALS – NOT FOR SALE ACKNOWLEDGEMENT – OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH 32. A 33. B 34. A 35. B 36. A 37. C 38. C PART C: QUESTIONS 39-46

- 39.C
- 40. A
- 41.C
- 42.C
- 43.B
- 44.B
- 45. A
- 46. A

### **END OF KEY**

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

You hear a GP talking to Emily Montgomery, a patient's mother.

For questions 1-12, complete the notes with a word or short phrase.

### **OET30 Listening Mock Test 7**

Extract 1: Questions 1 – 12

Extract 2: Questions 13-24

### You now have thirty Seconds to look at the notes. **Patient** John Montgomery 1] \_\_\_\_\_ that has lasted for Son's symptoms 2] \_\_\_\_\_and pt has also 3] \_\_\_\_twice **Medical History** Has had symptoms Lasted for (4) \_\_\_\_\_ history past similar At that time, the pain lasted for (5) \_\_\_\_\_ but pt did not vomit in the past Pt also suffers from (6) \_\_\_\_\_ On examination (7) \_\_\_\_\_ was more swollen than (8) \_\_\_\_\_ Testicular torsion Suspected diagnosis **Treatment** Requires (9) \_\_\_\_\_ Otherwise lack of (10) \_\_\_\_\_ can occur after (11) \_\_\_\_\_ Potential (12) \_\_\_\_\_ suspected Additional points raised

### You hear a Nurse talking to a patient called Megan Armstrong regarding his daughter. For questions 13-24, complete the notes with a word or short phrase. You now have thirty seconds to look at the notes.

### OET30 LISTENING MATERIALS - NOT FOR SALE ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH **Patient** Megan Armstrong Complaint (13) \_\_\_\_\_ Daughter's age (14) \_\_\_\_\_ **Consultation notes Daughter's Dietary** requirements (15) \_\_\_\_\_ Requires test to Allergic reaction is body reacting identify the to something it that it (16) \_\_\_\_\_ Pt's mother feels Upset (17) \_\_\_\_\_ in case of future Suggested next steps (18) \_\_\_\_\_ which should be given in the (19) \_\_\_\_\_ (20) \_\_\_\_\_ : (21) \_\_\_\_\_ Symptoms to detect (22) \_\_\_\_\_: (23) \_\_\_\_\_ And vomiting such an episode include (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.

Now look at question 25

Provided parent with

- You hear a podiatrist discussing how she prepares for a consultation 25. What does the podiatrist ask the patient about first?
  - A. Medications
  - B. Medical conditions
  - C. Medical history

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- 26. You hear trainee speech pathologists discussing a staff retreat. What were the staff exploring using phonics?
  - A. Forming relationships
  - B. Memory problems
  - C. Cognitive Impairments
- 27. You hear an extract from a presentation on brain cancer.

What is the name of the cancer?

- A. Glioblastoma Mitochondria
- B. Glioblastoma Apoptosis
- C. Glioblastoma Multiforme
- 28. You hear a physiotherapist consulting on fatigue. What caused the patient's condition?
  - A. Her exhaustion
  - B. Her treatment
  - C. Neither
- 29. You hear a dietician reporting on research.

  What was the name of the nutrient in the research?
  - A. Bumpynut
  - B. Plumpinut
  - C. Peanut
- 30. You hear a group of radiographers discussing a spirometer. What does Jane not mention as a use for Spirometers?
  - A. To diagnose lung conditions
  - B. To measure ventilation rates
  - C. To diagnose COPD

### 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 31-38

You hear a Radiographer, Greg Knight, giving a lecture on broken bones. you now have 90 seconds to read questions 31-38.

- 31. In the period April 2015 March 2016, what percentage of imaging tests were xrays?
  - A. 56%
  - B. 66%
  - C. Up to 6%
- 32. In March 2016, how many ultrasound tests were administered?
  - A. 0.90 million
  - B. 0.75 million
  - C. 1.90 million
- 33. Which of the following does Dr Knight not list as a symptom of a fracture?
  - A. Swelling and bruising over the bone
  - B. Soreness in the affected area
  - C. Bone visibility
- **34.** Patients with compound fractures who were seen before 6 hours of injury were susceptible to what infection rate?
  - A. 12.5%
  - B. 12.0%
  - C. 13.5%
- 35. Dr Knight claims that patients receive their x-ray results on the same day as their test ...?
  - A. 0-3% of the time
  - B. 23% of the time
  - C. 33% of the time
- **36.** Which of the following variables do not affect the treatment of a fracture?
  - A. Cause of fracture
  - B. Severity of fracture
  - C. Area of fracture
- 37. Which of the following is not a type of skull fracture?
  - A. Depressed fracture
  - B. Basal fracture
  - C. Distressed fracture
- **38.** Linear skull fractures

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- A. Is the most severe skull fracture
- B. Sometimes requires neurosurgery
- C. Usually causes pain that lasts up to ten days

### Now look at extract two.

### Extract 2: Questions 39-46

You hear a Dentist, Doctor Lara Softe, giving a presentation on oral hygiene and tooth decay.

You now have 90 seconds to read questions 39-46.

- **39.** Of those surveyed, who does the total of 22.2 million refer to?
  - A. 22.2 million adults who visited a dentist globally
  - B. 22.2 million adults who visited a dentist in the British Isles
  - C. 22.2 million adults who visited a dentist in the UK.
- **40.** What was the same statistic in 2015?
  - A. Approximately 22.0 million
  - B. Approximately 22.1 million
  - C. Approximately 22.2 million
- 41. What percentage of children has seen a dentist in the last 24 months?
  - A. 58.2%
  - B. 51.4%
  - C. 57.6%
- **42.** Recently, more adolescents are visiting the dentist due to
  - A. tooth restructure
  - B. tooth replacement
  - C. tooth removal
- 43. What is the current cost to the UK economy of rotten tooth extractions?
  - A. £27.3 million
  - B. £36.2 million
  - C. £32.3 million
- 44. Which of the following is not proven to improve oral hygiene or tooth decay?
  - A. Lowering all sweet food intake
  - B. Flossing
  - C. Brushing twice daily
- **45.** How many children under the age of six suffer from some form of tooth decay?

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- A. 3 in 4
- B. 1 in 3
- C. 1 in 4
- **46.** One of the challenges the government is facing with effecting change to children's diet is that
  - A. they have little control over their meals
  - B. They receive little guidance from their parents
  - C. both A and B

### That is the end of Part C.

you now have two minutes to check your answers.

### END OF THE LISTENING TEST

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

### LISTENING SUB-TEST – ANSWER KEY

### PARTS A, B & C

### **PART A: QUESTIONS 1-12**

- 1. pain
- 2. 4 hours
- 3. vomited
- 4. 6 months
- 5. 4 hours
- 6. asthma
- 7. Right testicle
- 8. Left
- 9. Torison
- 10. surgical exploration
- 11. Oxygen
- 12. STI

### **PART A: QUESTIONS 13-24**

- 13. Daughter collapsed
- 14.4
- 15. vegan
- 16. allergen
- 17. epipen
- 18. anaphylaxis / emergency
- 19. abdomen
- 20. thigh;
- 21. swelling of lips;
- 22. abdominal pain;
- 23. nausea
- 24. Pamphlet

### **PART B: QUESTIONS 25-30**

- 25.C
- 26. B
- 27.C
- 28.C
- 29.C
- 30.B

### PART C: QUESTIONS 31-38

31.A

# OET30 LISTENING MATERIALS – NOT FOR SALE ACKNOWLEDGEMENT – OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH 32. B 33. B 34. B 35. C 36. A 37. C 38. B PART C: QUESTIONS 39-46

### 39. C 40. B 41. A 42. C 43. B 44. A

44. A 45. C

46. A

**END OF KEY** 

### **OET30 Listening Mock Test 8**

### 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 GP talking to a patient called Daniel Anderson. For questions 1-12, complete the notes with a word or short phrase. You now have 30 seconds to look at the notes

Patier	nt	Daniel Anderson	
Presenting Symptoms		2 wks (1)	than usua
		Short of breath	
		Cold/sore throat	
Recer	nt History		
>	Last (2) months	S	
	Ongoing condition		
	Patient managed condition		
	Bad sore throat and (3)		
	Fatigue		
	Shortness of breath becom	ing more (4)	
	Breathing normal (5)		
	No history (6)/	chest problem	
	Non-vegetarian	<i>≅</i> 3	
	Describes diet as (7)		
	Low fruit and vegetable in	take	
	Drinks (8) of co	offee a day	
	Ongoing mild indigestion		
	Bowel Function - (9)		
Famil	y History		
>	No family history (10)	3 × 3 × 3 × 3 × 3 × 3 × 3 × 3 × 3 × 3 ×	

### OET30 LISTENING MATERIALS – NOT FOR SALE ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH Parents healthy > (11) \_\_\_\_\_ -no known health problems ➤ Patient suspects (12)\_\_\_\_\_ Extract 2: Questions 13-24 You hear a GP talking to a patient called Mrs Wright. For questions 13-24, complete the notes with a word or short phrase. You now have thirty seconds to look at the notes. Patient Mrs Wright **Background** Follow up consultation Patient has (13) \_\_\_\_\_ ➤ Initial episode (14) \_\_\_\_\_ months ago ➤ Prescribed (15) \_\_\_\_\_ for 5 days Alopurinol Recurrence of gout just (16) ➤ Gout originates at bottom of (17) \_\_\_\_\_ > on the (18) \_\_\_\_\_ foot Swelling radiates across toes towards (19) \_\_\_\_\_\_ of foot ➤ Hot and inflamed ➤ No swelling in (20) \_\_\_\_\_ Responded well to medication Swelling settled within (21) \_\_\_\_\_ ➤ Ongoing (22) \_\_\_\_\_\_ in toe ➤ Suspected (23) \_\_\_\_\_ ➤ X-ray clear **Treatment** > Patient has some concerns ➤ Patient agrees medication effective Clinical Decision: (24) \_\_\_\_\_ with current Medications

### 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.

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

25. You hear a nurse in the emergency department discussing the care of a patient with a doctor.

What do the speakers agree to do?

- A. Put the patient's arm in a sling.
- B. Wait for the patient to calm down.
- C. Treat the patient's pain to relax the arm.
- 26. You hear a trainee doctor discussing a patient diagnosis with a tutor. What is the diagnosis?
  - A. Coeliac disease
  - B. Constipation
  - C. Bilateral lower abdominal pain
- 27. You hear a hospital nurse briefing a colleague about a patient recovering from elective surgery.

What does he want his colleague to do?

- A. review post-op information with the patient
- B. provide pain relief for the patient
- C. get the patient a medical certificate
- 28. You hear two hospital managers talking about an information session for people who want to do voluntary work.

What problem do the managers discuss?

- A. How difficult it is for participants to get to the event.
- B. Technical issues with the event management systems.
- C. Finding good quality food and drinks for the event.
- 29. You hear a pharmacist talking to a doctor about a patient's medication. What is the pharmacist doing?
  - A. reporting side effects
  - B. checking the dosage
  - C. recommending an alternative
- 30. You hear a doctor advising a patient about a change in medication. What condition is the patient being treated for?
  - A. hay fever.
  - B. drowsiness.
  - C. hives

That is the end of Part B. Now look at Part C.

Part C

ACKNOWLEDGEMENT – OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH 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

- 31. What is Dr Cristine Ericson's opinion about fasting before blood tests?
  - A. It is not supported by scientific evidence.
  - B. It is superior to non-fasting blood tests.
  - C. It is supported by convention not data.
- 32. What does Dr Cristine Ericson say about the research on non-fasting blood tests?
  - A. The majority comes from Copenhagen.
  - B. More studies should focus on children.
  - C. It includes data from multiple countries.
- 33. What is Dr Cristine Ericson's opinion on the difference between the results of fasting and non-fasting tests?
  - A. The small differences are unimportant.
  - B. There is no difference in the results.
  - C. There is a small but significant difference.
- 34. Dr Cristine Ericson states that everyone in Copenhagen was happy with the introduction of non-fasting blood tests.

What evidence does she provide to support this claim?

- A. Data showing an increase in test attendance.
- B. Increased public demand for non-fasting tests.
- C. Positive stories from other medical professionals.
- 35. According to Dr Cristine Ericson, why are non-fasting blood tests popular with the public?
  - A. Because of the strong research evidence in the report.
  - B. Because of positive publicity in the newspaper and on TV.
  - C. Because they are more convenient for busy lifestyles.
- **36.** Which of the following statements best summarises Dr Cristine Ericson's position on the use of fasting or non-fasting blood tests?
  - A. In rare cases fasting before a blood test is necessary.

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- B. Fasting before a blood test should no longer be recommended.
- C. New research is needed on the use of fasting and non-fasting tests.

### Now look at extract two.

### Extract 2: Questions 37-42

You hear a presentation in which a researcher called Dr Milan Patrecivich is talking about the relationship between new technology and medicine in the future. You now have 90 seconds to read **questions 37-42.** 

- 37. Dr Patrecivich suggests that in the future medical technology will
  - A. continue to replace human doctors.
  - B. give doctors freedom to express core skills.
  - C. become more accurate and reliable than doctors.
- 38. According to Dr Patrecivich, how will wearable sensors and smartphones help GPs?
  - A. They will allow doctors mobility to visit patients in remote locations.
  - B. They will allow doctors to check if patients are following their advice.
  - C. They will allow doctors to monitor their patients with real-time data.
- 39. Dr Patrecivich believes that
  - A. radiologists currently spend too much time checking through images.
  - B. technology like IBM's Medical Sieve isn't yet capable of doing a radiologist's job.
  - C. radiography algorithms should be designed by professional radiologists.
- **40.** According to the talk, both sports medicine and oncology
  - A. will use technology to make their processes faster and cheaper.
  - B. will use technology to filter data and individualise therapy.
  - C. will use technology like Xbox to treat patients from a distance.
- **41.** What does Dr Patrecivich suggest about the effect of technology on cancer treatment?
  - A. Artificial intelligence technology will eventually cure cancer.
  - B. Oncologists will keep patients informed using social media.
  - C. Technology will have a powerful and positive effect on oncology.
- **42.** What is Dr Patrecivich's conclusion about the future of medicine and technology?
  - A. Medical technology will give doctors more time and better data to care for patients.

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- B. Physicians will have amazing opportunities to develop new medical technologies.
- C. Automated and robotic systems will gradually replace humans in medical practice.

That is the end of Part C.

You now have two minutes to check your answers.

THAT IS THE END OF THE LISTENING TEST

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

### LISTENING SUB-TEST – ANSWER KEY

### PARTS A, B & C

### **PART A: QUESTIONS 1-12**

- 1. a bit more tired I more tired I tireder
- 2. couple of / two/ 2
- 3. big glands / glands felt quite big / swollen glands /glands bigger
- 4. noticeable
- 5. at rest
- 6. of asthma
- 7. terrible
- 8. 4 or 5 cups / four or five cups / 4 cups / four cups / 5 cups / five cups / 4-5 cups / 4 to 5 cup:
- 9. Normal / fine
- 10. anemia/blood disorders /of anemia / of blood disorders
- 11. brother
- 12. related to glandular fever / glandular fever

### **PART A: QUESTIONS 13-24**

- 13. gout
- 14. 2 or 3 / two or three / 2-3 / 2 3 / two to three
- 15. steroids / prednisone / prednisone 30mg
- 16. after Christmas / after Xmas
- 17. second toe / the second toe
- 18. left
- 19. the outside / outside
- 20. big toe / the big toe
- 21. a week / one week / 1 week / 7 days / seven days
- 22. pain
- 23. stress fracture / stress-fracture
- 24. carry on / continue

### PART B: QUESTIONS 25-30

- 25. C
- 26. B
- 27.C
- 28. C
- 29. A
- 30. A

### PART C: QUESTIONS 31-36

### OET30 LISTENING MATERIALS – NOT FOR SALE ACKNOWLEDGEMENT – OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH 31. C 32. C 33. A 34. B 35. C

### PART C: QUESTIONS 37-42

37. B 38. C 39. A 40. B 41. C 42. A

36.B

### END OF KEY

### **OET30 Listening Mock Test 9**

### 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 will hear part of a consultation between a psychologist and a patient called Mr Barry.

