OCCUPATIONAL ENGLISH TEST **ALL PROFESSIONS**

Tom Fassnidge

Medical Advisers: Dr Christopher A Green, Dr Rebecca L Winslow Series Consultant: Alison Ramsey

Language Test for Healthcare **Professionals**



A day in the life

Objectives

Reading • Reading overview • Types of reading texts & questions Listening

Listening overview
Types of listening texts & questions

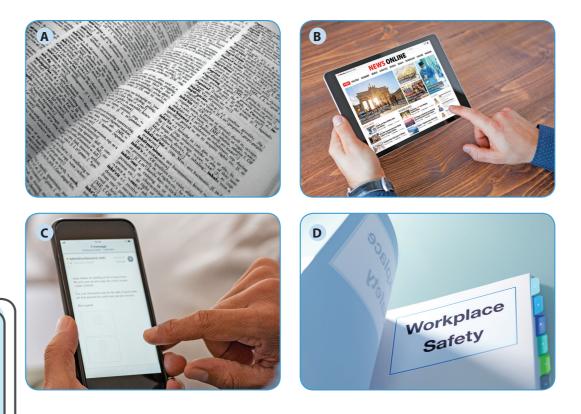
Language and Skills • Skills overview • Reading & listening for gist, detail and purpose



Reading

Lead-in

1.1 Discuss with a partner. How do you read each of these types of material? Think about why you read them, how long you spend reading them, how much of them you need to read and how much of them you need to remember. How do these factors affect the way you read?



Test Tip

All the texts in the OET Reading sub-test are chosen to represent documents that health professionals might encounter in the course of their work. You can practise your reading skills every day with the texts you read for different aspects of your job. Pay attention to the way you read each type of text and how you find the information you need.

- **1.2** In your job, how do you learn about issues like training, procedures and administration? Think about the types of documents you read (memos, guidelines, manuals etc.), how you receive them (email, printed document, journal etc.) and how you read them (in a training session, in a meeting, during a break etc.).
- **1.3** Imagine this is your to-do list for the first half of your working day. What kinds of documents will you have to read to complete the tasks?

1 Research short presentation about asthma

2)Find out about training, schedules, meetings etc.

3) Catch up on latest developments in the industry

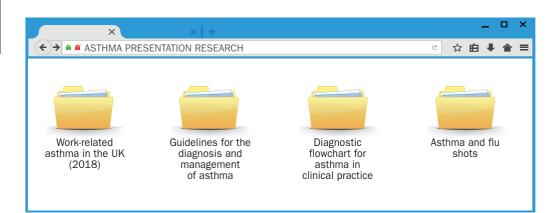


Test Tip

When you first look at the texts in Reading A, notice how the information is arranged. Things like titles, headings and bullet points can help you locate answers more quickly. You should also be aware of distinctive content such as names, numbers and technical language, which stand out from other information on the page.

Introduction to Reading A

2.1 To research your presentation about asthma, you have downloaded these documents. What kind of information do you think each one contains?



2.2 Work in pairs. Student A, look at texts A and B below. Student B, look at texts C and D on page 11. Spend a maximum of two minutes studying your texts, then cover them and tell your partner everything you can remember about them. As your partner describes their texts to you, check the information they give you by looking at the texts.

Text A

Text B

Work-related asthma in the UK (2018)

There is no universally accepted definition of 'occupational asthma', though it is typically defined as adult asthma caused by workplace exposures and not by factors outside the workplace. The wider definition of 'work-related asthma' includes all cases where there is an association between symptoms and work, such as 'work-aggravated asthma', which typically refers to pre-existing cases made worse by non-specific factors in the workplace. Many cases of occupational asthma are allergic in nature and typically involve a latency period between first exposure to a respiratory sensitiser in the workplace and the onset of symptoms.

Test Tip

The texts in Reading A are about different aspects of the same subject and may contain a diverse range of information. For some questions, it will be quite obvious which text probably contains the answer, but in many cases, there will be more than one possibility, so you will need to use a combination of skimming (reading for overall meaning) and scanning (reading for detail) to be sure.

