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Patient Jason Bosworth**Patient history**

- age 21
- generally in good health (student of (13)) _____
- had a (14) _____ accident (five days ago)
- no treatment-was wearing a (15) _____
- woke up next morning with (16) _____ (previous history)

Current symptoms

- suffering from (17) _____ (e.g. at gym)
- describes a (18)' _____ ' sensation at other times
- occasionally feels (19) _____
- reports some memory problems/confusion (e.g. lost (20) _____)
- feels unusually sensitive to (21) _____ (e.g. restaurant)
- girlfriend has noticed that he's (22) _____

Patient concerns

- finding it difficult to (23) _____ (exams pending)
- has an important (24) _____ soon

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 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 briefing a colleague about a patient.

What is the main concern about the patient overnight?

- A her reluctance to adhere to a diet
- B the amount of pain she's reporting
- C the risk presented by her limited mobility

26. You hear a GP talking to a patient who has acne.

What is the patient asking for?

- A advice about non-medical remedies
- B a change in his current medication
- C a referral to a skin specialist

27. You hear a surgeon briefing his team before an operation.

We learn that the patient's previous operation

- A revealed an unsuspected condition.
- B was postponed due to other health issues.
- C was unsuccessful and so needs to be repeated.

28. You hear a nurse educator telling a group of trainees about pressure ulcers.

What is she doing?

- A explaining how to assess risk in paediatric patients
- B outlining the procedure for dealing with patients at high risk
- C describing how to draw up a care plan for different types of patients

29. You hear a GP talking to a patient.

Why has the patient come to see her?

- A He's worried about his brother's state of health.
- B He's been having similar symptoms to his brother.
- C His brother has advised him to seek medical advice.

30. You hear two nurses conducting a handover at the change of shift.

What is the incoming nurse asked to do for the patient?

- A arrange a meeting with the doctor
- B change the composition of an infusion
- C check the position of a nasogastric tube

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 scrub nurse called Joanna Swann. You now have 90 seconds to read questions 31-36.

31. What does Joanna say about the name 'scrub nurse'?

- A She prefers not to use it herself.
- B The job involves more than it suggests.
- C It can lead to unnecessary misunderstandings.

32. During her first experience of perioperative nursing, Joanna was

concerned about

- A how much she would need to lake part.
- B how long the operation would go on for,
- C how she would feel watching the incision.

33. Joanna thinks that before going into scrub nursing, it's necessary to

- A study for a specific qualification,
- B work in a related area of nursing.
- C check out local terms and conditions.

34. What skill does Joanna feel is most important for a scrub nurse?

- A being able to prioritise different tasks
- B dealing with a number of things simultaneously
- C remaining calm when unexpected problems arise

35. What does Joanna appreciate about the team meetings in her hospital?

- A She feels her contribution is valued.
- B She is able to help less experienced colleagues.
- C She learns a lot about different approaches to surgery.

36. What does Joanna say about her patients?

- A She doubts the wisdom of getting to know them personally.
- B She accepts that her job involves only limited contact with them.
- C She participates in efforts to improve their experience of surgery.

Now look at extract two.

Extract 2: Questions 37-42

You hear a junior doctor called Graeme Holder giving a presentation on the subject of hand transplants. You now have 90 seconds to read questions 37-42.

37. Dr Holder suggests that hand transplants are more acceptable to patients than prostheses because

- A a wider range of movements is regained.
- B they are less likely to need on-going treatment.
- C they feel more motivated to overcome any initial discomfort.

38. Dr Holder says that upper-limb transplants are now more common as a result of

- A expensive drugs being used in smaller quantities.
- B new combinations of drugs proving to be effective.
- C the strength of drugs that have recently become available.

39. What point does Dr Holder make about rejection?

- A It normally represents only a short-term setback.
- B It occurs less frequently than in organ transplants.
- C It is often suspected but not subsequently confirmed.

40. Dr Holder explains that, during the procedure, one of the surgical teams deals exclusively with

- A the patient who is receiving the transplanted hand.
- B preparing the bones that need to be grafted together.
- C monitoring blood supply during the whole procedure.

41. Dr Holder mentions a recent bilateral transplant in the UK which is unusual because

- A each hand recovered at a similar rate.

- B only a part of each hand was transplanted.
- C both hands were transplanted at the same time.

42. What does Dr Holder say about donors?

- A It should be easier to find them than organ donors.
- B They don't always offer to donate limbs as well as organs.
- C People should be encouraged to donate limbs rather than organs.

That is the end of Part C.

You now have two minutes to check your answers.

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