For questions 1-12, complete the notes with a word or short phrase.

Patient	Mr Barry			
Background	Continued anxiety and (1)Started medication (2) ago			
Medication				
<ul> <li>citalopram / chlordiazepoxide</li> <li>chlordiazepoxide (3) Mg (4) daily</li> <li>non-compliant</li> <li>feels meds don't (5) him sufficiently</li> <li>patient trying to (6) More</li> <li>citalopram 20mg</li> <li>side effects: ongoing (7) improving</li> <li>stress related ?</li> <li>possible (8)</li> <li>takes citalopram (9)</li> </ul>				
<b>Symptoms</b>				
<ul> <li>Palpitation</li> <li>feels (10)</li> <li>patient note</li> <li>went to see</li> </ul>	to leave house ons / SOB / intense fear ) when outside ormalizing shops for the (11) ginning (12)			

**Extract 2: Questions 13-24** 

ACKNOWLEDGEMENT – OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH You will hear part of a consultation between a GP and a patient called Mr Martin. For questions 13-24

complete the notes with a word or short phrase.

Pa	atient	Ν	[r	N	N	ar	ti	n
		-	 	_				

### **Background / Symptoms:**

Stomach pain
Condition present (13)for years but worse recently
Located across (14) of abdomen radiating towards (15)
Describes pain as not severe
Like an (16)
Pain moves side to side
Patient suspects (17) Problems
Feels (18) as well as pain
Ongoing problem
4 yrs ago diagnosed suspected (19)
Bowel movements variable
Ongoing problems with (20)
but recently stool (21)
Drinks plenty of water
No diarrhea
No presence of (22) in stool
No black motions

### **Medication:**

- Previously prescribed Colofac
- ➤ Monitors diet rather than take (23) \_\_\_\_\_
- Takes OTC (24) \_\_\_\_\_ capsules which provide relief

### 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 and a trainee discussing the application of a plaster cast. What does the trainee need to tell the patient about the cast?

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- A. The appropriate length of time to let the cast dry properly
- B. The temperature of the cast as it begins to harden.
- C. The reduction in the fracture after the cast has been applied.
- 26. You hear a manager explaining new data management processes to clinical staff.

What should staff do with their feedback reports?

- A. File them on paper and digitally
- B. Copy them onto the new servers
- C. Fill them out digitally to save time
- 27. You hear a presentation about the introduction of a new type of wound dressing.

What is the main advantage of the new wound dressing?

- A. They are ideal for oozing wounds due to high absorbency.
- B. They are made from naturally bacteria resistant seaweed.
- C. They are somewhat less costly than traditional cloth bandages.
- 28. You hear two hospital managers discussing completion rates for an online course.

How will management inform staff who do not attend the meeting about the deadline?

- A. Face to face
- B. By email
- C. Over the phone
- 29. You hear two colleagues discussing an online training course What advice does the female nurse give her colleague?
  - A. request IT help to reset so he can complete the course.
  - B. wait until the weekend and complete the course.
  - C. advise a manager that he has completed the course.
- 30. You hear an educator describing methods for creating medical abbreviations to nursing trainees.

Why does the speaker think it is important for trainees to understand the different methods of abbreviating?

- A. So they can create new abbreviations using the first letter rule.
- B. So they can easily pronounce medical acronyms accurately.
- C. So they can more efficiently learn commonly used abbreviations.

That is the end of Part B. Now look at Part C.

Part C

ACKNOWLEDGEMENT – OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH 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.

- 31. How does Dr Lee describe the movement from traditional care systems to non-visit care?
  - A. Large pre-existing medical providers will probably dominate the market.
  - B. There will be a mixture of reactions from existing and new organisations.
  - C. Flexible new organisations will have an advantage over existing ones.
- 32. According to Dr Lee a non-visit care culture
  - A. views face to face consultations as a final resort in treatment.
  - B. will develop more rapidly in new medical start-ups
  - C. requires a blend of responses from medical organisations.
- 33. Dr Lee believes that current technology is.
  - A. closely matched to users medical needs.
  - B. changing expectations for medical services.
  - C. not capable of supporting non-visit care yet.
- **34**. Dr Lee suggests that in person visits
  - A. ideally occur earlier in the care process.
  - B. have a negative impact on many patients.
  - C. should be easy for patients to manage
- 35. Why does Dr Lee mention specimen collection services?
  - A. To highlight the expense of creating offices and labs
  - B. To describe how these services could be provided more efficiently.
  - C. To suggest they could be delivered more nimbly with technology.
- **36.** What advice does Dr Lee give organisations wanting to move to non-visit care models?
  - A. Wait for more precise technology before transitioning to remote care.
  - B. Re-evaluate the safety and quality of non-visit care before making the change.
  - C. Find transition opportunities by close analysis of each instance of in-person care.

Now look at extract two.

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

### Extract 2: Questions 37-42

- 37. The research suggests that in the USA
  - A. supervised injection centres are fundamentally different.
  - B. supervised injection centres are being successfully integrated.
  - C. supervised injection centres have the same impact as elsewhere.
- 38. According to Dr Davidson the secret facility was
  - A. based on international evidence and good practice
  - B. waiting for legal advocacy in the United States.
  - C. experiencing the death of too many patients.
- 39. According to Dr Davidson what is the outcome of having staff and drug users in the same room?
  - A. Patient check in and registration is more efficient
  - B. Overdose prevention is the major benefit.
  - C. Staff can address many potential health issues.
- **40.** What does Davidson suggest users of the centre most appreciate?
  - A. the clean and hygienic surfaces
  - B. the private and relaxed space
  - C. they can't get arrested there
- 41. Some users of the facility suggested that the facility
  - A. needs a far more open space.
  - B. can't combine with other services since it is secret.
  - C. would be better as a treatment agency.
- **42.** What concern did staff raise about the running of the facility?
  - A. That patients might disclose information about the centre
  - B. Necessary exclusion of psychologically ill patients
  - C. The small number of patients they could help

### That is the end of Part C.

You now have two minutes to check your answers.

### THAT IS THE END OF THE LISTENING TEST

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

### LISTENING SUB-TEST – ANSWER KEY

### PARTS A, B & C

### **PART A: QUESTIONS 1-12**

- 1. panic attacks
- 2. 3/ three weeks / 3 weeks
- 3. 20/ twenty
- 4. 3/three / three times / 3 times
- 5. Suppress
- 6. Exercise
- 7. Headaches
- 8. ear infection
- 9. at night
- 10. sick and dizzy / dizzy and sick
- 11. first time / 1st time
- 12. medication

### **PART A: QUESTIONS 13-24**

- 13. on and off / off and on
- 14. upper part
- 15. middle
- 16. irritation
- 17. kidney
- 18. bloated
- 19. irritable bowel syndrome /IBS/ irritable bowel
- 20. constipation
- 21.loose
- 22. blood or slime / slime or blood
- 23. laxatives
- 24. Peppermint oil

### **PART B: QUESTIONS 25-30**

- 25.B
- 26. A
- 27. A
- 28. A
- 30.C

29.C

### PART C: QUESTIONS 31-36

31.B

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- 32. A
- 33.B
- 34. C
- 35.B
- 36.C

### **PART C: QUESTIONS 37-42**

- 37.C
- 38. A
- 39.C
- 40.B
- 41.B
- 42.B

### END OF KEY

### **OET30 Listening Mock Test 10**

### 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 will hear part of a consultation between a GP and a patient called Mrs Brownstone, For questions 1-12.complete the notes with a word or short phrase.

Brownston	ne, For questions 1-12.complete the notes with a word or si			
Patient: Mrs Brownstone				
Backgrou	ind / Symptoms:			
<ul> <li>Rec</li> <li>Syr</li> <li>Pat</li> <li>Rec</li> <li>Rec</li> <li>Rec</li> <li>Tre</li> <li>Syr</li> <li>Pat</li> <li>No</li> <li>Pai</li> <li>Ant</li> <li>(8)</li> <li>No</li> </ul>	cently (1) burning sensation mptoms present approximately (2) Weeks cient suggests symptoms related to (3) scribes pain as not severe curring condition cated for similar symptoms (4) in last (5) mptoms come and go cient forgets to drink water cturia (6) Nightly n, urgency, (7) greater at night tibiotics effective in the past urinary incontinence impact from coughing, sneezing ccessful colposuspension: aged (9)  on:			
	Known allergies: (10)			
	Amoxil			
	(11)			
	Nitrofurantoine			

### **Treatment Plan:** Short course nitrofurantoine Review appointment in (12) \_\_\_\_\_ Extract 2: Questions 13-24 You will hear part of a consultation between a doctor and a patient called Mrs Chambers. For questions 1-12, complete the notes with a word or short phrase. Mrs Chambers Patient: **Background / Symptoms:** ➤ Presented after heavy bleeding approximately (13) \_\_\_\_\_ Ago ➤ 36 weeks pregnant ➤ Previous episode at (14) \_\_\_\_\_ lasted approx. two hours Estimated bleed 1/2 cup Current episode (15) \_\_\_\_\_ Hours ➤ Ongoing (16) \_\_\_\_\_ and passing clots Estimated bleed 1 cup ➤ Tightness / cramps Severe pain in (17) \_\_\_\_\_ concurrent with bleeding Symptoms come and go "like period pain" Pregnancy normal to date ➤ Previous scan found (18) \_\_\_\_\_ ➤ No further scans scheduled ➤ 12-week scan showed baby was (19) \_\_\_\_\_ but fine ➤ Antenatal clinic visit normal ➤ Low (20) \_\_\_\_\_ ➤ Number of previous pregnancies: (21) \_\_\_\_\_ ➤ Boys, (22) \_\_\_\_\_ Healthy Normal delivery ➤ 4 four years ago-abdominal myomectomy. ➤ Suffered from (23) \_\_\_\_\_ body aches, fever Emergency (24) \_\_\_\_\_ found large fibroids. 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

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

OET30 LISTENING MATERIALS - NOT FOR SALE

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

Now look at question 25.

answers as you listen.

people talking in a different healthcare setting.

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

25. You hear a doctor and a nurse reviewing a coma patient.

What is the Doctor checking for?

- A. The symptoms the patient is exhibiting
- B. The severity of the patient's coma
- C. The range of mobility of the patient
- 26. You hear a consultant emergency doctor talking to a patient following an accident.

What is she doing?

- A. explaining why she is removing the neck brace
- B. clarifying the need for multiple scans and surgery
- C. outlining the full extent of the patient's injuries
- 27. You hear a clinical researcher introducing a professional development workshop.

What is the aim of the workshop?

- A. To give participants strategies to gain greater trust from the public.
- B. To introduce participants to the basics of mathematical statistics.
- C. To lead participants to a deeper critical understanding of research
- 28. You hear an emergency ward doctor directing her team while treating an accident victim.

What is the doctor most concerned about?

- A. The severe injury to the patient's left leg.
- B. The possibility of other less apparent injuries.
- C. The limited circulation of blood around the injury.
- 29. You hear a doctor speaking to a woman who has presented with heart palpitations

What treatment does the patient require?

- A. Intravenous medication
- B. a neck massage
- C. training in breath control
- 30. You hear an emergency paramedic talking to an accident and emergency doctor about a patient who has fallen from his motorcycle.

What is the paramedic doing?

- A. confirming what happened to the man in the accident
- B. summarising the patient's injuries and treatment
- C. suggesting appropriate pain medication to administer

That is the end of Part B. Now look at Part C.

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

#### 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

- 31. What is the stated purpose of the talk?
  - A. To evaluate if the audience are feeling burnout
  - B. To inform and stimulate discussion about burnout
  - C. To describe new research on treatment of burnout
- 32. What did the research from the Mayo Clinic show?
  - A. In 2011 more than half of US doctors claimed to have burnt out.
  - B. The large number of doctors with burnout is continuing to rise.
  - C. Typically one aspect of a doctors work makes them burn out.
- **33.** What is the Anna Capstone's attitude to the problem of burnout?
  - A. Most doctors can handle burnout.
  - B. Doctors with burnout should retire.
  - C. Burnout endangers patients and doctors.
- **34.** How does Anna Capstone think the problem of burnout should be addressed?
  - A. Hospitals should fund wellness programs for burnt out staff.
  - B. Multiple strategies are needed to keep doctors functioning and healthy.
  - C. By discouraging doctors from losing empathy and making mistakes.
- 35. How does Anna Capstone evaluate the role of administrative technology and regulations?
  - A. As a cheap and reliable way of collecting payment.
  - B. As confusing and stressful for doctors.
  - C. As something few doctors have really complained about.
- **36.** Anna Capston argues that protecting the well-being of highly trained medical staff
  - A. is an ethical issue.
  - B. isn't part of workplace safety.
  - C. will require too many resources.

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

#### Now look at extract two.

#### Extract 2: Questions 37-43

- 37. Dr MacGregor believes that
  - A. most people will find the healthiest diet quite surprising.
  - B. intake of meat, eggs, and dairy is an essential part of a balanced diet.
  - C. the public is quite well informed about the ideal foods for a healthy diet.
- **38.** What is Dr MacGregor's attitude to dieting?
  - A. More people should go on diets.
  - B. Dieting is a lifestyle choice.
  - C. Diets are generally ineffective
- **39.** Which industry first "used science against itself"?
  - A. The meat industry.
  - B. The egg industry.
  - C. The tobacco industry.
- **40.** According to Dr MacGregor, in the mid 20th century
  - A. the public respected and trusted science to reveal the truth.
  - B. smokers clearly understood the risks associated with tobacco use.
  - C. the US Surgeon General first reported on the cancer risk from smoking.
- **41.** According to Dr MacGregor the tobacco industry
  - A. gathered a mass of evidence on the dangers of smoking.
  - B. used its influence to slow down government responses.
  - C. has finally recognised that smoking causes lung cancer.
- **42.** The article suggests that the tobacco and food industries share which tactic?
  - A. Funding their own research to confuse people.
  - B. Using the motto "doubt is our product".
  - C. Denying evidence that their products are bad.
- **43.** What do the healthiest and longest living communities in the world have in common?
  - A. they eat a lot of legumes.
  - B. they are religious communities.
  - C. they have a 97% plant-based diet.

That is the end of Part C. You now have two minutes to check your answers.

#### THAT IS THE END OF THE LISTENING TEST

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

#### LISTENING SUB-TEST – ANSWER KEY

#### PARTS A, B & C

## **PART A: QUESTIONS 1-12**

- 1. going more
- 2. 3 to 4 weeks/3 weeks/3-4 weeks/4 weeks
- 3. age / old age
- 4. 5 times / five times
- 5. 10 years / ten years
- 6. 3 times or more 3 times / three times or more/ three times
- 7. Pressure
- 8. No
- 9. 50
- 10. Septrin
- 11. Trimethoprim
- 12.5 days / five days

## **PART A: QUESTIONS 13-24**

- 13.1 week/ one week
- 14.28 weeks/ twenty eight weeks
- 15.3/ three
- 16. Spotting
- 17. lower abdomen
- 18. the placenta was low / placenta low/ the placenta low
- 19. small
- 20. down's risk
- 21.1/one
- 22. Twins
- 23. Migraines
- 24. mri

### PART B: QUESTIONS 25-30

- 25.A
- 26.C
- 27.C
- 28. B
- 29. A
- 30.B

## **PART C: QUESTIONS 31-36**

- 31.B
- 32.B
- 33.C

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- 34.B
- 35.B
- 36. A

## **PART C: QUESTIONS 37-43**

- 37.C
- 38. C
- 39.C
- 40. A
- 41.B
- 42. A
- 43. A

## END OF KEY

## **OET30 Listening Mock Test 11**

#### 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 an obstetrician talking to a patient called Melissa Gordon. For questions 1-12complete the notes with a word or short phrase, You now have 30 seconds to look at the notes

Patien	t: Melissa Gordon
	works as a (1)
Medic	al history:
AAAAAAAA	has occasional (2) is allergic to (3) has a (4) diet. non-smoker. this will be her second child. needed (5) treatment before first pregnancy. first baby presented as (6) (7) required during intervention. after giving birth, had problems with (8) helped by midwife.
Baby's father	
	family history of (9) child from previous marriage has (10)
Points raised	
AAA	not keen on amniocentesis. enquired about the possibility of (11)testing. provided her with a leaflet on preparing (12)for new baby.