Guidelines for the diagnosis and management of asthma

Inhaled Corticosteroids

Inhaled corticosteroids (ICS) are the most effective medications for long-term management of persistent asthma.

Check Asthma Severity

At diagnosis, all patients should have an initial severity assessment based on measures of current impairment and future risk.

Asthma Action Plans

All people who have asthma should receive a written asthma action plan.

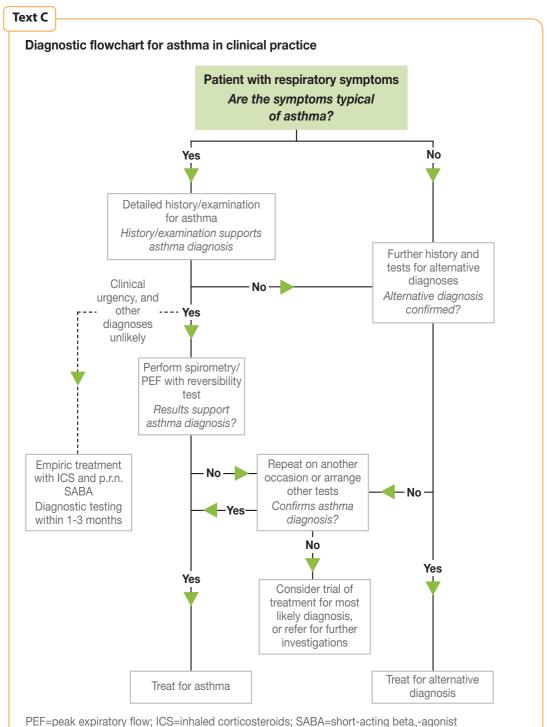
Check Asthma Control

At planned follow-up visits, asthma patients should review level of control with their healthcare provider based on multiple measures of current impairment and future risk.

Follow-up Visits

Patients who have asthma should be scheduled for planned follow-up visits at periodic intervals.





Text D

Asthma and flu shots

Adults with asthma are at high risk of developing complications after contracting the influenza virus, yet many adults with asthma do not receive an annual flu vaccination. Only 58% of all asthmatic adults and 35% of asthmatic adults younger than 50 years of age receive the flu vaccine annually.

Respiratory infections like influenza are more serious in patients with asthma, and such infections can often lead to pneumonia and acute respiratory disease.



Test Tip

Each type of question in Reading A requires slightly different skills. Whenever you practise for Reading A, reflect on how you find the answers and make a note of the most successful techniques. 2.3 You have decided to cover these topics in your presentation. Based on your reading in the last exercise, in which of the texts would you find the information you need?

- **1** How to distinguish asthma from other conditions
- 2 Environmental causes of asthma
 - **3** How to treat chronic asthma

7 4 Check your answers by looking at the texts.

2.5 To prepare for your presentation, you think of some questions your colleagues might ask you about asthma. Read them and decide which of the four texts is most likely to contain the answer to each one, then scan the texts for the information you need.

- 1 What proportion of adult asthma sufferers under 50 get a flu shot each year?
- 2 How soon should diagnostic tests be conducted if severe asthma is suspected?
- **3** What is it called when a patient's asthma is made worse by their working conditions?

2.6 You make some notes to refer to in your presentation. Complete the notes with words and phrases from the texts.

- **1** Influenza is likely to cause ______ for adult asthma sufferers.
- **2** If multiple tests on patients with asthma symptoms do not result in an asthma diagnosis, _____ may be requested.
- **3** Patients diagnosed with asthma should be given an ______ to determine the seriousness of their condition.
- 4 People whose asthma is triggered by substances they inhale at work usually go through a ______ before they become symptomatic.

2.7 Using the texts A–D, prepare a short (1–2 minutes) presentation about asthma. Try to avoid using the language of the texts as much as possible without changing the meaning.



