



**MATERIAL**



# Quick Learn Test Material

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**LISTENING TEST 6****Part A****PLEASE WRITE CAREFULLY****1 Name of the patient and reason for his visit**

**Name :** Joseph

**Reason:** Suffering from pain in his back, he injured his back recently

**2 Notes on the patient's back injury**

- He hurt his back for the second time recently
- He also hurt his back at the age of 16
- He felt a similar kind of pain at that time too
- Age: 24

**3 Personal information about the patient**

- Sports he is interested in include:
- Cricket
- Golf
- His profession: works at a store, loading and unloading – manual work

**4 Notes on how Joseph hurt his back and what he did**

- Felt pain while loading the boxes into the truck
- Felt a kind of twinge in his back
- Unable to sleep properly because of pain
- Pain increased more
- Went to physio and had a massage
- Asked to take rest again for a week

## **5 Notes on current and previous injuries**

### **Current injury**

- The pain is in the right-hand lower back.
- Mainly the pain is on his back or around his back
- Sometimes he feels pain when he sits with his knees bent

### **Previous injury**

- Quite similar to the pain he had when he was sixteen
- Didn't feel the pain going down into the leg

## **6 Treatment offered by Doctor Alan**

- Didn't prescribe anything here - False
- Prescribed Nurofen – False
- Joseph still takes Nurofen – False

## **7 Notes on details of the problem**

- Feels pain sitting in a chair if he continues sitting for 20-30 minutes
- Feels no pain when lying flat in bed

- Feels no pain while walking
- Feels pain sitting in a jammed position

**8 Notes on comments made by Doctor Alan**

- Needs some physiotherapy
- Analgesics and
- Some exercises will help you move around easily without any back pain

**9 Result of the examination done by the doctor and suggestions made by him****Result of the examination:**

**A kind of muscular problem**

**All reflexes are normal**

**No damage of any nerves**

**Suggestions by the doctor:**

- Recommended visiting a physio at least twice or three times in a week
- Recommended to try heat treatment
- Some kind of exercise as well

**10 Analgesics prescribed by the doctor**

- Nurofen and Panadol

- Take Nurofen 2 or 3 times a day and
- Two tablets of Panadol four times a day

**Notes on side effects:**

- Nurofen can upset stomach
- It can cause gastritis as well

**Notes on use of alcohol**

- Suggested not to drink at all or to drink moderately (at least)
- Told that drinking can disturb or aggravate the situation

**11 Further questions asked by the doctor and the answers given by the patient****Any weight loss:**

**Answer: no**

**Does Joseph smoke?**

**Answer: no**

**Part B**

**Please write carefully**

**1 Name of the doctor**

Doctor Lee

**The talk is about**

Tetanus and causes of Tetanus

**2 Tetanus is caused by**

**Toxin** produced by the bacterium *Clostridium tetani*.

**Notes on C. Tetani**

- Bacteria cannot grow in the presence of oxygen
- They produce spores that are very difficult to kill as they are resistant to heat and many chemical agents.

**3 Notes on tetani spores**

- Can be found in the soil
- In the intestine and feces of many household and farm animals and humans
- According to the speaker, tetanus spreads .....

**4 Symptoms of Tetanus include**

- First sign is a spasm of the jaw muscles, followed by stiffness of the neck
- Difficulty in swallowing and stiffness of the abdominal muscles

**Other signs include**

- Fever
- Sweating
- Elevated blood pressure
- Rapid heart rate
- Spasms can often occur

**5 Circle the best answer**

**B A B B**

**6 Complete the gaps in the summary**

Diagnosis of **tetanus** is always based on the clinical signs and **symptoms**. It can safely be said that laboratory **diagnosis** cannot be useful as the C. tetani bacteria acts **differently**. It usually cannot be recovered from the **wound** of an **individual** who has **tetanus**. It can be isolated from the **skin** of an individual who does not have tetanus.