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Now look at extract two.

## **Extract 2: Questions 13-24**

You hear a GP talking to a new patient called Mike Royce, For questions 13.2	4,
complete the notes with a word or short phrase	
You now have thirty seconds to look at the notes	

	~ //	
Patier	Mike Royce	
	New patient transferring from another practice	
Descr	iption of initial symptoms:	
	severe left knee pain in (13)area. worsened after an accident at work. developed (14)on back of knee -(described as trigger points.)	
Impact on daily life:		
	unable to (15)while working (house painter) problems climbing ladders	
Initial treatment:		
>	<ul> <li>exercise programme including</li> <li>stretching exercises</li> <li>rest</li> </ul>	
	(16)for pain	
Devel	opments in condition:	
AAA	GP suspected (17) prescribed hospital-based rehabilitation temporary Improvement noted	
Current condition:		
AAAA	muscular problem diagnosed by (18)  was performing treatment on (19) experiencing insomnia and (20) suspects (21) (own research) has recorded experiences in (22) beginning to experience pain in both (23)	
Suggested course of action:		
>	recommend referral to (24)	

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

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 dietitian talking to a patient. What is she doing?
  - A. correcting the patient's misconception about obesity
  - B. describing the link between obesity and other diseases
  - C. stressing the need for a positive strategy aimed at weight loss
- 26. You hear members of a hospital committee discussing problems in the X-ray department

The problems are due to a delay in

- A. buying a replacement machine.
- B. getting approval for a repair to a machine
- C. identifying a problem with a particular machine
- 27. You hear a senior nurse giving feedback to a trainee after a training exercise. The trainee accepts that he failed to
  - A. locate the CPR board quickly enough.
  - B. deal with the CPR board on his own
  - C. install the CPR board correctly.
- 28. You hear a trainee nurse asking his senior colleague about the use of antiembolism

socks (AES) for a patient

The patient isn't wearing the socks because

- A. she's suffering from arterial disease in her legs.
- B. there is sensory loss in her legs.
- C. her legs are too swollen.
- 29. You hear a vet talking about her involvement in the management of the practice where she works

How does she feel about her role?

- A. She accepts that it's become surprisingly complex
- B. She wishes her boss took more interest in the finances

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- C. She values the greater understanding it gives her of her work
- 30. You hear a physiotherapist giving a presentation about a study she's been involved in.

She suggests that her findings are of particular interest because of

- A. the age of the subjects
- B. the type of disorder involved.
- C. the length of time covered by the study.

#### 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 a sports physiotherapist called Chris Maloney giving a presentation in which he describes treating a high jumper with a knee injury.

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

- 31. When Chris first met the patient, he found out that
  - A. she was considering retirement from her sport.
  - B. her state of mind had aggravated the pain in her knee.
  - C. she had ignored professional advice previously offered to her.
- 32. During his assessment of the patient's knee, Chris decided that
  - A. her body type wasn't naturally suited to her sport.
  - B. the pain she felt was mainly located in one place.
  - C. some key muscles weren't strong enough.
- 33. In the first stage of his treatment, Chris
  - A. was careful to explain his methods in detail
  - B. soon discovered what was causing the problem
  - C. used evidence from MRI scans to inform his approach.
- **34.** Why did Chris decide against the practice known as 'taping?

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- A. The patient was reluctant to use it
- B. It might give a false sense of security.
- C. The treatment was succeeding without it
- 35. In the patient's gym work, Chris's main concern was to ensure that she
  - A. tried out a wide range of fitness exercises
  - B. focussed on applying the correct techniques
  - C. was capable of managing her own training regime.
- **36.** Why was the patient's run-up technique changed?
  - A. to enable her to gain more speed before take off
  - B. to reduce the stress placed on her take-off leg
  - C. to reinforce the break from her old mindset

### Now look at extract two.

#### Extract 2: Questions 37-42

You hear a clinical psychiatrist called Dr Anthony Gibbens giving a presentation about the value of individual patients' experiences and stories in medicine. You now have 90 seconds to read questions 37-42.

- 37. What impressed Dr Gibbens about the case study that was sent to him?
  - A. where it was originally published
  - B. how controversial its contents were
  - C. his colleague's reasons for sending it to him
- **38.** Dr Gibbens has noticed that people who read his books
  - A. gain insights into their mental health problems.
  - B. see an improvement in personal relationships.
  - C. benefit from a subtle change in behaviour.
- 39. What disadvantage of doctors using patients' stories does Dr Gibbens identify?
  - A. evidence-based research being disregarded
  - B. patients being encouraged to self-diagnose
  - C. a tendency to jump to conclusions
- **40.** In Dr Gibbens' opinion, why should patients' stories inform medical practice?
  - A. They provide an insight not gained from numbers alone
  - B. They prove useful when testing new theories
  - C. They are more accessible than statistics.
- **41.** How does Dr Gibbens feel about randomised medical trials?

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- A. He questions the reliability of the method.
- B. He is suspicious of the way data are selected for them.
- C. He is doubtful of their value when used independently
- **42.** When talking about the use of narratives in medicine in the future, Dr Gibbens reveals
  - A. his determination that they should be used to inform research.
  - B. his commitment to making them more widely accepted
  - C. his optimism that they will be published more widely

That is the end of Part C.

You now have two minutes to check your answers.

THAT IS THE END OF THE LISTENING TEST

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

# LISTENING SUB-TEST – ANSWER KEY PARTS A, B & C

#### **PART A: QUESTIONS 1-12**

- 1. (computer) programmer
- 2. asthma (attacks)
- 3. Penicillin
- 4. Vegetarian
- 5. Fertility
- 6. Breech
- 7. forceps / forcipes
- 8. breastfeeding
- 9. epilepsy
- 10. Down syndrome / DS/ DNS/Down's (syndrome)
- 11. CVS/ chorionic vill(o)us sampling
- 12. sibling(s) / brothers and/or sisters

## **PART A: QUESTIONS 13-24**

- 13. medial meniscus OR medial
- 14. (very tender/tender/painful) bumps
- 15. squat (properly) / bend (his) knee
- 16. (used) ice pack(s)
- 17. Tendonitis
- 18. (hospital) physiotherapist) / physiotherapist) (in the hospital)
- 19. hamstring(s)
- 20. (constant) anxiety
- 21. Fibromyalgia
- 22. (a pain/pain) diary
- 23. (his) shoulders and elbows / (his) elbows and shoulders
- 24. rheumatologist

### **PART B: QUESTIONS 25-30**

- 25. A correcting patient's misconception about obesity
- 26. B getting approval for a repair to a machine
- 27. A locate the CPR board quickly enough.
- 28. B there is sensory loss in her legs.
- 29. C She values the greater understanding it gives her of her work
- 30. A the age of the subjects.

#### PART C: QUESTIONS 31-36

- 31. A she was considering retirement from her sport.
- 32. C some key muscles weren't strong enough.

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- 33. B soon discovered what was causing the problem
- 34. C The treatment was succeeding without it.35.
- 35. B focussed on applying the correct techniques.
- 36. B to reduce the stress placed on her take-off leg

### PART C: QUESTIONS 37-42

- 37. A where it was originally published
- 38. A gain insights into their mental health problems.
- 39. C a tendency to jump to conclusions
- 40. A They provide an insight not gained from numbers alone.
- 41. C He is doubtful of their value when used independently.
- 42. B his commitment to making them more widely accepted.

#### **END OF KEY**

## **OET30 Listening Mock Test 12**

#### 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**

**Psychological symptoms:** 

You hear a consultant endocrinologist talking to a patient called Sarah Croft.

For questions 1-12, complete the notes with a word or short phrase.

You now have 30 seconds to look at the notes

Patien	t: Sarah Croft	
Medical history:		
	hypertension (recently worsened) 3 years of corticosteroid treatment for (1)	
General symptoms:		
AAAAA	gradual weight gain, especially in stomach area (2)on face: embarrassing visible (3)between the shoulders swollen ankles excessive and constant (4) back ache periods are (5) extreme tiredness	
Dermatological symptoms:		
<b>&gt;</b>	tendency to (6) on thighs wounds slow to heal, (7) on thighs face appears red in colour, (8) area on neck recent development of (9)	

## OET30 LISTENING MATERIALS - NOT FOR SALE ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH mildly depressed > scared by new experience of (10) \_\_\_\_\_ Feels constantly (11) intermittent cognitive difficulties **Recommended tests:** > further blood tests $\triangleright$ (12) \_\_\_\_\_test possibly Extract 2: Questions 13-24 You hear an anesthetist talking to a patient called Mary Wilcox prior to an operation. For questions 13-24, complete the notes with a word or short phrase You now have thirty Seconds to look at the notes **Patient:** Mary Wilcox **Current medications:** Reason for Medication **Comments** medication Thiazide High blood both taken this morning with (14) Pressure (13) \_\_\_\_\_ Heart attack (15) \_\_\_\_\_ taken this morning stopped taking this 7 days ago (16) \_\_\_\_\_ **Medical history:** > went to GP two years ago feeling (17) \_\_\_\_\_-heart attack subsequently diagnosed ➤ had two (18) \_\_\_\_\_inserted **Present condition:**

> alright with (19) \_\_\_\_\_ and walking on the flat

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OET30 LISTENING MATERIALS – NOT FOR SALE  ACKNOWLEDGEMENT – OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH  has swelling in one ankle following operation for (20)  denies (21)  reports some (22)at night  (responds to medication)		
Conce	erns expressed:	
>	(23)following the procedure possible damage to crowns (both are (24))	
That i	is the end of Part A. Now look at Part B.	
	Part B	
	part of the test, you'll hear six different extracts. In each extract, you'll hear talking in a different healthcare setting.	
For <b>questions 25-30</b> , choose the answer ( <b>A</b> , <b>B</b> or <b>C</b> ) 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 1	ook at question 25.	
25.	You hear two trainee doctors doing an activity at a staff training day What does the activity give practice in?	
B.	writing case notes prioritising patients dealing with consultants	
26.	You hear a radiographer talking to a patient about her MRI scan. What is he doing?	
B.	clarifying the aim of the procedure dealing with her particular concerns explaining how the equipment works	
27.	You hear two nurses discussing an article in a nursing journal. What do they agree about it?	
В.	It's likely to lead to changes in practice. It failed to reach any definite conclusion. It confirms what they were already thinking.	
28.	You hear two hospital managers talking about a time management course for staff They think that few people have shown interest because	

A. there are so many alternatives on offer.

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- B. they feel it's not relevant to them.
- C. It hasn't been publicised enough.
- 29. You hear an optometrist reporting on some research he's been doing The aim of his research was
  - A. to develop nanoparticles for transporting drugs all over the body
  - B. to find a way of treating infections caused by contact lenses.
  - C. to use contact lenses to administer drugs over time.
- 30. You hear a consultant talking to a trainee about a patient's eye condition. What is the consultant doing?
  - A. explaining why intervention may not be necessary
  - B. suggesting the diagnosis is by no means certain
  - C. describing a possible complication

#### 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 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 a neurosurgeon called Dr Ian Marsh who specialises in the treatment of concussion in sport.

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

- 31. Dr Marsh says that one aim of the new guidelines on concussion is
  - A. to educate young sports people in how to avoid getting it
  - B. to correct some common misunderstandings about it.
  - C. to provide a range of specialist advice about it
- 32. Dr Marsh makes the point that someone who has suffered a concussion will
  - A. be unconscious for varying amounts of time after the event
  - B. need a medical examination before doing any further exercise.
  - C. have to take precautions to avoid the risk of symptoms recurring.
- 33. Dr Marsh says returning to sport too early after a concussion is dangerous because

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- A. a subsequent episode can have a cumulative effect.
- B. there is a high risk of fatality in the event of a second one.
- C. the brains of younger people need time to return to normal size.
- 34. Dr Marsh suggests that the risk of sustaining a concussion in sports
  - A. lies mainly in the choice of sports played.
  - B. can be reduced by developing good playing technique.
  - C. is greater when sports are played in less formal situations
- 35. What is Dr Marsh's view about providing medical support for youth sports events?
  - A. Some types of sport are risky enough to justify it.
  - B. The organisers should be capable of dealing with any issues.
  - C. Certain medical professionals should be encouraged to volunteer
- **36.** Dr Marsh thinks that developments in college football in the USA
  - A. only really address an issue which is particular to that sport.
  - B. are only likely to benefit the health of professional sports players.
  - C. are a significant step forward in the prevention of concussion in all sports.

#### Now look at extract two.

#### Extract 2: Questions 37-42

You hear a presentation by a consultant cardiologist called Dr Pamela Skelton, who's talking about a research trial called SPRINT which investigated the effects of setting lower blood pressure targets.

You now have 90 seconds to read questions 37-42

- 37. Why was the SPRINT trial stopped before it was due to end?
  - A. There were conclusive results earlier than expected.
  - B. The high drop-out rate was likely to invalidate the data.
  - C. Concerns were raised about possible effects on all participants.
- 38. A few participants aged over seventy-five left the trial because
  - A. there was a negative impact on their daily life
  - B. they failed to take the required doses of medication.
  - C. their health deteriorated due to pre-existing conditions.
- 39. A significant feature of measuring blood pressure in the trial was that
  - A. the highest of three readings was recorded.
  - B. the patient was alone when it was carried out.
  - C. it was done manually by the participant at home.

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- **40.** How did the SPRINT trial differ from the earlier ACCORD study into blood pressure?
  - A. SPRINT had fewer participants.
  - B. SPRINT involved higher-risk patients.
  - C. SPRINT included patients with diabetes.
- 41. Dr Skelton's main reservation about the SPRINT trial is that
  - A. it ignores the wider implications of lowered BP
  - B. its results go against the existing body of evidence.
  - C. it was unduly influenced by pharmaceutical companies
- 42. What impact does Dr Skelton think the SPRINT trial will have in the future?
  - A. It will lead to universally applicable guidelines for BP levels.
  - B. Increased attention will be given to the effect of lifestyle on BP
  - C. GPs will adopt a more active approach to lowering BP in the elderly.

#### That is the end of Part C.

You now have two minutes to check your answers.

## THAT IS THE END OF THE LISTENING TEST

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

#### LISTENING SUB-TEST – ANSWER KEY

#### PARTS A, B & C

## **PART A: QUESTIONS 1-12**

- 1. Asthma
- 2. hair (growth)
- 3. hump
- 4. sweating / perspiration / diaphoresis
- 5. (so) infrequent (now)
- 6. (easily) bruise
- 7. stretch marks / striae
- 8. dark / darkened
- 9. acne (vulgaris)
- 10. mood swings
- 11. irritable
- 12. saliva

## **PART A: QUESTIONS 13-24**

- 13. Lisinopril
- 14. (some) water
- 15. Aspirin
- 16. Clopidogrel
- 17. (a bit) breathless
- 18. Stents
- 19. (going up going down/up and down) stairs
- 20. varicose veins
- 21. (having) palpitations
- 22. heartburn/(acid) reflux
- 23. pain
- 24. central incisors

### **PART B: QUESTIONS 25-30**

- 25. B prioritising patients
- 26. B dealing with her particular concerns
- 27. A It's likely to lead to changes in practice
- 28. B they feel it's not relevant to them
- 29. C to use contact lenses to administer drugs over time
- 30. A explaining why intervention may not be necessary

#### PART C: QUESTIONS 31-36

31. C to provide a range of specialist advice about it.

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- 32. C have to take precautions to avoid the risk of symptoms recurring.
- 33. A a subsequent episode can have a cumulative effect.
- 34. A lies mainly in the choice of sports played.
- 35. B The organisers should be capable of dealing with any issues.
- 36. A only really address an issue which is particular to that sport.