Introduction to Reading B

× + -			J.SMITH 🛜 3.15 PM		
J. Smith jsmith.aic@aicgroup.com			Q ##		
	Ł	🔺 🔹 🕺			
СОМРОЅЕ		Sender	Subject		
Inbox Important		Healthcare Workers' Information Network	You may be paying too much for certifications		
Sent mail	\star	Practice management	Safeguarding		
Drafts	The Medical Gazette		Pay rises 'not keeping up with cost of living'		
Spam Trash		Premier Clinical Equipment Sales	SAVE MONEY NOW on the latest gadgets!		
	*	Patty Clemence	Re: Requests for emergency appointments		
Contacts Calendar	\star	Practice nurse	Vancomycin administration		
		Marisol Morales	Plans for the weekend?		
		Dennis Forlani	Discharge procedure		

3.1 Look at the subject lines of the messages above. If you had a few free minutes at work, which of them would you:

a read immediately?

b save to read later?

- **c** delete without reading?
- **3.2** What do the subject lines tell you about the content of the messages? Are they giving information, making a request, or something else? Discuss with a partner.

3.3 Look at three of the messages below and discuss these questions:

- **a** Who is the intended audience for each message?
- **b** What is the purpose of each message?
- c What is the most important information in each message?

Safeguarding

Safeguarding adults is everyone's business and practice nurses have a professional duty as directed by the Nursing and Midwifery Council. Practice nurses should be able to promote and protect the rights of patients who are not able to protect themselves from harm or abuse. And they must not assume someone else will report a safeguarding concern. It is important that vulnerable adults are kept as safe as possible and are involved in safeguarding decisions. In line with this, the reporting of abuse needs to be done in a timely manner in accordance with local policies, procedures and legislation.

Test Tip

In Reading B, you need to read six texts and answer a question about each one. The texts will all be on different subjects and could relate to any of the 12 professions eligible for OET.

(1)



2

MY INBOX

	INDOX			Oliver S	6. Johnson	
COMPOSE	Search	My account	Settings	Calendar	Contacts	Cloud
 All Mail Inbox (12) Sent Drafts Deleted Spam Categories Work Personal To Do Misc Archived Tags Urgent Social Offers Later 	Subject: Re: Requests for emergency ap From: Patty Clemence To: All staff Patients and staff have recently raised concert insufficiently clear. Please note the following it • When receiving a request, reception staff which the patient or their carer can be content • The doctor on duty will assess the urgent accordingly • If the issue cannot be resolved over the surgery • It is not possible to assign patients to a particular duty	pointments ms that the procedure for boc information and communicate should note the details of the ntacted cy of each case based on this phone, the patient will be gi	oking eme it to patio emergeno informati iven an a	ergency ag ents as neo cy and tak ion and co ppointme	opointmen cessary: e a numbe ontact pat ent to visit	nts is er on ients t the
	Receptionists are not responsible for prio	ritising cases and should make	this clear	to patien	ts who cal	1

3

Vancomycin Administration

Vancomycin is very irritating to tissue and should not be given intramuscularly as this can cause injection site necrosis. It must be given by slow intravenous infusion using a dilute solution to reduce the risk of tissue necrosis if extravasation (leaking) occurs. Vancomycin should not be given rapidly due to the risk of infusion reactions. The intravenous use of vancomycin may be associated with the so-called 'red-neck' or 'red-man' syndrome, characterised by erythema, flushing, or rash over the face and upper torso, and sometimes by hypotension and shock-like symptoms. The effect appears to be due in part to the release of histamine and is usually related to rapid infusion. It may also cause pain or muscle spasm.

3.4 Use the texts and your ideas from the last exercise to answer a question about each message.

- 1 What does the message say about vulnerable patients?
 - **a** Primary responsibility for informing authorities of their mistreatment lies with nurses.
 - **b** Standards governing their protection may differ depending on their location.
 - c Choices affecting their safety and wellbeing should be made by them alone.
- 4 Patients who need an emergency appointment
 - **a** should not expect to see their usual doctor.
 - **b** can see a doctor if their case is serious enough.
 - c must give their phone number to a receptionist.
- 4 The effect of vancomycin on the skin may be minimised by
 - **a** using antihistamine.
 - **b** injecting it quickly.
 - c adding water to it.