**7 Complete the following table**

Tetanus Bacilli		
It lives in the soil	Dangerous kind of injury involves contamination with  (i) dirt (ii) animal feces (iii) manure	Many other injuries can also allow tetanus bacilli to enter the host body

People can also get tetanus from
(i) Splinters
(ii) Self-piercing
(iii) Self-tattooing
(iv) Injecting drug users are also at risk of tetanus

### 8 Answer the following questions

**1 What should be done if someone steps on a nail in their yard or somewhere else?**

Seek treatment immediately.

**2 What does treatment depend on?**

Treatment depends on vaccination status and the nature of the wound.

**3 What does a patient with an unknown history of tetanus vaccination need?**

Needs a tetanus- and diphtheria-containing shot (Td or Tdap) and a dose of tetanus immune globulin (TIG) as soon as possible.

**4 Write notes on a person with a documented series of three tetanus and diphtheria-containing shots (Td and Tdap):**

A person with a documented series of three tetanus and diphtheria-containing shots (Td or Tdap) who has received a booster dose within the last ten years should be protected.

B To ensure adequate protection, a booster dose of the vaccine may still be given if it has been more than five years

**9 Complete the following notes**

Neonatal Tetanus	<p>Form of tetanus that occurs in newborn infants</p> <p>Most often through the use of unsterile cutting instruments on the unhealed umbilical stump</p>
Statistics	<p>Neonatal is very rare in the United States</p> <p>Common in many developing countries</p> <p>It caused more than 257,000 deaths worldwide each year in the years 2000 to 2003.</p>

**10 Fill in the gaps**

There is no "cure" for **tetanus** once the symptoms start **developing** in a **person**. Only **supportive treatment** and **management of complications** are the best types of treatment. It can be said that the best "treatment" is prevention through **immunization**.

**LISTENING TEST 7****Part A.**

1 Sample Question

Name of the doctor: Suzain

Name of the patient: Martha

Problem: Injured Knee

**2 Notes on Martha's Injury**

The patient just **tripped over and fell down....**

**Grazed her knees**

**Bleeding occurred**

Lost some **5 ml of blood or perhaps more**

**3 Notes on personal information / information about Martha's injury**

Age: **35**

Feels **pain**

Did Martha apply any cream at the site of wound?

Answer: **Yes, antibacterial cream... something like neosporin**

**4 Notes on examination by the doctor**

She dressed the wound soon after **she fell down**

It was bleeding and **she wanted to stop it**

**5 Notes on examination by the doctor again**

**Skin layer has totally peeled off..**

Reason Martha gave for her late visit: **she was not in the city**

**Describe the problem**

Problem with walking

**Takes short steps**

**Feels pain while bending or folding the leg**

**6 Notes on Martha's history of this medical problem**

**No illness**

**Suffered from a mild headache on the day of injury**

**She is not a sugar patient**

**7 Notes on further examination by the doctor**

**Back pain**

Back pain / Night / during day time

Pills

**8 Notes about explanation of the examination by the doctor again**

**Advised not to take anything which may not be good for her**

**It could be nocturnal back pain**

Nearly 70 to 80 percent of the people suffer from it..

A day / pain-free .

**9 Notes on explanation by the doctor after examination**

Prescription

Take as directed.

Paracetamol, **twice a day**

Non-steroidal anti-inflammatory drug, **ibuprofen** once in a **day....**

**Penicillin Injection**

Is patient allergic to anything?

**Answer: Yes, to penicillin**

**10 Notes on questions by the patient again**

Who does the doctor ask Martha to meet?

Doctor Hillary, an expert **PT with almost 30 years of experience.**

Where can Martha meet her?