#### PART C: QUESTIONS 37-42

- 37. A There were conclusive results earlier than expected.
- 38. C their health deteriorated due to pre-existing conditions.
- 39. B the patient was alone when it was carried out.
- 40. B SPRINT involved higher-risk patients.
- 41. B its results go against the existing body of evidence.
- 42. C GPs will adopt a more active approach to lowering BP in the elderly

#### **END OF KEY**

## **OET30 Listening Mock Test 13**

#### 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 pulmonologist talking to a patient called Robert Miller. For questions 1-12, complete the notes with a word or short phrase. You now have 30 seconds to look at the notes

Patier	nt: Robert Miller
Symp	toms:
AAAA	tiredness persistent (1)cough SOB weight loss described as (2)in nature ingertips appear (3) nails feel relatively (4)
Back	ground details:
<b>A</b>	previously employed as a (5) (20 yrs) now employed as a (6) no longer able to play golf keeps pigeons as a hobby
Medio	cal history:
> >	last year diagnosed with hypertension current prescription of (7
Previous tests:	
>	(10)six months ago

## OET30 LISTENING MATERIALS – NOT FOR SALE ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH > chest x-ray one month ago **Future actions:** > (11) \_\_\_\_\_test > CT scan > prescription of (12) \_\_\_\_\_ (possibly) Extract 2: Questions 13-24 You hear an eye specialist talking to a patient called Jasmine Burton, who has recently undergone eye surgery. For questions 13-24 complete the notes with a word or short phrase You now have thirty seconds to lock at the notes **Patient Jasmine Burton Patient history** > suffers from (13) \_\_\_\_\_astigmatism > also has (14) \_\_\_\_\_ (so surgery under general anesthetic) > eye problems may result from a lack of (15) \_\_\_\_\_ > sight problems mean (16) \_\_\_\_\_\_ isn't an option for her reports some slowness to (17) \_\_\_\_\_ ➤ has poor perception of (18) \_\_\_\_\_ works as a (19\_\_\_\_\_ reports having no issues at work > eyes checked every few years Surgery > (20) \_\_\_\_\_\_in right eye first noted three years ago February this year - had surgery > some capsular (21) \_\_\_\_\_noted post- operatively > examination showed no sign of a (22) \_\_\_\_\_ • follow up appointment in 6 months **Presenting with** reported increase in number of (23) \_\_\_\_\_ increased sensitivity to (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.

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

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 nurse briefing a colleague at the end of her shift. What does the colleague have to do for the patient tonight?
  - A. remove her saline drip
  - B. arrange for more tests
  - C. monitor her blood pressure
- 26. You hear part of a hospital management meeting where a concern is being discussed

What is the committee concerned about?

- A. poor response to recruitment drives
- B. difficulties in retaining suitable staff
- C. relatively high staff absence rates
- 27. You hear a GP and his practice nurse discussing a vaccination programme. They agree that the practice should
  - A. make sure patients are aware of it.
  - B. organise it more effectively than in the past.
  - C. prepare to cope with an increasing demand for it
- 28. You hear two hospital nurses discussing the assessment of a patient on their ward

What is the problem?

- A. The patient's documentation has been sent to the wrong place
- B. Nobody has taken responsibility for assessing the patient.
- C. The duty doctor was unable to locate the patient.
- 29. You hear the beginning of a training session for dental students. The trainer is explaining that the session will
  - A. focus on aspects of dental hygiene.
  - B. expand upon what they studied previously.
  - C. introduce them to a completely new technique
- 30. You hear two nurses discussing the treatment of a patient with a kidney infection.

What is the female nurse doing?

- A. emphasising the urgency of a procedure
- B. suggesting how to overcome a difficulty

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C. warning him about a possible problem

### 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 a geriatrician called Dr Clare Cox giving a presentation on the subject of end of-life care for people with dementia.

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

- 31. What problem does Dr Cox identify concerning dementia patients?
  - A. to educate young sports people in how to avoid getting it
  - B. Their condition can develop in a number of different ways
  - C. to provide a range of specialist advice about it.
- **32.** Why did Dementia Australia decide to examine the issue of end-of-life dementia care?
  - A. There was a lack of reliable information on it.
  - B. The number of stories about poor care made it urgent
  - C. There were enough data on which to base an effective care plan.
- 33. For Dr Cox, the initial results of the dementia survey reveal that palliative care
  - A. was working more effectively than people had thought.
  - B. was more widely available than some users imagined.
  - C. was viewed negatively by medical professionals.
- 34. Dr Cox says that lack of knowledge of the law by care professionals
  - A. proves that family members should help make pain management decisions.
  - B. could be resulting in a surprisingly high number of premature deaths.
  - C. may lead to dementia patients experiencing unnecessary distress.
- 35. Dr Cox thinks that the statistics she quotes on refusing treatment
  - A. illustrate a gap in current medical education programmes
  - B. show how patients' wishes are too often misunderstood by carers.
  - C. demonstrate the particular difficulties presented by dementia patients.
- **36.** Dr Cox makes the point that end-of-life planning is desirable because

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- A. it reduces the complexity of certain care decisions.
- B. it avoids carers having to speculate about a patient's wishes.
- C. it ensures that everyone receives the best possible quality of care

Now look at extract two.

## **Extract 2: Questions 37-42**

You hear a hospital doctor called Dr Keith Gardiner giving a presentation about some research he's done on the subject of staff-patient communication. You now have 90 seconds to read **questions 37-42.** 

- 37. Dr Gardiner first became interested in staff-patient communication after
  - A. experiencing poor communication as an in-patient
  - B. observing the effects of poor communication on a patient
  - C. analysing patient feedback data on the subject of communication.
- 38. What point does Dr Gardiner make about a typical admission to hospital?
  - A. The information given can overwhelm patients.
  - B. Patients often feel unable to communicate effectively.
  - C. Filling in detailed paperwork can be stressful for patients.
- 39. Dr Gardiner uses an example of poor communication to illustrate the point that
  - A. patients should be consulted about the desirability of a hospital stay
  - B. specialists need to be informed if there are any mental health issues
  - C. relatives' knowledge of a patient's condition shouldn't be taken for granted.
- **40.** Dr Gardiner explains that a survey conducted among in-patients about communication
  - A. measured the difference between their expectations and their actual experience.
  - B. asked their opinion about all aspects of the service they received
  - C. included questions on how frequently they visited the hospital
- 41. One common complaint arising from Dr Gardner's survey concerned
  - A. a lack of privacy for patients receiving sensitive information.
  - B. the over-use of unclear medical terminology with patients.
  - C. a tendency not to address patients in a respectful way.
- **42.** How does Dr Gardiner feel about the results of the survey?
  - A. surprised by one response from patients
  - B. reassured by the level of patient care identified
  - C. worried that unforeseen problems were highlighted

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#### 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 – ANSWER KEY PARTS A, B & C

### **PART A: QUESTIONS 1-12**

- 1. dry
- 2. (very) gradual
- 3. swollen/bulging (out)
- 4. Soft
- 5. farm labourer
- 6. (night) security guard
- 7. beta blockers
- 8. crackling (accept: cracking) crep / crepitation
- 9. (bad) eczema
- 10. echocardiogram / cardiac echo/ echo
- 11. arterial blood gas /ABG
- 12. corticosteroids

## **PART A: QUESTIONS 13-24**

- 13. myopic short(-)sighted-/ near(-)sighted
- 14. nystagmus /(a) flickering)
- 15. pigment (in eye)
- 16. driving
- 17. focus
- 18. distance
- 19. (hotel) receptionist
- 20. cataract (developed)
- 21. opacity clouding
- 22. detached retina / retina(1) detachment
- 23. (eye) floaters
- 24. glare / bright lights.

#### PART B: QUESTIONS 25-30

- 25. A remove her saline drip
- 26. C relatively high staff absence rates
- 27. C prepare to cope with an increasing demand for it.
- 28. B Nobody has taken responsibility for assessing the patient.
- 29. B expand upon what they studied previously.
- 30. C warning him about a possible problem

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## **PART C: QUESTIONS 31-36**

- 31. B Their condition can develop in a number of different ways.
- 32. A There was a lack of reliable information on it.
- 33. B was more widely available than some users imagined.
- 34. C may lead to dementia patients experiencing unnecessary distress
- 35. A illustrate a gap in current medical education programmes.
- 36. B it avoids carers having to speculate about a patient's wishes

#### PART C: QUESTIONS 37-42

- 37. B observing the effects of poor communication on a patient.
- 38. A The information given can overwhelm patients.
- 39. C relatives' knowledge of a patient's condition shouldn't be taken for granted
- 40. A measured the difference between their expectations and their actual experience.
- 41. B the over-use of unclear medical terminology with patients
- 42. A surprised by one response from patients

#### **END OF KEY**

## **OET30 Listening Mock Test 14**

#### 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 a new natient called Mrs Black. rt phrase.

For questions 1 to 12 complete the notes with a word or sho	
Patient: Mrs Black	
Patient's reasons for presenting:	
<ul> <li>family recently moved to the area</li> <li>concerned daughter has (1)</li> </ul>	
Details about daughter:	
<ul><li>Name: Mia</li><li>Age: (2)</li></ul>	
Mia's eating habits:	
<ul> <li>doesn't eat with (3) any more</li> <li>eats in her (4)</li> <li>skips (5) often</li> <li>change in eating habits began last year</li> </ul>	
Mia's school situation:	
<ul> <li>good student but (6)</li> <li>has been having trouble (7) lately</li> <li>has a few close friends but not boy friend</li> <li>mum thinks Mia is concerned about her (8)</li> </ul>	
Mia's physical health:	
N 11 - 4	

- does ballet
- lies around in her room

ACKNOWLE  TO I	LISTENING MATERIALS – NOT FOR SALE  EDGEMENT – OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH mum reports Mia has lost (9)recently weighs herself a lot ooks at herself in the mirror doesn't sleep well (tired and moody) sometimes has headaches and has taken (10) may have been (11)
Doctor's advice for Mrs Black:	
	schedule follow-up appointment with Mia and parents possible referral to a (12)
Extract	t 2: Questions 13-24
You hear a physiotherapist talking to a patient called Ryan Henderson. For questions 13 to 24, complete the notes with a word or short phrase. You now have thirty Seconds to look at the notes.	
Patient	: Ryan Henderson
Patient	's description of symptoms:
	pain located in the left knee (13) pain began 4 weeks ago (noticed first when running) described pain as (14) worse going from sitting to standing position or when sitting with a (15) worse (16) in the day doesn't wake patient at night no other symptoms noted (pins, and needles, numbness)
Medica	al history:
> s > t > t > t	[17]left knee 15 years ago scar still visible (no associated discomfort) broke little toe on left foot aged 10 broke fibula in (18)aged 25 broke little finger on right hand last year last year bursitis in (19)
Previous treatment:	
> s	(20)for bursitis stopped running for 6 months did stretching and (21)two times a week treatment helped - started running again last Xmas

## Physical examination findings:

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- > niggly pain in front knee cap standing on left leg
- half squat caused pain in (22) \_\_\_\_\_
- > pain in left knee worse after half squat (sharp pain)
- ➤ left knee felt (23) \_\_\_\_\_\_on strength testing

## Diagnosis:

- left knee-cap appears to be misaligned iliotibial band is tight
- > (24) \_\_\_\_\_\_on outside of left knee (underlying inflammation)

#### 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 talking to a patient who has been having trouble with his water.

The doctor wants to confirm if the patient

- A. has had burning when passing water.
- B. has a blockage in their kidneys.
- C. has high blood pressure.
- 26. You hear a nurse briefing her colleague about a patient.

What does she want her colleague to do?

- A. Check the patient is receiving the correct amount of fluids.
- B. If his respiratory status worsens, call the emergency doctor
- C. Confirm the patient is stable and check his blood culture.
- 27. You hear part of a consultation at a GP practice with a patient suffering from depression and sleep disturbances.

The GP recommends cognitive behavioral therapy because

- A. Behavioral therapy is better than medication
- B. it will help him to change the way he responds to difficult situations
- C. the patient needs to control his anger and medication isn't working
- 28. You hear a nurse seeking advice from a doctor Why does the nurse telephone the doctor?
  - A. She would like to know how to proceed with the patient

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- B. What antibiotics to give because of intense pain and fever
- C. Whether the patient should be shifted to emergency ward
- 29. You hear the principal of an aged care home talking to staff about osteoporosis. She wants to highlight that
  - A. there are now treatments available for men
  - B. residents are not getting enough calcium and vitamin D.
  - C. a lot of the residents may already have osteoporosis.
- 30. You hear two nurses discussing a patient, Mrs Robbins. Julie says Mrs Robbins refused to mobilise because
  - A. she was happy having a sponge bath.
  - B. she wanted to hear directly from the doctor.
  - C. she was upset and wanted to be left alone.

#### 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 a sleep physician and upper airway physiologist called James Tredellow giving a presentation about snoring and its link to health problems

- 31. Dr Tredellow believes snoring poses concerns because
  - A. it is possible for anyone to become a snorer.
  - B. it contributes to several other health issues.
  - C. everyone has an upper airway that collapses.
- 32. Dr Tredellow says the main cause of snoring is
  - A. drinking too much
  - B. being overweight.
  - C. a narrow airway.
- 33. According to Dr Tredellow there may be societal impacts from snoring for a person who
  - A. is suffering from obesity.

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- B. has concentration issues.
- C. is worried about their snoring.
- 34. What point does Dr Tredeltow make about obstructive sleep apnoea?
  - A. snoring sometimes causes people to stop breathing
  - B. snoring can be linked to obstructive sleep apnoea.
  - C. obstructive sleep apnoea and snoring are similar.
- 35. Dr Tredellow feels research on carotid artery atherosclerosis
  - A. is still in its infancy despite highlighting some serious issues.
  - B. shows that snoring may be far more dangerous than once believed.
  - C. Some heart diseases can cause snoring
- **36.** What does Dr Tredellow say about the treatment for snoring?
  - A. Making specific lifestyle changes and proper medication contributes to reduction of snoring
  - B. Determining the cause of snoring is mandatory before starting any treatment
  - C. Treatment is best provided by a recognised sleep physician.

#### Now look at extract two.

## Extract 2: Questions 37-42

You hear a Dr Munro giving a presentation to treat Ebola patients

- 37. Why does Dr Munro say he volunteered to treat Ebola patients in Liberia?
  - A. Clean IV needles, fluids and basic lab tests are readily available in U.S
  - B. Aggressive medical treatment is available in Africa
  - C. Clean IV needles, fluids and basic lab tests are readily available in Africa
- 38. Dr Munro says the patient's he treated were often afraid because
  - A. there was a high death rate for patients who received treatment.
  - B. family members didn't believe that treatment was helping
  - C. they didn't trust the doctors because they were foreigners.
- 39. What does Dr Munro say about the specialised clothing he had to wear?
  - A. That he spent more time rehydrating than treating patients.
  - B. That patients found it similar to what is worn in a hospital.
  - C. That it affected the way he would treat his patients.
- **40.** Why does Dr Munro believe the case of the young girl is tragic?
  - A. It highlights how even young children can get Ebola.

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- B. It demonstrates how families were affected by the disease.
- C. It is a situation that only affected a small group of patients.

## 41. Treating Ebola patients in Liberia has made Dr Munro

- A. improve how he manages the emotional needs of his patients.
- B. realise that seeing patients suffering is part of a doctor's job.
- C. understand that doctors can't do everything for their patients.