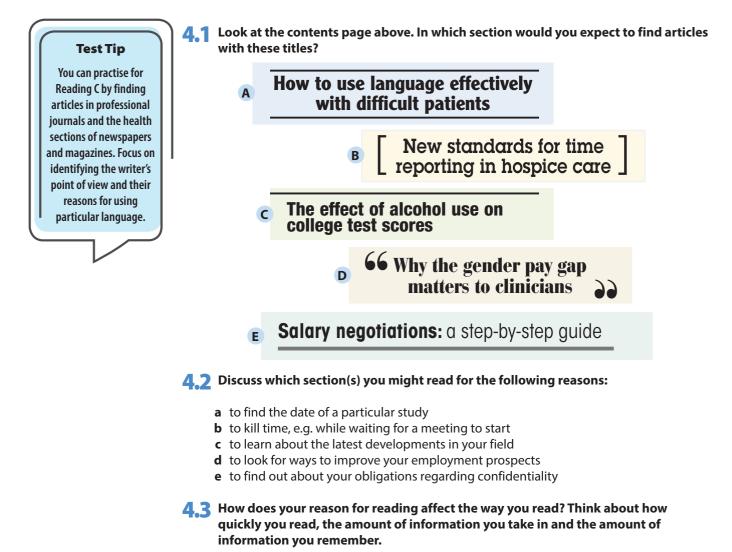
Test Tip

In Reading B, you will either have to choose one of three answers to a question or complete a sentence using one of three options.



Introduction to Reading C

The Medical Gazette	
Contents	
News 03 Opinions 11 Research 17 Policy 22 Professional Development 26 Jobs 30	
Policy 22 Professional Development 26	





4.4 Look at the headline, photo and caption below. Do you think the story is positive, negative or neutral?



Device that converts phone screen into braille a 'lifeline for deaf-blind people'

4.5 Which of these things do you think the story will contain? Why?

- **a** quotations
- **b** statistics
- \boldsymbol{c} opinions
- d graphs, charts and tables
- e explanations

4.6 Now take a maximum of two minutes to check your answers to 4.4 and 4.5.

Melbourne woman Heather Lawson is both deaf and blind; to participate in an interview she requires support from two interpreters. She places her hands over those of the first interpreter and feels via touch as he signs my questions to her. A second interpreter translates her responses back to me. But despite the multi-layered conversation, this remarkable and independent woman's great sense of humour shines through.

Ms Lawson was born without hearing and grew up communicating via sign language. By the time she reached her 20s, she gradually began losing her sight as well. 'It really did affect my life,' she said. A small device has given Ms Lawson, and the wider deaf-blind community, the opportunity to connect with the world. In recent years a small display which fits in her handbag has become vital as it converts the words on her phone screen into braille. 'It's just fantastic, that technology, and I love it. It has made my life a lot easier and I've been able to achieve things.' The braille display connects to the phone via Bluetooth, allowing her to access emails, SMS, Facebook, apps and the internet. It also makes banking and navigating public transport much easier. 'I live an independent life, and I have for a number of years, but the technology that's available now has allowed me to remain independent,' Ms Lawson said. The machine also allows her to write notes in the phone which can be useful for communicating with taxi drivers.

She once used it to communicate with firefighters who had broken into her home to respond to a fire alarm. 'I didn't realise the firemen had broken into my house to turn it off,' she said. 'We were able to communicate on my computer using the braille display. **I get goosebumps** just thinking about it. It

was a great experience.' The device has 14 braille cells which change with the touch of a button to reflect the next passage of text. 'It does take a little bit more time for me to read things using those buttons but it's definitely worth it,' Ms Lawson said.



4.7 Look at the first paragraph again. Why do you think the writer chose to begin the story in this way?

4.8 Read the following question and the four possible answers. Are any of them similar to your ideas from the last exercise? Decide which option is correct.

- **1** The first paragraph is intended to
 - **a** illustrate how difficult it is to interview a person with a disability.
 - **b** show that a disability doesn't take away someone's personality.
 - c explain how blind people communicate with sighted people.
 - **d** highlight the work of interpreters for deaf-blind people.