**Answer: Martha can meet her at Health Care Hospital on the Regent Street.**

**PART B****WRITE CLEARLY**

1a Name of the doctor - Tammy Nazario

1b He is a Trichologist,

1c Talks about Alopecia Areata

2a affects **the hair follicles**

2b hair falls out in **small, round patches about the size of a coin**

2c Many people may get only a few bare patches. Some may **lose more hair** but in some others there can be **total loss of hair on the head** or complete loss of hair **on the head, face, and body**

3 Who Gets Alopecia Areata?

3a **often begin in** childhood

3b it is an **autoimmune** disease

3c in an autoimmune disease, the body's immune **system mistakenly attacks some part of your own body.**

3d **cause is not known**

3e The triggers may be a **virus or something in the person's environment.**

4 Will My Hair Ever Grow Back?

4 a no one can tell you when **their hair might fall out or grow back**

4b a person may lose more hair, or **hair loss may stop.**

4c **a person who has lost all of his hair may** grow all of his hair back.

4d The disease varies from **person to person.**

5 How Is Alopecia Areata Treated?

5a treatment **is not available**

5b There are no **drugs approved to treat it.**

5c notes on **Corticosteroids:**

- (i) Corticosteroids are drugs that reduce **swelling and pain.**
- (ii) They also affect the immune system.
- (iii) Injected in the skin**
- (iv) Swallowed as **pills**
- (v) Rubbed on the skin as **a cream or ointment.**

6a Drugs that are rubbed on the skin as a cream or lotion may include:

- (i) Minoxidil **(5%)**
- (ii) Anthralin
- (iii) Squaric acid dibutyl ester (**SADBE**) and
- (iv) diphenyl**cyclopropenone** (DPCP).

6b Drugs that affect the immune system include:

- (i) Sulfasalazine
- (ii) Cyclosporine.**

6c Complete the sentences about Photochemotherapy:

- (i) In photochemotherapy, **the drug** given is psoralen
- (ii) The drug can be **swallowed or rubbed on the skin.**
- (iii) Once the drug is taken or applied, the area with hair loss is exposed to an **ultraviolet light source.**
- (iv) This combined treatment is called **PUVA.**

7 Alternative therapies:

7a includes

- (i) **acupuncture**
- (ii) aroma therapy
- (iii) evening primrose **oil**
- (iv) zinc and vitamin supplements
- (v) **chinese herbs.**

8 How Will Alopecia Areata Affect My Life?

8a Alopecia areata doesn't make **you feel pain and does not make you feel sick.**

8b People who have the disease are healthy in other ways.

8c Alopecia areata will not shorten **life,**

8d not affect activities such as working, **marrying,** raising a family, **playing sports, and exercising.**

9 How Can I Cope With the Effects of This Disease?

9a Things that can be done to cope with the effects of this disease, include:

- (i) **Learning as much as you can about the disease**
- (ii) **Talking with others who are dealing with the disease**
- (iii) Talking with a counselor, if necessary, to help build a **positive self-image**

9b To reduce the physical dangers or discomforts of lost hair:

- (i) Use sunscreens **for the scalp, face, and all exposed skin**
- (ii) Wear eyeglasses (or sunglasses) to protect eyes from sun, and from **dust and debris**, when eyebrows or eyelashes are missing
- (iii) **Wear wigs, caps, or scarves** to protect the scalp from the sun and keep the head warm.
- (iv) Apply **antibiotic ointment** inside the nostrils to help keep germs out of the nose when nostril hair is missing.

10 What Research Is Being Done on Alopecia Areata?

10 Scientists are studying:

- Genes
- Hair **follicle development**
- **Immune treatments**
- Stem cells in the skin
- **Medications**

## LISTENING TEST 8

### PART A

1. Name of the doctor: **Doctor Rachel**

Name of the patient: **Morgan Tyler**

Referred by: **Doctor Lewis**

**2 Notes on Morgan's problem**

- Has been feeling an unusual kind of pain in his chest.
- He is unable to bear it
- It usually happens after he eats food
- He has been experiencing this for a week

**3 Notes on questions asked by the doctor**

Age of the patient: **49**

Profession: **Works in a mall as an accountant.**

Smokes? Yes , **but not a chain smoker.**

Drinks alcohol? Yes, **but occasional**

**4 Notes on further questions asked by the doctor**

**Reason given by the patient for the late visit:**

He thought it was **just because of his weight lifting.**

**Possible reason given by the patient for back pain**

- **Works out in the gym**
- **Broke his usual exercise regime, it is something that he does sometimes**