## 42. Dr Munro believes Ebola may spread to other parts of the world because

- A. It can spread through body fluids
- B. plane travel has made the world a much smaller place.
- C. it takes longer for the disease to develop than people think.

#### That is the end of Part C.

You now have two minutes to check your answers.

### THAT IS THE END OF THE LISTENING TEST

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

#### LISTENING SUB-TEST – ANSWER KEY

## PARTS A, B & C

## **PART A: QUESTIONS 1-12**

- 1. anorexia
- 2. 15 yrs
- 3. With Family
- 4. Her room
- 5. Breakfast
- 6. Quiet
- 7. Concentrating
- 8. Appearance
- 9. lot of weight / weight
- 10. Laxatives
- 11. Throwing
- 12. Psychiatrist

## **PART A: QUESTIONS 13-24**

- 13. Below the kneecap
- 14. Niggling
- 15. Bent knee
- 16. Later
- 17. Cut
- 18. right ankle
- 19. Left hip
- 20. Physiotherapy
- 21. Yoga
- 22. both knees
- 23. weak
- 24. minor swelling

## PART B: QUESTIONS 25-30

- 25.B
- 26. C
- 27.B
- 28. A
- 29. A
- 30.B

## PART C: QUESTIONS 31-36

31.B

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- 32.C
- 33.C
- 34.B
- 35.A
- 36.C

## **PART C: QUESTIONS 37-42**

- 37.C
- 38. A
- 39.C
- 40.B
- 41. A
- 42. A

## END OF KEY

## **OET30 Listening Mock Test 15**

#### 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 nurse talking to a patient called Mr McDonald. For **questions 1 to 12**, complete the notes with a word or short phrase.

For questions 1 to 12, complete the notes with a word		
Patien	t: Mr Lajowski	
Details about procedure:		
	removal of lump from back lump located near (1) after operation.	
Medical history:		
	has (3) duration approximately 5 years	
Physical problems:		
A A A	trouble (4) falls over sometimes some times freezes in one spot (akinesia) (5)shake a lot (6)arms	
Problems with daily activities:		
AAAA	(7)in bed reaching for things turning around when (8)from a chair tying shoelaces doing and undoing (9) untidy (10)	
	undy (10)	

# Other issues: > cramps at night -12 months > patient's (11)\_\_\_\_\_ is affected recently changed medication - cramps (12)\_\_\_\_\_ Extract 2: Questions 13-24 You hear a doctor talking to Ms Myrna, an outpatient in the psychiatric unit. For questions 13 to 24, complete the notes with a word or short phrase. **Patient:** Chloe 6 months ago: Valium from GP 4 months ago: (13) \_\_\_\_\_began 3 weeks ago: discharged from hospital **Patient's description of Symptoms:** Felt like she was going to fall over (14) trouble walking heavy legs > palpitations possible (15) \_\_\_\_\_ ➤ became (16) \_\_\_\_\_ heavy arms ➤ difficult to (17) \_\_\_\_\_things > (18) \_\_\_\_\_\_in arms **Possible causes:** busy lifestyle > possible underlying (19) \_\_\_\_\_ Other symptoms: > early stage (20) \_\_\_\_\_in hands **Personal history:** > married for two years husband - steel fitter (own business) Fights about keep the (21) \_\_\_\_\_ ➤ have seen a gynaecologist (22) \_\_\_\_\_ twice waiting on husband's test results ➤ returning in (23) \_\_\_\_\_

OET30 LISTENING MATERIALS - NOT FOR SALE

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#### **Recommendations:**

- > prescribed (24) \_\_\_\_\_for anxiety
- ➤ follow-up appointment in two weeks

## 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 talking to the daughter of a patient from an aged care home. The doctor wants to
  - A. ensure that Mrs Cox's father has a go of lif
  - B. advise Mrs Cox that her father has Alzheimer's disease.
  - C. explain the improvements in medical treatment to Mrs Cox.
- 26. You hear a consultant giving a talk to a group of trainees. What is the purpose of the talk?
  - A. to highlight the symptoms associated with a head injury.
  - B. to discuss the importance of waking patients after a head injury.
  - C. to convey the significance of the initial 24 hours after a head injury.
- 27. You head a vet talking to a client who brought this pet cat, Jimmy, to the vet clinic.

What does the vet say has caused Jimmy's problem urinating?

- A. Stress from renovations.
- B. A fatal urethral obstruction.
- C. Struvite crystals in his urethra.
- 28. You hear the nurse unit manager (NUM) discussing the progress If a patient at a multidisciplinary team meeting.

What does she indicate about the patient's son?

- A. That he hasn't been feeding the patient.
- B. That the patient is largely dependent on him
- C. That he is having problems in his role as a carer.
- 29. You hear a radiographer talking to nursing staff at an aged care centre. The radiographer is

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- A. helping nurses prepare patients for CT scans.
- B. stressing the importance of contrast media in CT scans.
- C. highlighting problems that occur when conducting CT scans.
- 30. You hear a GP discussing psoriasis with a patient. The GP recommends sunbed treatment because
  - A. UVB light is unique in a hospital setting.
  - B. there is currently a shortage of cream
  - C. it will help with the effects of the rash

#### 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 a nurse called Sally Perkins giving a presentation on tetanus to a group of hospital trainees.

- 31. What is the main focus of Sally's talk on tetanus?
  - A. It is impossible to avoid tetanus bacteria.
  - B. It is essential to be vaccinated against tetanus.
  - C. It is important to develop natural tetanus immunity.
- 32. Sally believes that deaths from tetanus still occur because
  - A. the bacteria is about to infect a person through the tiniest of wounds
  - B. infected people don't seek medical treatment early enough
  - C. not enough people are immunised against tetanus.
- 33. Why do some people believe the tetanus vaccine Isn't necessary?
  - A. Tetanus bacteria can't enter a person's bloodstream
  - B. Tetanus bacteria are everywhere, giving people natural Immunity.
  - C. Tetanus bacteria aren't affected by medication or vaccination.
- 34. Sally suggests the woman didn't understand the dangers of tetanus because
  - A. she hasn't undergone a recent vaccination.

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- B. she sought medical treatment very late.
- C. she ignored many early warning signs.
- 35. Sally highlights the case of the 4-year-old boy to
  - A. show symptoms often overlap with symptoms of other medical conditions
  - B. shows that tetanus affects only children.
  - C. Illustrates how difficult it is to diagnose tetanus.
- **36.** Why does Sally believe the man's case highlights how everyone is at risk of tetanus?
  - A. Because he arrived at hospital with no health complaints.
  - B. Because the man had no injuries, but he still had tetanus.
  - C. Because he couldn't remember when he was immunized.

#### Now look at extract two.

## **Extract 2: Questions 37-42**

For questions 1 to 6, choose the answer (A, B or C) which first best according to what you hear.

You hear an interview with Dr Delia Mene, who was Team USA's Chief Medical Officer (CMO) at the Sochi Winter Olympic Games.

- 37. Dr Mene suggests that her role as CMO required her to
  - A. use a range of care options to assist athletic performance.
  - B. work longer hours than usual to manage all the injuries.
  - C. show compassion to health care professionals
- **38.** Mene says the medical support of athletes
  - A. was to ensure peak performance of athletes
  - B. was available only for some ailments
  - C. depended on the type of health care provider available.
- **39.** What is Dr Mene's view on providing care for life-threatening injuries?
  - A. A level of team work would have ensured a positive outcome.
  - B. The care of USA doctors would have been vital
  - C. They were not able to provide care for life-threatening injuries
- **40.** Dr Mene says her team prevented injuries by
  - A. reducing the amount of competition and travel for each athlete.
  - B. evaluating what athletes ate and what they did after competing.
  - C. having more advanced technology than other competing nations.

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- **41.** Dr Mene was impressed with he software they used because..
  - A. it was particularly useful for musculoskeletal injuries.
  - B. it had tremendous communication potential.
  - C. it can help in critical care situations.
- **42.** Dr Mene thinks any physician wanting to treat athletes at a major sporting event should
  - A. understand that you won't make a lot of money doing it
  - B. apply what they learn at these events to their private practice.
  - C. take the time to forge connections that enhance your reputation.

#### That is the end of Part C.

You now have two minutes to check your answers.

#### THAT IS THE END OF THE LISTENING TES

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#### LISTENING SUB-TEST – ANSWER KEY

## PARTS A, B & C

## **PART A: QUESTIONS 1-12**

- 1. waist
- 2. recovery
- 3. Parkinson's disease
- 4. Walking
- 5. Hands
- 6. Stiff
- 7. turning over
- 8. getting up
- 9. buttons
- 10. Handwriting
- 11. Sleep
- 12. Reduced

## **PART A: QUESTIONS 13-24**

- 13. dizzy spells
- 14. unsteady
- 15. panic attack
- 16. breathless
- 17. lift
- 18. tingling
- 19. stress
- 20. Arthritis
- 21. house clean
- 22. Stress
- 23. one month
- 24. Ativan

## **PART B: QUESTIONS 25-30**

- 25.A
- 26. C
- 27.C
- 28.B
- 29.A
- 30.C

## PART C: QUESTIONS 31-36

- 31.B
- 32.C
- 33.B

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- 34. A
- 35.C
- 36.B

## **PART C: QUESTIONS 37-42**

- 37. A
- 38. A
- 39. A
- 40.B
- 41.B
- 42.C

## END OF KEY

## **OET30 Listening Mock Test 16**

#### 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 nurse talking to a patient called Miss Wells For questions 1 to 12, complete the notes with a word or short phrase.

Patient:	Miss Wells	
Background details:		

- ➤ 22 years old
- lives with partner
- > never been pregnant
- > normal (1) \_\_\_\_\_\_3 months ago

## **Condition history**

#### February:

- > sharp stomach pain (2) \_\_\_\_\_
- > started a few days before period
- > ended when period finished

## **After February:**

constant pain – (3)
(4)Performed
endometriosis (5)and on left ovary
took the pill without break
prescribed progesterone - weight gain, bloating and (6)

#### May:

- re admitted to hospital
- > (7) \_\_\_\_\_treatment
- pain significantly reduced

# > pain returned condition similar to February > pain at different times of month ➤ significant pain during (8) \_\_\_\_\_ **Medical history:** regular periods - most recent (9) \_\_\_\_\_ never smoked > drinks at weekends 1 or 2 drinks $\triangleright$ no (10) \_\_\_\_\_\_in the family regular bowel movements Patient's concerns: wants (11)\_\_\_\_\_ (12) \_\_\_\_\_\_ affecting her mood Extract 2: Questions 13-24 You hear a nurse talking to Mrs Georges about her husband, who has Alzheimer's disease and has been admitted to a nursing home. For questions 13 to 24, complete the notes with a word or short phrase. **Patient:** Mr Georges Consultations with Mrs Georges, patient's Wife **Background details:** Mrs Georges is feeling (13) \_\_\_\_\_ Mr Georges used to be very (14) \_\_\_\_\_ and (15) \_\_\_\_\_ > son lives close by > also has a daughter **Patient history:** confused by common tasks ➤ has trouble (16) \_\_\_\_\_ ➤ he was initially (17) \_\_\_\_\_\_by his condition limited awareness now ➤ frequently repeated (18) \_\_\_\_\_ > (19) \_\_\_\_\_very little now > needs help when (20) \_\_\_\_\_ > problem getting him to (21) \_\_\_\_\_ > no longer interested in his appearance

OET30 LISTENING MATERIALS – NOT FOR SALE

August:

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# OET30 LISTENING MATERIALS – NOT FOR SALE ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH has recently started to (22) \_\_\_\_\_from house ➤ has trouble telling (23) \_\_\_\_\_Apart > sometimes plays 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. 25. You hear two doctors discussing a patient. Dr Jones speaks to Dr Khan because he wants to A. confirm his own diagnosis. B. hear Dr Khan's diagnosis. C. Send the patient for tests **26.** You hear a dietician talking to a patient. What is she doing? A. Showing the patient alternative diet plans that eliminate fat. B. Explaining why the doctor wants the patient to eat a low-fat diet. C. Empathising with the patient about the challenges of reducing fat. You hear a professor of emergency medicine giving a presentation to a group 27. of trainee doctors. The presentation is about A. why European wasps are a problem. B. what European wasps like to eat. C. how European wasps sting. You hear a GP talking to a regular patient who has been having kidney 28. problems. What does the GP suggest?

- A. That the patient's lifestyle will change forever.
- B. That there is more than one way to treat the patient.
- C. That the patient needs dialysis for the rest of their life
- 29. You hear a physiotherapist in a hospital talking with John, a new patient. The physiotherapist is

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- A. Explaining the benefits of wearing neck brace
- B. explaining why warm showers are beneficial
- C. giving instructions to assist with recovery from an injury.
- 30. You hear a specialist physician and a nurse discussing a patient's treatment. The nurse is unable to help the physician because
  - A. she isn't senior enough
  - B. she isn't familiar with the patient.
  - C. she doesn't understand the treatment options.

#### 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 emergency medicine physician called Dr Carly Dugan giving a presentation about improving health literacy and patient outcomes through communication

- 31. What does Dr Dugan suggest defines a patient's health literacy?
  - A. How well they can read and write names of medicines
  - B. how well they communicate with health professionals.
  - C. how clearly they understand health-related
- 32. As a result of her own research, and other studies, Dr Dugan believes
  - A. most patients don't listen carefully enough to health professionals.
  - B. patient health outcomes rely heavily on a person's health literacy.
  - C. governments aren't doing enough to assist with health literacy.
- 33. Dr Dugan says most health professionals have at one time
  - A. had complaints made about their poor communication.
  - B. incorrectly assumed their instructions were understood.
  - C. Had complains about patients' poor communication
- **34.** Why does Dr Dugan share the examples about previous patients?
  - A. to show how she teaches health literacy.

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- B. to illustrate findings from recent research studies.
- C. to demonstrate the importance of clear communication.
- 35. The paediatrician example about the "teach-back" method demonstrates
  - A. how easy it is to overlook whether or not a patient has understood instructions
  - B. what patients do and do not understand about health literacy.
  - C. the best way to confirm what a patient understands
- **36.** What point does Dr Dugan make about improving patient safety and care?
  - A. It is essential to have reliable health care for all patients.
  - B. Focusing on acute care settings is the most important aspect.
  - C. Delivery of information beyond the traditional care settings is vital

#### Now look at extract two.

## Extract 2: Questions 37-42

You hear a presentation by a Dr Marshall, who's talking about the low-fat era.

- 37. Dr Marshall believes that the low-fat era is coming to an end because
  - A. the US Dietary Guidelines have changed towards fat.
  - B. US dietary guidelines advocated high fat 35 yrs ago
  - C. fat and cholesterol are no longer linked in the US Dietary Guidelines.
- 38. Dr Marshall suggests that LDL particles
  - A. are more dangerous when they're smaller
  - B. have nothing to do with saturated fat.
  - C. pose no risk to a person's health.
- **39.** What are Dr Marshall's views on saturated fats?
  - A. Refined carbohydrates are more dangerous than saturated fat.
  - B. Not all saturated fats are the same as others.
  - C. Vegetable oil should replace saturated fat.
- **40.** Why doesn't Dr Marshall believe people should stop worrying about cholesterol?
  - A. Biological solutions haven't been able to solve the problem.
  - B. People continue to eat too many foods high in fat and sugar.
  - C. More research is required to understand how fat enters the blood.
- 41. Why doesn't Dr Marshall believe people should stop worrying about cholesterol?

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- A. Biological solutions haven't been able to solve the problem.
- B. People continue to eat too many foods high in fat and sugar.
- C. More research is required to understand how fat enters the blood.
- 42. In Dr Marshall's opinion, many organisations and experts need to
  - A. become more open-minded about embracing current studies.
  - B. encourage more people to eat a diet high in vegetables.
  - C. stop saying that eating saturated fat is bad

That is the end of Part C.

You now have two minutes to check your answers.