4.9 Now answer three more multiple-choice questions about the story.

Test Tip

Rather than asking for specific information such as a year or the name of a medication, Reading C questions will ask you to interpret the text to find things like the opinion of a person quoted by the writer. You may also need to choose the answer which best summarises a section of the text.

- **2** What positive effect does the second paragraph say the device has had on Ms Lawson's life?
 - **a** She can communicate with other deaf-blind people.
 - **b** She no longer needs to use sign language.
 - **c** She is able to read the text on her phone.
 - **d** She can talk to people in other countries.
- **3** What does the quotation in the third paragraph tell us?
 - **a** Ms Lawson's current lifestyle would not have been possible in the past.
 - **b** Ms Lawson was unable to use buses or taxis before she had the device.
 - c Using the device has given Ms Lawson a greater degree of autonomy.
 - **d** Technologies like email and the internet are essential to Ms Lawson.
- 4 Ms Lawson uses the phrase 'I get goosebumps' to illustrate that she
 - **a** was frightened when firemen broke into her house.
 - **b** is looking forward to using the new technology.
 - c was surprised that the device was so effective.
 - **d** is excited by the memory of the incident.



Listening

Lead-in

1.1 Imagine that you are going to observe the situations in the photos as part of a training day. What kind of information do you think you will hear in each one?



1.2 Do you think the speakers will use formal or informal language? Why?

1.3 In which situation(s) do you think it will be important to recognise these types of information?

- 1 details such as the name of a medication
- 2 the cause or effect of a medical condition
- **3** decisions or the results of discussions
- **4** expert knowledge of a subject
- 5 people's opinions

1.4 (1.2) Listen to extracts from three recordings and match each of them to one of the situations.

1.5 () 1.2 Now answer an exam question about each extract and listen again to check.

You hear a GP talking to a patient called Anita Wilkins. Complete the notes with a word or short phrase.
 Patient: Anita Wilkins

Diagnosis:

- **2** You hear a hospital manager addressing a committee about an occupational therapy suite.
 - What does the committee still need to discuss?
 - a whether to refurbish the suite
 - **b** what the most important issues are
 - c when the work needs to be finished
- **3** You hear part of a presentation by a dentist called Dr Hamish Lennon, who teaches clinical communication techniques.
 - Dr Lennon says that his professional experience
 - **a** informs a great deal of his teaching.
 - **b** helps him refine the skills he teaches.
 - c makes his teaching easier to understand.

1.6 Discuss the listening skills you needed to use for each question and the ways you used the language of the questions to predict what you might hear.



Introduction to Listening A

- 2.1 For your first training observation, you are going to hear some more of the consultation between Mrs Wilkins and her GP. Based on the introduction and your own ideas, make a list of some topics they might discuss.
- 2.2 Think of some details that you might need to make notes about, e.g. the name of a medication, the length of a course of treatment or the words the patient uses to describe her symptoms.
- **2.3** Look at the doctor's notes for the next part of the consultation. Do they contain any of the information you thought of in the last two exercises?

Onset:	Occurred (1)	while in the USA			
	for work				
	Doctors initially suspected (2)				
	but antibiotics ineffective/blood tests negative				
Differential diagnosis:	Fibromyalgia discounted as patient presented with				
	(3)r	ather than pain			
	Possibility of (4)	ruled out by MRI			
Symptoms:	First resembled (5)	(aches,			
	general malaise) accompanied by tiredness (described as				
	(6))				

- 2.4 Study the notes for 30 seconds, thinking about the types of words that could fit in the spaces.
- **2.5** 1.3 Now listen to the rest of the recording and complete the notes with words or short phrases. You don't need to change the form of any of the words you hear.
- 2.6 Look at the audioscript on page 111 and notice the difference between the language of the dialogue and the notes. Write down any useful synonyms and paraphrases that you find.

Introduction to Listening B

Test Tip

The recordings in Listening B will represent many different healthcare contexts, often with a focus on administrative or procedural matters. Like in the other parts of the test, you don't need any particular knowledge of the subjects being discussed – all of the information you need to answer the questions will be in the recordings.