**5 Notes on examination by the doctor again**

**Explanation by the patient about the problem:**

- **Feels severe pressure**
- **Pain in the center of the chest that lasts for more than a few minutes**
- **Pain even seems to spread to the shoulders, neck, arms, or jaw**

- **Feels a bit dizzy as well**

**6 Notes on patient's history of this medical problem**

Morgan Tyler is not a BP patient but he is suffering from **diabetes which is just normal**.

He takes tablets regularly, **goes for a walk or does a bit of exercise**

**Explanation by the doctor about the pain**

Can't say it is associated with **heart illness**

It can be because of some **indigestion too**

**7 Notes on suggestions by the doctor.****Suggested by the doctor:****Stop going to the gym**

Chest pain can be related to symptoms of **illness of the heart**

Tests prescribed include:

**Chest X ray****Stress test****8 Notes on explanation by the doctor****What is a stress test?**

Answer: This is the test which **will let us know how the heart responds, how it responds to exertion**

It is a test to determine the **amount of stress** that the heart **can manage before developing** either an abnormal rhythm or evidence of ischemia

Name of the other test: **Echocardiogram**

**9 Notes on explanation by the doctor again**

**What is Echocardiogram?**

**Answer:**

**An echocardiogram is a test that uses ultrasound to evaluate your heart muscle, heart valves, and risk of heart disease.**

**Prescribed: Nitroglycerine for pain**

**10 Notes on suggestions by the doctor again**

- **No smoking**
- **No alcohol**

**End of Part A**

**PART B ANSWERS - WRITE CLEARLY**

**1 Name of the Doctor - Charles Alvaro**

**He is an ophthalmologist**

**Talking about Amblyopia**

**2 What is Amblyopia?**

**2a Amblyopia is poor vision in an eye that did not develop normal sight during early childhood.**

**2b Other name - lazy eye**

**One eye develops good vision and the other does not, then the eye with poorer vision is termed amblyopic.**

**2c Both eyes can be affected – true**

2d Two or three out of every **100 people are affected**

3 How does normal vision develop?

3a **During the early childhood years**, the visual system changes and develops.

3b Vision does not develop properly, **if a child does not use his or her eyes normally**

3d The development of equal vision in both eyes is **necessary for normal vision.**

4 When should vision be tested?

4a It is recommended that **all children have their vision checked on or before their fourth birthday.**

4b Most physicians test vision as part of a **child's medical examination.**

4c They will refer a child to an **ophthalmologist if there is a sign of eye problems.**

4d If there is a family history of misaligned eyes, an ophthalmologist should examine the eyes during infancy.

5 What causes Amblyopia?

5a Amblyopia is caused by **any condition that affects normal use of the eyes and visual development.**

5b In many cases, the conditions associated with Amblyopia may be **inherited.**

5c One of the major causes of the Amblyopia can be associated with Strabismus (**or misaligned eyes**)

5d Amblyopia occurs most commonly with misaligned or **crossed eyes.**

5e The crossed eye **"turns off"** to avoid **double vision**, and the child uses only the better eye.

6a Other causes may include:

- (i) **unequal focus or refractive error and**
- (ii) **cloudiness in the normally clear eye tissues**

6b Refractive errors are eye conditions that are corrected by **wearing glasses**.

6c Amblyopia can also occur in both eyes **if both eyes have very blurred vision**.

6d **Cataract** may lead to Amblyopia.

7 How is Amblyopia diagnosed?

7a Amblyopia is detected by **finding a difference in vision between the two eyes or poor vision in both eyes**.

7b If one eye is amblyopic and the good eye is covered, **the baby may attempt to look around the patch, try to pull it off, or cry**.