THAT IS THE END OF THE LISTENING TEST

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

# LISTENING SUB-TEST – ANSWER KEY PARTS A, B & C

## **PART A: QUESTIONS 1-12**

- 1. cervical smear
- 2. left side
- 3. admitted to hospital
- 4. laparoscopy
- 5. behind womb
- 6. acne
- 7. diathermy
- 8. intercourse
- 9. 3 weeks ago
- 10. serious illness
- 11. children
- 12. Pain

## **PART A: QUESTIONS 13-24**

- 13. worn out
- 14. alert
- 15. active
- 16. making tea
- 17. frustrated
- 18. questions
- 19. speaks
- 20. dressing
- 21. shave
- 22. wander off
- 23. day and night
- 24. oven controls

## PART B: QUESTIONS 25-30

- 25. A
- 26.C
- 27. A
- 28.B
- 29.C
- 30.B

## **PART C: QUESTIONS 31-36**

- 31.C
- 32. B
- 33.B

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- 34. C
- 35. A
- 36.C

## **PART C: QUESTIONS 37-42**

- 37. A
- 38. A
- 39.B
- 40. C
- 41.B
- 42. A

## END OF KEY

# **OET30 Listening Mock Test 17**

#### 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**

	ar a physiotherapist talking to a patient called Ms Wayne. estions 1 to 12, complete the notes with a word or short phrase.
Patient	t: Mrs Wayne.
Condit	ion – History:
> 1	diagnosed arthritis in hands and wrists very swollen (1) pain makes simple everyday tasks difficult problems when she has to (2) things and move her wrist
Lifesty	le details:
> 1 > 1	patient is 40 years old previously worked as a (3) now does volunteer work at a primary school and on a helpline uses a hands - free phone
impact	on daily life:
> 1	difficult getting in and out of bed or a bath or a low chair uses a walking aid and a (4)has a (5)
Previou	us treatment:
heat pa	ds
Patient	's treatment Requests:
> ( > (	(6) check effectiveness of (7)

ACKNOWLEDGEMENT – OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH Other previous treatment:
<ul> <li>saw an (8)</li> <li>helped patient with common tasks</li> <li>provided ideas to reduce (9)</li> <li>mainly takes analgesics for pain</li> </ul>
Medication:
<ul> <li>has stopped taking (10)</li> <li>not effective</li> <li>made patient nauseous</li> <li>occasional (11)</li> <li>also uses an (12) (twice daily)</li> </ul>
Extract 2: Questions 13-24
You hear a doctor talking to Mr Roy Dafnis about his planned hospital admission. For questions 13 to 24, complete the notes with a word or short phrase.
Patient: Roy Dafnis
Patient's explanation about condition:
is worried about his (13)while he's in hospital
History of condition:
<ul> <li>can be brought on by (14)</li> <li>feeling some (15)</li> </ul>
Current condition:
<ul> <li>(16)worse recently</li> <li>possibly exacerbated by (17)of operation</li> <li>is on his face, (18)</li> <li>no sores or weeping</li> <li>most concerned about (19)</li> </ul>
Management of condition:
<ul> <li>currently having (20)</li> <li>uses a (21)</li> <li>wears appropriate clothing hourly use of an (22)</li> <li>only uses corticosteroids as a last resort</li> <li>has seen a dermatologist for treatment</li> <li>currently on an (23)</li> <li>has helped with the scratching and (24)</li> </ul>

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That is the end of Part A. Now look at Part B.

#### Part B

4In 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 physician talking to a group of trainee doctors. What is the reason for the presentation about honeybees?
  - A. To advise what to do when a person is stung.
  - B. To explain the reasons why people get stung.
  - C. To illustrate how dangerous bees can be.
- 26. You hear two dentists discussing a patient. What do they agree?
  - A. To limit further complications for the patient.
  - B. The patient has a record of poor oral hygiene.
  - C. To seek advice about the patient's medication.
- 27. You hear an optometrist giving a presentation to a group of teachers. He says that students should be tested for colour blindness
  - A. to improve class performance.
  - B. regardless of their gender.
  - C. by a qualified health professional.
- 28. You hear a radiographer talking to a patient about their CTC examination. The radiographer is explaining
  - A. how to prepare for the examination.
  - B. who to contact in order to cancel the examination.
  - C. why certain equipment is used during the examination.
- 29. You hear a physiotherapist speaking to a support group for Parkinson's disease. She says that physiotherapists help patients by
  - A. using a variety of approaches
  - B. assessing their overall health issues.
  - C. working with other medical professionals.
- You hear an oncologist talking with a patient about their test results. The patient is anxious because she

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- A. doesn't understand her treatment options.
- B. still has stomach pain.
- C. may have cancer.

#### 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 a presentation on asbestos by a respiratory physician called Dr Bill Musk

- 31. Dr Musk suggests the use of asbestos was widespread because it was
  - A. a comparatively low-cost product.
  - B. at one time considered safe to use.
  - C. able to be sourced throughout the world.
- 32. Despite asbestos being banned in 2003, Dr Musk suggests people still present with asbestos -related diseases because
  - A. it takes a long time for symptoms to appear.
  - B. asbestos is still found in many places.
  - C. asbestos fibres are difficult to see.
- 33. Dr Musk mentions the research conducted on asbestos to highlight that
  - A. the substance itself can take many forms.
  - B. everyone's reaction to contact with it is different.
  - C. the difficult effects it has on individuals who have contact with it.
- 34. Dr Musk says that people most at risk from exposure to asbestos
  - A. sometimes have other health issues.
  - B. are categorised by their profession.
  - C. have the potential to affect others.
- 35. Dr Musk discusses asbestos-related diseases from a US study to
  - A. highlight how many people have died.
  - B. explain their different outcomes for patients.
  - C. emphasise the effects of exposure to the fibres.

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- **36.** Dr Musk explains that treatment of asbestos-related diseases
  - A. works best when symptoms are recognised early on
  - B. doesn't have its own particular management.
  - C. has a relatively high success rate.

#### Now look at extract two.

## Extract 2: Questions 37-42

- 37. Dr Wallace explains that parasomnia sleep disorders
  - A. have been known to cause conflict between couples.
  - B. are closely linked to the way a person dreams
  - C. means the patient has an underlying issue.
- 38. Dr Wallace suggests that when establishing a diagnosis of parasomnia treating physicians should
  - A. identify if there is a family history
  - B. consider the patient's physical and mental health.
  - C. ensure the patient understands what is happening.
- 39. Dr Wallace explains that for sufferers of parasomnia the outlook
  - A. gets worse as they get older.
  - B. is dependent on their mental health,
  - C. can vary according to their particular condition.
- 40. When recounting the case with Marc, Dr Wallace suggests that
  - A. there were no reasons for the signs he was displaying.
  - B. his sleep disturbances were related to anxiety
  - C. the incidents were affecting his memory.
- **41.** Dr Wallace says that Marc's 2 minor arousals led to a diagnosis of sleep terror because
  - A. it's rare for someone to have them during a sleep study.
  - B. he appeared to wake up and look around the room
  - C. they had ruled out all other possible options
- 42. Dr Wallace's follow-up advice and treatment of Marc suggests that he
  - A. had trouble coping when his parents weren't with him.
  - B. was dependent on medication to help him sleep.
  - C. would outgrow the insecurity he was feeling.

#### That is the end of Part C.

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You now have two minutes to check your answers.

## THAT IS THE END OF THE LISTENING TEST

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

#### LISTENING SUB-TEST – ANSWER KEY

## PARTS A, B & C

## **PART A: QUESTIONS 1-12**

- 1. Finger joints
- 2. Grip
- 3. Hair dresser
- 4. Wheelchair
- 5. Modified car
- 6. Gentle exercise
- 7. Hand splints
- 8. Occupational therapist
- 9. Tiredness
- 10. Anti-inflammatory drugs
- 11. Steroid injection
- 12. Analgesic cream

## **PART A: QUESTIONS 13-24**

- 13. Eczema
- 14. Hot
- 15. Foods and drinks
- 16. Itching and scratching
- 17. Stress
- 18. Back and legs
- 19. Risk of infection
- 20. Lukewarm baths
- 21. Soap substitute
- 22. Oily moisturizer
- 23. Antihistamine
- 24. Sleeping

## **PART B: QUESTIONS 25-30**

- 25. A
- 26. C
- 27.C
- 28. A

29. A

30.B

## PART C: QUESTIONS 31-36

31.A

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- 32. A
- 33.B
- 34. B
- 35.C
- 36.B

## PART C: QUESTIONS 37-42

- 37.C
- 38.B
- 39.C
- 40.B
- 41. A
- 42.C

## END OF KEY

# **OET30 Listening Mock Test 18**

#### 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 specialist physician talking to a patient called David Johnston. For questions 1 to 12, complete the notes with a word or short phrase

	the notes with a word or short phrase	
Patient: David Johnston		
Patient's explanation about condition:		
> no > be	)1 week ago initial pain or other symptoms egan feeling (2)a few days later agnosed with (3)	
Current	symptoms:	
> sti	st day or two (4) ill feeling dizzy so feels (5) speriencing fatigue	
Medical	history:	
> flu	)allergy ı last winter ) sports injury	
Family r	nedical history:	
> (8 > (9 > gr		

> possible (10) \_\_\_\_\_in grandfather

# ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH **Patient's concerns:** > wants to play in (11) \_\_\_\_\_next week Advised patient: > not to play (possible serious consequences) > to rest and (12) \_\_\_\_\_ Extract 2: Questions 13-24 You hear a doctor talking to a patient called Mrs June Wilcox. For questions 1 to 12, complete the notes with a word or short phrase. Patient: June Wilcox Patient's description of condition: problems breathing (13) \_\_\_\_\_ has felt (14) \_\_\_\_\_ (gave up netball) worse at night > started (15) \_\_\_\_\_12 - 18 months ago > serious fatigue in the morning **Previous treatment:** > (16 \_\_\_\_\_ from the chemist (not effective long-term) ➤ GP prescribed (17) \_\_\_\_\_ **Diagnosis:** ➤ Positive (18) \_\_\_\_\_ accompanied by (19) \_\_\_\_\_ Suggested course of action: recommended (20) \_\_\_\_\_\_ to align cartilage structure > Patient's concerns: worried about (21) \_\_\_\_\_ > previous complications with (22) \_\_\_\_\_ > offered to outline (23) \_\_\_\_\_ options > sometimes suffers 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.

OET30 LISTENING MATERIALS - NOT FOR SALE

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 nurse and a senior nurse discussing a patient. Where is the patient's range of motion most restricted?
  - A. in his left shoulder.
  - B. in his right knee.
  - C. in his hips
- 26. You hear an optometrist talking about amblyopia to parents and teachers at a kindergarten.

What is he optometrist doing?

- A. how parents can detect the condition
- B. recommending children get tested
- C. explaining why it can't be detected
- 27. You hear a nursing lecturer talking about side effects to a group of student nurses.

What is she discussing?

- A. the medications with the greatest amount of reactions.
- B. the types of patients who experience reactions to medication.
- C. the reactions some people experience to some common medications.
- 28. You hear a senior registrar talking about cholesterol to a group of junior doctors.

What is he doing?

- A. highlighting the dangers of doing nothing.
- B. explaining when treatment may be required
- C. suggesting that it can be difficult to make a diagnosis
- 29. You hear an agency nurse checking his schedule with an employee at the agency

When does the agency employee need the nurse to work

- A. on Saturday
- B. on Monday.
- C. on Friday.
- 30. You hear a conversation between a senior nurse and a student nurse.

The senior nurse is

- A. explaining a range of safety measures.
- B. highlighting how easily accidents can happen.

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

C. outlining the use of some important hospital equipment.

#### 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 a dietician called Eli Parr on the topic of belly fat.

- 31. Ms Parr has raised the issue of belly fat because
  - A. more education is required.
  - B. it is affecting so many people.
  - C. experts can't agree on its causes.
- **32.** Why does Ms Parr believe belly fat is so dangerous?
  - A. Most people have more of it than they used to
  - B. There are currently no medications to treat it.
  - C. It causes a complex response in the body.
- 33. What are Ms Parr's views about losing body fat?
  - A. Overall reduction is the most important factor.
  - B. Targeting high risk areas is the best approach.
  - C. There are good new methods to help lose weight.
- 34. Ms Parr considers a healthy diet to be one that
  - A. avoids all types of sugar.
  - B. encourages burning food as fuel.
  - C. contains all the bodies' essential nutrients.
- 35. Ms Parr says that some people have trouble losing fat because of
  - A. their failure to accept they have a problem
  - B. social factors that are difficult to control.
  - C. the pressures associated with a busy lifestyle.
- **36.** When does Ms Parr recommend people seek further advice?

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- A. If they are a lot heavier than they used to be.
- B. If they aren't as strong as they once were.
- C. If they notice they have a wide waistline.

#### Now look at extract two.

## Extract 2: Questions 37-42

You hear a primary care physician called Dr Greg Richter giving a presentation on the subject of secondary prevention of suicide.

- 37. Why does Dr Richter mention that those who committed suicide were in contact with doctor?
  - A. to suggest that better prevention techniques are needed
  - B. to indicate where most of the problem is located
  - C. to highlight how many people it affects.
- 38. Dr Richter believes the most important area for suicide prevention is
  - A. understanding where a patient falls within specific classifications.
  - B. the doctor's role in judging a patient's particular condition.
  - C. the patient taking responsibility for their current predicament.
- 39. What does Dr Richter say helps when identifying suicidal risk?
  - A. Considering specific views from the patient themselves.
  - B. identifying chronic physical ailments
  - C. Accepting that each patient has their own unique problems.
- **40.** What are Dr Richter's views on antidepressants being used in suicide prevention?
  - A. they should only be used with older patients.
  - B. they are not as well understood as they should be.
  - C. they need to be more effectively integrated with other actions.
- 41. Regarding the risk of suicide, Dr Richter suggests that
  - A. the need for increased levels of medication.
  - B. governments could be doing a lot more to help.
  - C. modern-day society is a major contributing factor
- 42. Dr Richter explains that to improve secondary suicide prevention in the future
  - A. there needs to be attention given to innovative methods.
  - B. greater emphasis needs to be placed on physician training.
  - C. detailed analysis of what does and doesn't work needs to occur.

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

#### 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 – ANSWER KEY

## PARTS A, B & C

## **PART A: QUESTIONS 1-12**

- 1. Car accident
- 2. Dizzy
- 3. Whiplash
- 4. Sore neck
- 5. Bit sick
- 6. Penicillin
- 7. Sprained ankle
- 8. Hypertension
- 9. Heart disease
- 10. Alzheimer's
- 11. Hockey Tournament
- 12. Stay off feet

## **PART A: QUESTIONS 13-24**

- 13. Through left nostrils
- 14. Short of breath
- 15. Snoring
- 16. Decongestants
- 17. Corticosteroid and antihistamine spray
- 18. Deviated septum
- 19. Large turbinates
- 20. Septoplasty
- 21. Surgery
- 22. Knee
- 23. Less structurally invasive
- 24. Anxiety

## **PART B: QUESTIONS 25-30**

- 25. A
- 26.B
- 27.C
- 28. B
- 29.C
- 30. A

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

## PART C: QUESTIONS 31-36

- 31.B
- 32.C
- 33.A
- 34.B
- 35.B
- 36.C

## PART C: QUESTIONS 37-42

- 37. A
- 38.B
- 39. A
- 40.C
- 41.C
- 42. A

## **END OF KEY**

# **OET30 Listening Mock Test 19**

#### 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**

Family medical History:

You hear a gastroenterologist talking to a patient called Joseph Alvarez. For questions 1 to 12, complete the notes with a word or short phrase.