- **3.1** For your second observation, you will listen to two more extracts from meetings involving healthcare professionals. What are some topics that you might hear about?
- **3.2** Read the question about the first meeting and three possible answers. Discuss ways the speakers could express the ideas in the question and answers.
 - 1 You hear part of a conversation between a pharmacist and a doctor about their shared patients.
 - What does the doctor identify as a priority for her patients?
 - **a** managing more than one health problem at the same time
 - **b** knowing that their symptoms are normal for their age
 - **c** being informed how much medicine they should take

3.3 () 1.4 Now listen and choose the correct answer. Did you hear any of the language you discussed in the last exercise?

Test Tip

In Listening A, minor spelling and grammar errors are acceptable as long as your meaning is clear - if you write that a patient 'have trouble sleeping' instead of 'has trouble sleeping' or spell emphysema as emfisima, you will still get the mark. However, this is not true in Reading A, where the words should come directly from the text and must be spelled correctly.



3.4 (1.5) For the second meeting extract, listen to the recording and answer the question in your own words before looking at the options.

2 You hear a surgeon describing the outcome of an operation. What does he mention as a positive aspect of the operation?

3.5 (1.5) Now look at the options and choose the one which most closely matches your ideas from the last exercise. Listen again and check.

- **a** The patient's cancer was completely removed.
- **b** The method was more economical than the alternative.
- c The procedure had fewer complications than earlier treatments.

3.6 Read the audioscript on page 111 to identify the language that confirms the correct and incorrect answers to the questions in this activity.

Introduction to Listening C

- **4.1 1.6** For your final observation, you're going to hear some more of Dr Lennon's talk about patient communication. Listen and discuss what you think Dr Lennon's main point is in this section.
- **4.2 b 1.6** Look at this question and three possible answers. Are any of them similar to your ideas from the last exercise? Listen again and decide which option is correct.

Dr Lennon says that trust

- **a** is the most important part of a relationship with a patient.
- **b** depends on the patient knowing their doctor is qualified.
- c can be built by demonstrating empathy and expertise.
- **4.3** (17) In the next section, Dr Lennon talks about another aspect of patient communication. Listen and try to describe the focus of the section in one sentence.

4 4 6 1.7 Listen again and answer the question.

What does Dr Lennon say has changed in relationships between health professionals and their patients?

- a health professionals' attitudes to patients
- **b** patients' expectations of health professionals
- c health professionals' interest in patients' lifestyles

4.5 () 1.8 Listen to the next section and try to identify examples of these types of language:

- a comparison, e.g. greater, not as much
- **b** contrast, *e.g. but, whereas*
- c emphatic language, e.g. extraordinary, definitely
- d cautious language, e.g. might, possibly

4.6 1.8 Listen again and answer the question.

When he first met his patient Barbara, Dr Lennon was

- a surprised she had taken so long to make an appointment.
- **b** concerned that her surroundings might affect her mood.
- c doubtful about his chances of treating her successfully.

Test Tip

You may think an answer is correct or incorrect based on your existing knowledge even before you listen to the test recording. Remember, though, that the answers must correspond with what the speaker says, so even if something is true, it's only a correct answer if it matches the recording.

SAMPLE PAGE FROM ADDITIONAL RESOURCES SECTION

Additional resources

UNIT 9 Administration and professional interactions

Reading B Identifying purpose Ex. 4.1 & 4.2 (Student B), page 92

Record keeping guidelines

A patient's medical records are a document of their interactions with the healthcare system, and it is <u>therefore</u> essential for everyone involved in a patient's care to play their part in keeping them up to date and accurate. This <u>ensures</u> that treatment is administered based on the best available knowledge and can be shared, delegated and adapted as necessary. It also <u>enables</u> investigations and audits to be carried out in a timely and thorough manner and protects healthcare workers when their actions are subject to legal challenges. <u>Because</u> of the variety of record keeping methods in use across the health service, staff should undertake regular training on how to create, store and retrieve records, <u>so that</u> delays, misdiagnoses and security breaches can be avoided.

Reading B Identifying purpose

Ex. 4.3 (Student B), page 92

- **a** What does the text say about increased discounts?
- **b** What does the text say about the price of advance bookings?
- c What does the text say about registering attendees simultaneously?