7c Poor vision in one eye doesn't always necessary mean the child has Amblyopia – **True**

8 How is Amblyopia treated?

8a **A child must be made to use the weak eye**.

8b It is done by patching or covering the strong eye, often **for weeks or months**.

8c **Glasses may be prescribed to correct errors in focusing**.

8d If glasses alone do not improve vision, then **patching is necessary**.

8d Amblyopia may also be treated by blurring the **vision in the good eye with special eye drops** or lenses to force the child to use the amblyopic eye.

9 If Amblyopia is not treated, the following problems may occur:

9a **The amblyopic eye will have permanently decreased vision**

9b Depth perception (seeing in three dimensions) **will be lost**

9c If the good eye is ever injured, a **lifetime of poor vision will occur.**

10 Success in the treatment of Amblyopia also depends upon:

10a **How severe the Amblyopia is and** how old the child is when treatment begins....

10b If the problem is detected and treated early, **vision can improve for most children.**

10c Amblyopia caused by strabismus or unequal refractive errors may be treated successfully during the **first nine years of age.**

If Amblyopia is not detected **until after early childhood**, treatment may be unsuccessful.

**End of Part B**

**LISTENING TEST 9**

**PART A**

Name of the patient: **Daniel**

Reason for his visit: **Stomach ache (severe)**

## 2 Notes on Daniel's condition

- Feels intense pain
- There is this burning sensation
- Happened first time
- Feeling uncomfortable
- Has been suffering from it for three weeks

## 3 Notes on personal information from Daniel

Age: **36**

Profession: **not given (works in an office)**

**Doesn't eat home cooked food**

**Eats food outside (lunch and dinner)**

**Breakfast is always at home**

## 4 Notes on examination by the doctor

**Questions about food**

Have not eaten anything, any kind of **heavy food**

Same lunch and dinner at the same restaurant

**Like pasta and pizza**

**5 Notes on further questions by the doctor again****How has the patient described the pain?**Described as **very painful**Disturbing **his sleep, his work at home**Not even **jogging anymore**Described this pain as in between **5 and 7** in a scale of **1 to 10****Pain comes and goes**Faced an operation at the age of **12****Appendices removed**No **acidity problems** – digestion is good**6 Notes on further questions by the doctor****Pain develops often after meals**

- It hurts when he eats
- Eats greasy food a lot

**What has the doctor suggested here?****Avoid greasy food****Avoid pasta and pizza****7 Notes on the kind of pain felt by the patient**He feels pain in the **middle of the abdomen**Pains travels **to his shoulders, he feels pain in his shoulders**His back **aches especially during night time****Feels good in the morning, no pain**

**8 Notes on patient's condition again**

Feels more painful **when he lies down**

**He even tastes the acid in his mouth**

Felt like vomiting twice

**Doesn't eat spicy food much**

Bowel movement **is regular. There is no change**

**9 Notes on the final phase of the discussion about Daniel's problem**

**Change in consistency of the bowel movement**

**It is a bit softer**

Change in color. **It is greener**

**No blood in bowel movement**

Feels acidity with pain too

**10 Notes on suggestion by the doctor**

**Medications listed out include:**

**Aspirin, Motrin, Advil**

Tylenol...

What has the doctor suggested?

Answer: Suggested to continue **Tylenol** for a day or two...

Suggested to undergo medical test as well

**End of Part A**

**PART B**

1 Name of the doctor - **Rachel Cooper**

Specialization - **Pediatrician or a pediatric advisor**

Talked about **New born infections**

2 Complete the sentences below

2a **Infections occur** in babies because their **defensive mechanism is poorly developed**

2b Use of antibiotics is recommended for dealing with infection – **YES**

**3 Questions on causes**

3a Common agents are **bacteria**

3b What does the speaker hint at here?

Answer: Speaker hints that the bacteria take affect right after their birth, as the babies come into contact with them swallowing or breathing in the fluid in the birth canal where bacteria can thrive.