Patier	nt: Joseph Alvarez	
Recen	Recent medical history:	
<b>A</b>	blood in urine sharp (1) clear ECG and ultrasound of (2) normal (3) 2 years ago	
Current symptoms:		
AAAA	stomach constantly (4) past 18 months good day - no pain bad day - constant pain sleeps badly due to (5) experiences pain before eating - pain returns 30mins later (6) food makes it worse	
Medio	cations:	
>	has never (7) bitter, sour taste when (8) used to take (9) for an ulcer	
Lifestyle details:		
	drinks a few glasses of wine per week used to smoke (10) a day quit recently	

	D LISTENING MATERIALS - NOT FOR SALE
>	LEDGEMENT – OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH Mother - died from a heart attack aged 90 Father - died from (11) at age 77
	nt's concern:
	worried it could be (12)
Extra	ct 2: Questions 13-24
You h	ions 1 to 12 ear a specialist physician talking to a patient called Julie Dooley. estions 1 to 12complete the notes with a word or short phrase.
Patier	nt: Julie Dooley
Reaso	on for presenting:
>	breast lump first noticed (13) located in (14)
Famil	y history:
	six months ago (15) from breast cancer (age 65) no other relevant history?
Perso	nal details:
>	patient (16) 9 months ago 2 children daughter aged 14 son aged 12
Medio	cal history:
	nil reports nil (17)
Other	symptoms:
AAAA	recent pain in chest - feels like a (18) pain radiates to (19) on one occasion no other symptoms
Physic	cal examination:
	located a (21) lump approximately (22) long

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#### **Patient's concerns:**

fearful of having a (23)
prepared to undergo (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 junior doctor speaking with a patient in the cardiac clinic while aconsultant is present.

What does the patient suggest about their pain?

- A. it affects his breathing.
- B. it is located mainly in his chest.
- C. it makes it difficult for him to go walking.
- You hear a senior nurse talking about removing sutures to a group of students. What is she doing?
  - A. Recommending a clear procedure to follow
  - B. Explaining why a clean environment is important.
  - C. Suggesting that sometimes there may be complications.
- 27. You hear a staff nurse talking to a patient she is escorting to the Radiology Department.

What does she need to know from the patient?

- A. If he has taken breakfast
- B. if he is accompanied by anyone
- C. His personal details.
- 28. You hear a nurse talking with a patient in the recovery unit. What is the patient worried about?
  - A. Her breathing difficulties.
  - B. The pain in her chest.
  - C. excessive sweating

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- 29. You hear the beginning of a training session for doctors.

  The trainer explains that the session will focus on
  - A. how hormones work.
  - B. the purpose of various glands.
  - C. problems with the endocrine system.
- 30. You hear a doctor talking to a nurse about a patient called Mr Kransky. The doctor wants the nurse to
  - A. ensure the patient can feed themselves by the end of the week.
  - B. contact the OT about the patient's swallowing reflex.
  - C. continue the patient on their current diet.

#### 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

- 31. Roger believes radiation therapists are necessary because
  - A. there are so many different types of cancer.
  - B. patients need help when battling cancer.
  - C. it is an essential way to treat cancer.
- **32.** What led Roger into becoming a radiation therapist?
  - A. He was inspired by the man who treated his mum.
  - B. He wanted to save people after his mum died from cancer.
  - C. He learnt so much while his mum was dying and wanted to put it to use.
- 33. Roger says that when treating patients, radiation therapists
  - A. often work very long hours.
  - B. regularly use a range of approaches
  - C. need to be aware of dangerous emission levels.
- 34. Roger mentions the case of his former patient, Susan, to
  - A. show that not everyone feels the same about radiation therapy.
  - B. highlight the types of equipment used in radiation therapy.

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- C. explain the steps involved in radiation therapy.
- **35.** Why does Roger find teaching radiation therapy rewarding?
  - A. He likes knowing his students are making a difference.
  - B. There is a lot that that he has learnt that he can pass on.
  - C. It provides opportunities for to work with past patients.
- 36. What does Roger suggest about cancer treatment in the future?
  - A. More patients should be encouraged to talk about their condition.
  - B. Physicians need to do a better job of reducing patient stress.
  - C. Further research is needed to reduce instances of the disease.

Now look at extract two.

## Extract 2: Questions 37-42

#### Part C

In this part of the test, you'll hear health professionals talking about aspects of their work.

For questions i to 6, choose the answer (A, B or C) which fits best according to what you hear.

- 37. Dr Werner suggests that when it comes to vitamin D production
  - A. the sun is important.
  - B. too much sun can be dangerous.
  - C. without the sun we increase our chance of illness.
- **38.** What does Dr Werner say about the benefits of vitamin D?
  - A. It eliminates a lot of serious disease.
  - B. More health practitioners should be supporting it.
  - C. There are a lot of unsubstantiated theories about it.
- 39. Dr Werner mentions the benefits of sun protection in order to
  - A. highlight the importance of covering up.
  - B. provide statistics on the incidence of cancer
  - C. discuss the different types of energy produced.
- **40.** Dr Werner believes using sun protection doesn't lead to vitamin D deficiency because
  - A. most people use low-SPF sunscreens.
  - B. it is impossible to block all ultraviolet light.
  - C. Radiation levels are higher than they used to be

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- 41. According to Dr Werner, we don't need very much sun exposure because
  - A. vitamin D deficiency s very rare
  - B. too much vitamin D can cause problems
  - C. even small quantities provide enough vitamin D.
- **42.** Dr Werner believes everyone can acquire the necessary allowance of vitamin D from
  - A. a combination of food and supplements.
  - B. dietary supplements alone
  - C. certain types of food.

That is the end of Part C.

You now have two minutes to check your answers.

THAT IS THE END OF THE LISTENING TEST

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

#### LISTENING SUB-TEST – ANSWER KEY

## PARTS A, B & C

## **PART A: QUESTIONS 1-12**

- 1. chest pain
- 2. abdomen
- 3. endoscopy
- 4. feels full
- 5. poor breathing
- 6. acidic
- 7. vomited
- 8. burping
- 9. losec
- 10. cigarettes
- 11. stroke
- 12. cancer

## **PART A: QUESTIONS 13-24**

- 13. 10 days ago
- 14. Left breast
- 15. Mum died
- 16. Separated
- 17. Medications
- 18. Pulled muscle
- 19. Back
- 20. Wake
- 21. Solid
- 22. Centimetres
- 23. Mastectomy
- 24. Chemotherapy

## **PART B: QUESTIONS 25-30**

- 25.B
- 26. A
- 27.C
- 28.B
- 29.C
- 30.C

## PART C: QUESTIONS 31-36

31.C

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- 32. A
- 33.B
- 34. A
- 35. A
- 36. A

# PART C: QUESTIONS 37-42

- 37.B
- 38. C
- 39. A
- 40.B
- 41.C
- 42. A

## END OF KEY

# **OET30 Listening Mock Test 20**

#### 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.

Ray Sands

Now, look at the notes for extract one.

## **Extract 1: Questions 1-12**

**Patient:** 

You hear a physiotherapist talking to a new patient called Ray Sands. For questions 1 to 12, complete the following notes with a word or short phrase. You now have 30 seconds to look at the notes.

18 months ago:	back injury sustained (lifting (1)	
1 year ago:	sciatica developed	
6 months ago:	clear of symptoms	
Last month:	recurrence of symptoms	
Patient's description of symptoms:		
<ul> <li>pain located in (2) _</li> <li>pain described as (3</li> <li>loss of mobility</li> <li>problems sleeping</li> <li>mentions inability to</li> <li>(5) sensar</li> <li>general numbness in</li> </ul>	o (4) as most frustrating aspect tion (calves)	
Occupation: (6)	(involves travel/some manual work)	
Initial treatment:		
<ul><li>prescribed NSAIDs</li><li>application of (7)</li></ul>	(provided some relief)	
Referrals:		

OET30 LISTENING MATERIALS — NOT FOR SALE  ACKNOWLEDGEMENT – OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH  (briefly)
sports injury specialist for manipulation and exercise programme
Further treatment:
<ul> <li>epidural injections</li> <li>(9)</li> <li>electrical impulses</li> <li>decided not to try (10)</li> <li>patient attributes recovery to (11)</li> </ul>
Previous diagnosis:
<ul> <li>sciatica probably related to (12)</li> <li>reports no history of pain in buttocks</li> </ul>
Now look at extract two.
Extract 2: Questions 13-24
You hear a consultant dermatologist talking to a patient called Jake Ventor.
For questions 13 to 24, complete the following notes with a word or short phrase You now have 30 seconds to look at the notes.
Patient: Jake Ventor
Reason for referral: skin lesion
Patient's description of condition:
<ul> <li>on the (13) of his left hand</li> <li>preceded by (14)</li> <li>then (15) form and join up</li> <li>surrounding erythema</li> <li>GP describes appearance of lesion as (16)</li> <li>normally resolved within two weeks</li> </ul>
History of condition:
<ul> <li>first experienced in 1990s when living in China</li> <li>also had a lesion on his (17) never recurred there</li> <li>recurs regularly on different parts of his left hand</li> <li>not becoming more (18)</li> <li>no apparent link to general state of health, (19) or stress</li> </ul>
Medical history:

> (20) \_\_\_\_\_ on lower back in 2006 - no sign of recurrence

# OET30 LISTENING MATERIALS — NOT FOR SALE ACKNOWLEDGEMENT — OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH ➤ reports no history of (21) \_\_\_\_\_\_ Information given: ➤ advised that (22) \_\_\_\_\_ was unlikely to be effective

➤ told him to take care of the skin is (23) \_\_\_\_\_

## Outcome:

- > says his quality of life isn't affected
- ➤ a (24) \_\_\_\_\_ will be arranged

#### 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 nurse briefng her colleague about a patient. What does she warn her colleague about?

- A. The patient is allergic to some types of antibiotics.
- B. Care must to be taken to prevent the patient from falling.
- C. Oxygen may be needed if the patient becomes breathless.
- 26. You hear the manager of a care home for the elderly talking to the nursing staff.

He says that errors in dispensing medication to patients usually result from

- A. interruptions while calculating dosages.
- B. a failure to check for patients' allergies.
- C. administering drugs late in the day.
- 27. You hear part of a morning briefing on a hospital ward. What is the plan for the patient today?
  - A. Her emotional state will be carefully observed.
  - B. She will be transferred to a more specialised unit.
  - C. A social worker will come to see what help she needs.
- 28. You hear part of an ante-natal consultation at a GP practice. What does the patient want to know about?

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- A. the advisability of a home birth
- B. ways of avoiding post-natal depression
- C. what painkillers might be available during labour
- 29. You hear a trainee doctor telling his supervisor about a problem he had carrying out a procedure.

The trainee feels the cause of the problem was

- A. Treatment administered previously.
- B. the patient's negative reaction.
- C. inappropriate equipment.
- 30. You hear a doctor talking to a teenage boy who has a painful wrist. The doctor wants to establish whether
  - A. a fracture may be misaligned.
  - B. the swelling may be due to a sprain.
  - C. there may be more than one bone affected.

#### 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 a cardiologist called Dr Jack Robson, who's an expert on Chagas disease.

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

- 31. Why does Dr Robson regard Chagas as a neglected disease?
  - A. because of the social groups it mainly affects
  - B. because patients often don't realise they're infected
  - C. because its impact is severe in a relatively small number of cases
- 32. Dr Robson says that concerns over Chagas in the USA are the result of
  - A. a rise in the number of people at risk of being infected with the disease.
  - B. a greater awareness of how many people there have the disease.
  - C. an increased prevalence of the insect which carries the disease.

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- 33. A patient called Marisol recently asked Dr Robson to test her for Chagas because
  - A. she was worried about the health of any children she might give birth to.
  - B. she wanted to know whether it was safe for her to donate blood.
  - C. she thought she had symptoms associated with the disease.
- 34. What problem does Dr Robson identify in the case of a patient called Jennifer?
  - A. an unwillingness to accept that she was ill
  - B. an inability to tolerate the prescribed medicine
  - C. a delay between the initial infection and treatment
- 35. What does Dr Robson say about his patient called Juan?
  - A. The development of his illness was typical of people with Chagas.
  - B. An incorrect initial diagnosis resulted in his condition worsening.
  - C. The medication he took was largely ineffective.
- **36.** Dr Robson thinks the short-term priority in the fght against Chagas is to
  - A. increase efforts to eliminate the insects which carry the parasite.
  - B. produce medication in a form that is suitable for children.
  - C. design and manufacture a viable vaccine.

#### Now look at extract two.

## Extract 2: Questions 37-42

You hear an occupational therapist called Anna Matthews giving a presentation to a group of trainee doctors. You now have 90 seconds to read questions 37-42.

- 37. Anna says that the main focus of her work as an occupational therapist is
  - A. designing activities to meet the changing needs of each patient.
  - B. making sure she supports patients in reaching their goals.
  - C. being flexible enough to deal with patients of all ages.
- 38. When Anna frst met the patient called Ted, she was
  - A. unable to identify completely with his attitude.
  - B. optimistic that he would regain full mobility.
  - C. mainly concerned about his state of mind.
- 39. Because Ted seemed uninterested in treatment, Anna initially decided to focus on
  - A. what he could achieve most easily.
  - B. allowing him to try and help himself.

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- C. making him come to terms with his injuries.
- **40.** Anna feels that, in the long term, her therapy helped Ted because
  - A. it led him to become less emotional.
  - B. it made him appreciate the need for patience.
  - C. it showed him there was something to work towards.
- 41. Anna describes the day Ted had his plaster casts removed in order to
  - A. demonstrate how slow any progress can seem to patients.
  - B. illustrate the problems caused by raising a patient's hopes.
  - C. give advice on what to do when patients experience setbacks.
- 42. Anna suggests that when patients like Ted recover enough to go home, they are often
  - A. too ambitious in what they try to achieve initially.
  - B. able to build on the work of the occupational therapist.
  - C. held back by the over-protective attitude of family members.

#### That is the end of Part C.

You now have two minutes to check your answers.

THAT IS THE END OF THE LISTENING TEST

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

#### LISTENING SUB-TEST – ANSWER KEY

#### PARTS A, B & C

## **PART A: QUESTIONS 1-12**

- 1. (a) (heavy) suitcase / case
- 2. (his/the) right leg
- 3. (really) intense
- 4. turn over in bed / get comfortable
- 5. tingling
- 6. events organiser
- 7. compression packs
- 8. (an) osteopath
- 9. Ultrasound
- 10. Acupuncture
- 11. combination of treatments
- 12. slipped/herniated disc

## **PART A: QUESTIONS 13-24**

- 13. palm
- 14. itching / itchiness / pruritus
- 15. (little) blisters
- 16. Chaotic
- 17. Chest
- 18. Frequent
- 19. diet / anything in (his) daily life
- 20. (removal of) / (malignant) melanoma
- 21. cold sores / herpes simplex / herpes labialis
- 22. (an) anti(-)viral cream
- 23. Broken
- 24. (a) biopsy

#### PART B: QUESTIONS 25-30

- 25. B Care must to be taken to prevent the patient from falling.
- 26. A interruptions while calculating dosages.
- 27. A Her emotional state will be carefully observed.
- 28. C what painkillers might be available during labour
- 29. A treatment administered previously.
- 30. A a fracture may be misaligned

#### PART C: QUESTIONS 31-36

31. A because of the social groups it mainly affects

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- 32. B a greater awareness of how many people there have the disease.
- 33. A she was worried about the health of any children she might give birth to.
- 34. C a delay between the initial infection and treatment
- 35. A The development of his illness was typical of people with Chagas.
- 36. B produce medication in a form that is suitable for children.

## **PART C: QUESTIONS 37-42**

- 37. B making sure she supports patients in reaching their goals.
- 38. C mainly concerned about his state of mind.
- 39. A what he could achieve most easily.
- 40. C it showed him there was something to work towards.
- 41. A demonstrate how slow any progress can seem to patients.
- 42. B able to build on the work of the occupational therapist.

#### **END OF KEY**

# **OET30 Listening Mock Test 21**

#### 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 gastroenterologist talking to a patient called Andrew Taylor. For questions 1 to 12, complete the following notes with a word or short phrase. You now have 30 seconds to look at the notes.