3c Choose the correct answer

(a) (a)

4 What are the symptoms?

When a baby first develops an infection, the baby might:

- **not feed well**
- be very sleepy, not wake up for feeds
- be irritable, not **settle down after feeds**
- breathe fast (**over 60 breaths a minute**)

- have trouble keeping a **normal temperature** (a normal rectal temperature is 99.8°F, or **37.5°C**)
- not act right, **have a change in behavior**

4b list at least two things that happen if the infection gets worse

- **have pale or greyish skin**
- **work hard to breathe**
- **have a bluish color around the lips and mouth**

4c Some newborns may have an infection in only **one part of their body**

## 5 Answer the following questions

(i) **Four major tests talked about here include:**

**Blood test, urine test, secretion test, chest x ray**

(ii) **When is chest X-ray is taken?**

**Answer:** If a baby is having trouble breathing, a chest X-ray may be taken to look for signs of pneumonia.

## 6 Answer the following questions

6a Who can get meningitis?

**Answer:** Any baby who is very sick from infection or has bacteria in their blood could get meningitis.

6b How is meningitis diagnosed?

**Answer:** Meningitis is diagnosed by doing a test called a spinal tap (or lumbar puncture, LP) to get a sample of spinal fluid.

**6c What is done to make sure that the baby is breathing properly during the test?**

**Answer:** To make sure that the baby is breathing properly during the test, the baby is attached to a monitor.

**6d Which fluid is taken for the test of infection?**

**Answer:** Spinal fluid

**6e is there any risk of being paralyzed? If not, then how?**

**Answer:** There is almost no risk of paralysis because the needle is put into the space below the end of the spinal cord

**7 Answer the following questions**

**7a What does SCN stand for?**

**Answer:** Special Care Nursery

**7b Complete the gaps in the summary:**

A baby is taken to SCN for **evaluation and treatment**. The baby is placed on a **warming bed** and she is attached to a **monitor** that continuously measures **heart rate** and **breathing**. If the baby has trouble breathing, she may also be attached to a **pulse** oximeter that records the **amount of oxygen in her skin**.

**8 Complete the following table**

<b>Medicine</b>	
Suspected bacterial infections are treated with antibiotics.	An <b>IV</b> is put into one of the The IV delivers the right amount of <b>antibiotic</b> to the baby's <b>bloodstream</b> . Antibiotics are not well absorbed from a baby's <b>stomach</b> .
If the lab tests are <b>positive</b> for a bacterial infection or the baby's symptoms strongly suggest infection, the baby will get <b>IV antibiotics</b> for <b>7 to 14 days</b> .	
Most babies can fight infection without the <b>use of medicine</b>	

The two viral infections named here include	(i) herpes and (ii) chickenpox
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**9 Answer the following questions**

9a What is done to prevent dehydration?

**Answer:** If the baby is breathing too fast to eat, he is given fluids through the IV so he won't get dehydrated.

9b What is given to the baby if it is too sleepy to eat

**Answer:** If he is too sleepy to eat, he may be given IV fluids or he may be fed by dripping milk through a tube that passes through his mouth and into the stomach.

9c Complete the gaps

Some babies are not **very sick** and the only treatment they need is **antibiotics**. These babies are able to **breast-feed or bottle-feed**

10 true or false

10a true

10b true

10c true

**END of PART B**

**LISTENING TEST 10****PART A**

Name of the patient: **Ralph**

Reason for his visit: **unusual kind of burning sensation in his feet**

**2 Notes on Ralph's problem**

- Feeling burning sensation in his feet
- Feels very painful
- Feels like pricking with needles
- Comes and goes, but not totally

**3 Notes on Ralph's medical history**

- He is diabetic
- Became diabetic at the age of 40... He is 47 now
- But it is normal, under control
- Never faced any surgery

**4 Notes on further questions asked by the doctor****Information given by the patient**

- Drinks **occasionally, not habituated**
- He smokes
- Works in a chemical factory: **ANK** chemicals

- Never faced **any skin problem**

**5 Notes on examination by the doctor**

- Unusually swollen.....
- Feels pain in the ankle
- Had his blood sugar checked two days ago - range: **120-130**

**6 Notes on further questions by the doctor**

Patient feels burning sensation **at the end of a long day**

Not able to get **enough sleep**

**What is done to prevent infection while working?**

**Answer: Wear special leather shoes / wear leather gloves**

**7 Notes on explanation by the doctor**

**What does the doctor explain here?**

- **Problem is one of the common ones.**
- **It is called paresthesias or burning feet.**

It often affects people, who are **above 50**,

Affects those who have **diabetes**

Affects people who are suffering from **obesity, blood disorders, etc.**

**It can be dangerous if not treated in the early stages**

**8 Notes on further explanation of the problem by the doctor**

**Other symptoms which may include**

- Tingling sensation

- Swelling
- Redness
- Dull ache
- Increased sweating etc.

**Tests that Ralph will have to undergo include:**

**X-rays** and other diagnostic imaging tests like **CT scan, MRI scan**

**Purpose:**

**These are actually used to rule out nerve entrapment, nerve injuries, soft tissue masses**

**9 Notes on tests suggested by the doctor**

He will have to have a **biopsy** too if the tests are suggestive of skin cancer.

**Suggested by the doctor**

- Asked the patient to **take a week off**
- **Asked him not to wear leather shoes**
- Asked him to bathe feet in cool, **iced water to get some relief**
- **Asked him to elevate his feet while resting**
- **Asked him not to have alcohol / cigarettes**

**10 Notes on suggestions by the doctor again**

**What does the doctor prescribe here?**

Answer: **He will prescribe an ointment or a cream**

**What has the doctor asked him to wear?**

Answer: **Asked him to wear custom-made orthotics or footwear**

**End of Part A**

**PART B - WRITE CLEARLY**

1 Name of the doctor: **Doctor Fernandez**  
Topic of discussion: **restless leg syndrome.**

**2 Notes on restless leg syndrome**

- 1 A disorder related to **sensation and movement**
- 2 Unpleasant feeling or sensation in parts of the body when people lie down to sleep
- 3 Restless leg syndrome usually **affects the legs,**
- 4 it can cause unpleasant feelings **in the arms, torso, or even a phantom limb (the part of a limb that has been amputated).**
- 5 You may also be sleepy or **have trouble concentrating.**

**3 Complete the summary**

There is no **clear reason** for restless leg syndrome. Deficiency of **iron** can be the cause of it too. Treating the cause may really solve the problem. Women may get restless leg syndrome during pregnancy. Other problems such as **kidney failure, rheumatoid arthritis,** diabetes, nerve damage, **anemia,** and Parkinson's disease etc. are also known to be **very common.**

**4 Symptoms**

Restless leg syndrome makes the patient feel like ***moving a part of the body, usually legs.***

Feelings are often described as **tingling, "pins and needles," prickling, pulling, or crawling.**

**What are periodic limb movements?**

**Answer: While sleeping your legs or arms may begin to jerk or move. These movements are called periodic limb movements.**

Tiredness is common – **True**

## 5 Answer the following questions

What tests might the doctor order the patient to have?

**Answer: Doctor may order tests of your nerves to be sure there is no nerve damage.**

Your doctor may also order a sleep study called a polysomnography.

This test records **how often your legs jerk or move while you sleep.**

## Complete the gaps

Some changes that may help include:

- Avoid tobacco, **alcohol, and caffeine.**
- Keep your bedroom cool, quiet, and comfortable, and use it only for sleeping, not for watching TV.
- **Get regular exercise.**
- **Massage the leg or the arm, or use heat or ice packs.**

## 6 Complete the table

Treatment for restless leg syndrome is based on the type of symptoms and how bad the symptoms are

Treatment for other medical conditions	Treatment for severe symptoms	Treatment for mild symptoms
If other medical conditions such as <b>iron deficiency</b> etc. are the causes of the symptoms then those conditions should be <b>treated first.</b>	Medicines may be tried when symptoms are <b>severe</b> and <b>interfere</b> with sleep and <b>daily functioning.</b>	Getting <b>regular exercise</b> and <b>enough sleep</b> may relieve mild symptoms.