Patier	Andrew Taylor
Backg	ground:
AAAA	has had (1) over long period reports a frequent (2) sensation in the last year most recently (3) has become a problem word used to describe symptoms –(4) pre-existing skin condition aggravated frequent (5) patient didn't initially link these to bowel condition
Effect	s of condition on everyday life:
A A	works as an (6) situation at work means patient is (7) complains of lack of (8) has noticed an increase in insomnia
Diet:	
AAA	claims to be consuming sufficient (9) claims to keep hydrated has experimented with excluding (10) from diet very slight reduction in caffeine intake has undergone (11)no indications of anything problematic
Medic	eation:

OET30 LISTENING MATERIALS  ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGU  Now trying (12)	JAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH	
Now look at extract two.		
Extract 2: Questions 13-24		
•	talking to a new patient called Kathy Tanner.  the following notes with a word or short phrase.  ok at the notes.	
Patient: Kath	ny Tanner	
Background to condition:		
<ul> <li>experienced discomfort a</li> <li>osteopathy exacerbated p</li> <li>used (14) to re</li> </ul>		
Further developments in cond	ition and diagnosis:	
<ul> <li>describes a pulling sensation (dragging her head to the right)</li> <li>doctor recommended (15)</li> <li>diagnosis of spasmodic torticollis (ST)</li> <li>condition described as (16)</li> <li>resulted in feelings of depression</li> </ul>		
Treatment history:		
(a) from home		
<ul> <li>some months of (17)</li> <li>visited two neurologists v</li> <li>prescribed (18)</li> <li>joined an ST support grow</li> <li>bought (19) to</li> </ul>	without success _ (anti-spasmodic) up	
(b) from university hospital:		
<ul> <li>treatment using (20)</li> <li>side effects include diffic</li> <li>reports treatment as incressupplemented by (22)</li> <li>experienced confusion and analgesic relief: morphine</li> </ul>	asingly ineffective	

That is the end of Part A. Now look at Part B.

Part B

ACKNOWLEDGEMENT – OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH 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 an optometrist talking to a patient who's trying contact lenses for the first time.

What is the patient concerned about?

- A. his blurred vision
- B. soreness in his eyes
- C. how to remove the lenses
- 26. You hear a nurse asking a colleague for help with a patient.

Why does the nurse need help?

- A. The patient's condition has deteriorated.
- B. The patient is worried about a procedure.
- C. The patient is reporting increased pain levels.
- 27. You hear a senior nurse talking about a new initiative that has been introduced on her ward.

What problem was it intended to solve?

- A. patients' confusion over information given by the doctor
- B. relatives not being able to discuss issues with the doctor
- C. patients not discussing all their concerns when meeting the doctor
- 28. You hear two radiologists talking about the type of scan to be given to a patient.

They agree to choose the method which will

- A. allow them to see the whole of the appendix.
- B. probably give the most accurate results.
- C. have the fewest risks for the patient.
- 29. You hear part of a surgical team's briefing.

  The male surgeon suggests that the patient could
  - A. require specialist equipment during surgery.
  - B. benefit from a specific anaesthetic procedure.
  - C. be at risk of complications from another health issue.

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- You hear a senior research associate talking about a proposal to introduce interprofessional, primary healthcare teams.
  What hasn't been established about the teams yet?
  - A. the best way for collaboration to take place
  - B. the financial impact that they are likely to have
  - C. the aspects of medical care they are best suited to

#### 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 to 36

You hear a presentation by a specialist cancer nurse called Sandra Morton, who's talking about her work with prostate cancer patients, including a man called Harry. You now have 90 seconds to read questions 31-36.

- 31. What does Sandra Morton see as the main aim in her work?
  - A. to inform patients about the different treatments on offer
  - B. to publicise the availability of tests for the condition
  - C. to raise awareness of the symptoms of the illness
- 32. When Harry was offered a routine health check at his local surgery, he initially
  - A. resisted the idea due to his wife's experience.
  - B. felt that he was too ft and well to be in need of it.
  - C. only agreed to attend because his doctor advised him to.
- 33. During Harry's investigations for prostate cancer at a hospital clinic, he
  - A. felt part of the examination procedure was unpleasant.
  - B. found it hard to cope with the wait for some results.
  - C. was given false hope by a preliminary blood test.
- **34.** What was Harry's response to being diagnosed with prostate cancer?
  - A. He found himself reacting in a way he hadn't anticipated.
  - B. He was unconvinced by the prognosis he was given.
  - C. He immediately researched treatment options online.

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- 35. What typical patient response to the illness does Sandra mention?
  - A. an unwillingness to commence appropriate medication
  - B. a failure to seek advice regarding different treatment options
  - C. a reluctance to talk about the embarrassing aspects of treatment
- 36. Sandra believes that community follow-up clinics are important because they
  - A. offer patients more personal aftercare.
  - B. are proven to be less traumatic for patients.
  - C. provide rapid treatment for patients developing new symptoms.

#### Now look at extract two.

#### Extract 2: Questions 37-42

You hear a neurologist called Dr Frank Madison giving a presentation about the overuse of painkillers. You now have 90 seconds to read questions 37-42.

- 37. In Dr Madison's experience, patients who become addicted to painkillers
  - A. are more likely to move on to hard drugs.
  - B. come from a wide variety of backgrounds.
  - C. usually have existing psychological problems.
- 38. Dr Madison thinks some GPs over-prescribe opioid painkillers because these
  - A. have a long-standing record of success.
  - B. enable them to deal with patients more quickly.
  - C. represent a relatively inexpensive form of treatment.
- **39.** Dr Madison regrets that management of acute pain
  - A. is often misunderstood by the general public.
  - B. receives inadequate attention in medical training.
  - C. fails to distinguish between different possible triggers.
- **40.** Dr Madison's main concern about painkillers being readily available is that
  - A. patients may build up a resistance to them.
  - B. they may be taken in dangerous amounts by patients.
  - C. they may interact adversely with patients' other medication.
- 41. Dr Madison refers to the case of an osteoarthritic patient called Ann to highlight
  - A. the unsuitability of opioids for patients with particular conditions.
  - B. the effect on patients' working lives of dependence on painkillers.
  - C. the extreme fear patients may have of living without pain medication.

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- **42.** Ann's GP initially failed to identify her dependence because
  - A. she managed to conceal its physical effects from him.
  - B. he was unaware that she had another source of drugs.
  - C. he lacked experience in dealing with problems like hers.

#### That is the end of Part C.

You now have two minutes to check your answers.

THAT IS THE END OF THE LISTENING TEST

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

#### LISTENING SUB-TEST – ANSWER KEY

## PARTS A, B & C

## **PART A: QUESTIONS 1-12**

- 1. heartburn (after meals)
- 2. bloating
- 3. constipation
- 4. (so) unpredictable
- 5. Migraines
- 6. Accountant
- 7. Anxious
- 8. Energy
- 9. Fire
- 10. dairy (products)
- 11. (extensive) food allergy tests
- 12. anti(-)depressants OR (an) anti(-)depressant

## **PART A: QUESTIONS 13-24**

- 13. stiff
- 14. heat pad OR heatpad
- 15. physio(therapy)
- 16. untreatable
- 17. chiropractic treatment
- 18. Baclofen
- 19. (an orthopaedic/a) chair
- 20. botulinum toxin OR botox
- 21. swallowing
- 22. (various) oral medications/meds
- 23. memory loss OR loss of memory OR amnesia
- 24. (a) pump

## **PART B: QUESTIONS 25-30**

- 25. A his blurred vision
- 26. B The patient is worried about a procedure.
- 27. C patients not discussing all their concerns when meeting the doctor
- 28. C have the fewest risks for the patient.
- 29. B benefit from a specific anaesthetic procedure.
- 30. B the financial impact that they are likely to have

#### PART C: QUESTIONS 31-36

31. C to raise awareness of the symptoms of the illness

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- 32. B felt that he was too ft and well to be in need of it.
- 33. B found it hard to cope with the wait for some results.
- 34. A He found himself reacting in a way he hadn't anticipated.
- 35. C a reluctance to talk about the embarrassing aspects of treatment
- 36. A offer patients more personal aftercare

#### PART C: QUESTIONS 37-42

- 37. B come from a wide variety of backgrounds.
- 38. B enable them to deal with patients more quickly.
- 39. C fails to distinguish between different possible triggers.
- 40. C they may interact adversely with patients' other medication.
- 41. A the unsuitability of opioids for patients with particular conditions.
- 42. C he lacked experience in dealing with problems like hers.

#### **END OF KEY**

# **OET30 Listening Mock Test 22**

#### 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 Dr Hamilton, a gastroenterologist talking to a Garry Wilton, a patient referred for an investigation. For questions1- 12, complete the notes with a word or a short phrase,

You now have thirty Seconds to look at the notes.

Patie	ot:  Garry Wilton  patient referred by General Practitioner
Histo	ry of the condition:
	Tummy pain for (1) (2) since the last month (3) prescribed by previous doctor
Invest	tigations prescribed:
>	(4) and blood tests
Exam	ination of symptoms:
AAAAA	after eating food or skipping meals especially after intake of anything (5)  (6) it on the lower tummy  More of a (7)  feels like a knife inside  (8) on skipping a meal, like something's on fire cannot concentrate at work
Medio	cations taken:
	paracetamol and (9) when in pain does not help for the stabbing sensation

# **Dietary habits:** does not have any specific times to eat > swaps breakfast with (10) \_\_\_\_\_ and junk food for lunch **Present diagnosis:** > either gastritis or trouble with (11) \_\_\_\_\_ of the stomach > (12) \_\_\_\_\_ an endoscopy in a few days Now look at extract two. Extract 2: Questions 13-24 You hear Dr Juvenita talking to a Griffith Alexander, a patient with back problems. For questions 13-24, complete the notes with a word or a short phrase. You now have thirty Seconds to look at the notes. Griffith Alexander **Patient: Patient's condition:** back spasm **Presenting symptoms:** > (13) \_\_\_\_\_ not sleeping well exhausted with discomfort **Treatment options:** > (14) \_\_\_\_\_ for the back pain spasm, medication for pain. > exercises and heating pad ➤ back pain gets better with the (15) \_\_\_\_\_ Patient's request: > needs an (16) \_\_\_\_\_ since he is concerned > might have a (17) \_\_\_\_\_ or slipped disc that requires attention **Explanation given:** has (18) \_\_\_\_\_ reveals other than a back spasm ➤ No Red flags to be concerned about > (19) \_\_\_\_\_ treatment is enough for most patients Patient's concern: been over a week, will be (20) \_\_\_\_\_ > will be informed if something is wrong > (21) \_\_\_\_\_ from the machine may ease the condition

OET30 LISTENING MATERIALS - NOT FOR SALE

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

#### Advice offered:

- MRI is an (22) \_\_\_\_\_ study, not a treatment mode
- MRIs may cause harm if its unrequired
- > most patients get better within (23) \_\_\_\_\_ with the prescribed treatment

#### **Patient's response:**

> consider an MRI if other (24) \_\_\_\_\_ present.

#### 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 nurse giving a hand over What does the nurse ask to be cautious about
  - A. medications of the patient
  - B. the level of care administered
  - C. social issues that are connected
- 26. You hear a bedside shift report by two nurses A comprehensive handover involves
  - A. complete details of the presenting complaints
  - B. full understanding of the patient's condition
  - C. thorough update of the procedures performed
- 27. You hear a talk on pain management after surgery What is recommended to reduce pain?
  - A. numbing the nerves of the site with PNC
  - B. frequent engagement of the new joint
  - C. management through physical activities
- 28. You hear a doctor talking on pre-operative consultation What is done to identify the patient's expectations
  - A. prepare a complete case sheet of the patient
  - B. understand responses made in the questionnaire
  - C. verify choices made based on discussions

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- 29. You hear a professional talking on a code blue system
  What does he say is the distinctive feature of the system
  - A. increased power output from the tool
  - B. customisation to specific standards
  - C. identification of the source of call
- 30. You hear an update on the change in criteria for glaucoma To qualify for the condition
  - A. the patient must have more than 25mm of mercury
  - B. it must be a co-morbidity of neuromuscular disease
  - C. the level should fall within the adequate category

#### 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 Samantha Solon, a lead scientist on diet that boosts the miracle hormone

You now have 90 seconds to read questions 31-36

- 31. Samantha feels that prospects for are high because?
  - A. it has been proven effective for longevity
  - B. the effects of administration are long term
  - C. varied indicators of health can be influenced
- 32. What does the study of diet in mice identify
  - A. an influence on metabolic rate
  - B. effective way for increasing the hormone
  - C. the animals showed an increase in weight
- 33. Samantha opines the influence of protein is
  - A. minimal without high carbohydrate
  - B. in tandem with the carbohydrates
  - C. optimal with high carbohydrate

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- **34.** According to the expert, evidence from paradoxical conditions are
  - A. that reduced protein intake is crucial
  - B. teased apart for clarity on findings
  - C. studied for influence of insulin variation
- 35. What can be done to harness the potential of the hormone?
  - A. modify the diet and nutritional guidelines
  - B. administration by means of chronic injection
  - C. develop a mimetics for increased effectiveness
- **36.** What can be said with certainty as per the expert
  - A. everyone is in a race for an answer
  - B. the dynamics can not be explained now
  - C. no one knows the mechanism of action

#### Now look at extract two.

#### Extract 2: Questions 37-42

You hear a talk by a specialist on the health effects of sweetened beverages. You now have 90 seconds to read questions 37-42.

- 37. The speaker regards consumption of sugar as worrying because
  - A. young Australian men are more prone
  - B. Many associated risks begin to develop
  - C. Australia ranks high in sugar consumption
- 38. Rethink Sugary Drink Council is promoted for
  - A. major health associations across the country
  - B. highlighting the amount of sugar in drinks
  - C. considering the required sugar usage by the public
- 39. The speaker says the urge in children is driven mainly by
  - A. following their role models
  - B. consumption of fast food
  - C. availability of the product
- **40.** Levy of tax on sugary drinks is endorsed by the speaker because
  - A. it will induce the buyer to restrict usage
  - B. there is bound to be a drop in overall body weight
  - C. increased supply will in turn result in huge returns

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- 41. The case of tax is mainly refuted by some due to
  - A. loss of employment in the industry
  - B. forced choice and coercive measures used
  - C. preference given over overall health education
- 42. studies are in agreement when it comes to
  - A. reason for weight gain
  - B. fructose doesn't control hunger
  - C. definition of the variables

That is the end of Part C.

You now have two minutes to check your answers.

THAT IS THE END OF THE LISTENING TEST

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

#### LISTENING SUB-TEST – ANSWER KEY

## PARTS A, B & C

## **PART A: QUESTIONS 1-12**

- 1. (last) 5 years
- 2. Worse
- 3. Antacids
- 4. Endoscopy
- 5. Acidic
- 6. Feels
- 7. stabbing pain
- 8. burning sensation
- 9. ibuprofen
- 10. coffee
- 11. lining
- 12. schedule

## **PART A: QUESTIONS 13-24**

- 13. unbearable pain
- 14. something
- 15. treatment
- 16. MRI
- 17. pinched nerve
- 18. nothing
- 19. conservative
- 20. unable to work
- 21. magnetism
- 22. imaging
- 23.4-6 weeks / 4 to 6 weeks
- 24. symptoms

## PART B: QUESTIONS 25-30

- 25. B
- 26.C
- 27. B
- 28. C
- 29.B
- 30.C

## PART C: QUESTIONS 31-36

- 31.C
- 32.B
- 33.C

ACKNOWLEDGEMENT - OET OFFICIAL, E2 LANGUAGE, IRS, BRITISH ACADEMY, OET ONILNE, MAIWA AND SWOOSH

- 34.B
- 35.A
- 36.C

# **PART C: QUESTIONS 37-42**

- 37. A
- 38.C
- 39. A
- 40.B
- 41. A
- 42. A

## END OF KEY