What can effectively control symptoms?

**Answer:**

Stretching,

**Walking,**

Exercising regularly,

**Taking a hot or cold bath,**

**Using massage,**

Losing weight **if you are overweight, and**

Avoiding **smoking and caffeine** may reduce or control your symptoms.

**7 Answer the following questions****1 What is the course of treatment if symptoms are due to deficiency in iron?**

**Answer:** If symptoms are caused by deficiency of iron then the patient will be treated for that condition first. For example, if iron deficiency is causing restless leg syndrome then the patient is prescribed iron supplements.

**2 What is recommended by doctors for pregnant women suffering from restless leg syndrome?**

**Answer:** Doctor may recommend conservative treatment, such as regular exercise and stretching, to relieve symptoms.

**3 What is the method of treatment of restless leg syndrome in children?**

**Answer:** Children who have restless leg syndrome are not usually treated with drugs in the beginning itself. First regular, moderate exercise and regular sleep routines are tried. If this treatment is not effective, the doctor may prescribe medicine.

**4 Some of the common drugs include:**

**Dopamine agonists**, such as ropinirole (requip)

Anticonvulsants, such as **gabapentin** (neurontin)

Opioids, such as **oxycodone** (for example, percocet)

Benzodiazepines, such as diazepam (valium)

**8 Answer the following questions or complete the answers**

### 1 What drugs might the doctor prescribe?

**Answer:** Doctor may prescribe drugs like **zolpidem** (for example, ambien) or eszopiclone (lunesta) alone or together with dopamine **agonists**, opioids, or **anticonvulsants**.

### 2 Name the drugs which may improve or worsen the condition?

**Answer:** Antidepressants improve restless leg syndrome in some people but make it worse in others.

### 3 What is the course of treatment if the condition gets worse?

**Answer:** If the patient continues to experience symptoms even though the patient is receiving treatment with **drugs** and is **exercising regularly, eating right** etc. then symptoms may need to be **reevaluated**. Many other conditions can cause **the sensations found in restless legs syndrome**, including several **vitamin and mineral deficiencies**.

### 9 Complete the table

Stretching and Massage	Changing your schedule	Heat or Cold	Exercise
The patient may be able to control symptoms by <b>gently stretching</b> and massaging the limbs before bed or <b>as discomfort begins</b> .	<b>Fatigue</b> can make symptoms worse. Because symptoms typically improve around <b>4 a.m. to 6 a.m.</b> Try going to bed later than usual or <b>allowing extra time</b> for sleeping in to help you get the rest you need.	Symptoms may be <b>relieved</b> by bathing in <b>very hot or very cold</b> water. Or try a heating <b>pad or ice bag</b> .	Regular, moderate exercise may <b>reduce symptoms</b> . Avoid long periods between activities and avoid sudden <b>bursts of intense activity</b> . Talking to the doctor before starting an <b>exercise program</b> is necessary.

## 10 Complete the following table

Always avoid			
Caffeine and alcohol	Certain medicines	Being confined for long periods	Excessive exercise
Reason: <b>These may make your symptoms worse.</b>	Reason: Some prescription and <b>over-the-counter (OTC)</b> medicines (such as cold and sinus medicines) can make symptoms of RLS <b>worse.</b> If symptoms get <b>worse</b> after you take a certain medicine, talk to your doctor.	Reason: Try to plan for times when you will need to <b>remain seated for long stretches.</b> For example, if you are traveling by car, <b>plan to make some stops</b> so you can get out and <b>walk around.</b>	Reason: Although <b>moderate exercise</b> may help <b>relieve symptoms,</b> unusually intense <b>workouts may make them worse.</b> Try to figure out at what level <b>exercise</b> helps and at what point it triggers <b>restless leg syndrome.</b>