



MATERIAL



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READING TEST 10**Reading: Part A****TIME LIMIT: 15 MINUTES****Instructions:**

- Complete the following summary using the information in the four texts provided.
- You do not need to read each text from beginning to end to complete the task. You should scan the texts to find the information you need.
- Gaps may require 1, 2 or 3 words.
- You should write your answers next to the appropriate number in the right-hand column.
- Please use correct spelling in your responses.

Text 1

Affecting several thousand Americans each year, myocarditis is a disease marked by inflammation of the heart muscle (myocardium). It is difficult to be specific about numbers because myocarditis often produces no symptoms. A wide range of infections and other problems can lead to myocarditis, which often develops in people who are otherwise healthy. Prevention or prompt treatment of infections are the best ways to prevent myocarditis.

Text 2

Viral infection is the most common cause of myocarditis. When you have an infection, your body produces cells to fight it. These cells also release chemicals and, if the disease-fighting cells enter your heart, they can release chemicals that can damage your heart muscle. Your heart may become thick, swollen, and weak. Seeking immediate medical care for infections can help prevent complications.

Some of the types of infections that can cause myocarditis include: viral infections, coxsackie B viruses, epstein-barr virus (EBV), cytomegalovirus (CMV), hepatitis C, herpes, HIV, parvovirus etc. Bacterial infections include: chlamydia (a common sexually

transmitted disease), mycoplasma (bacteria that cause a lung infection), streptococcal (strep) bacteria, staphylococcal (staph) bacteria, treponema (the cause of syphilis) etc. Fungal and parasitic infections can also cause myocarditis.

Other causes of myocarditis include certain chemicals or allergic reactions to medications or toxins such as alcohol, drugs, lead, spider bites, wasp stings, or snakebites, and chemotherapy and radiation therapy. Having an autoimmune disease such as lupus or rheumatoid arthritis that causes inflammation throughout your body may also lead to myocarditis.

Text 3

Myocarditis often has no symptoms but if there are any then they may last for a few days or weeks; in fact, most people recover and never even know they had it. If you do have symptoms, they may include one or more of these: shortness of breath during exercise at first, then at night while lying down; abnormal heartbeat, which causes fainting in rare cases; light-headedness; an often sharp or stabbing chest pain or pressure, which is very common, may spread to neck and shoulders; signs of infection, such as fever, muscle aches, sore throat, headache, or diarrhea; swollen joints, legs, or neck veins etc. If you have symptoms like these, your doctor will do a physical examination to check for an abnormal or rapid heartbeat, fluid in your lungs, or leg swelling.

To confirm a diagnosis of myocarditis and spot underlying causes, your doctor may order one or more of these tests: blood tests to check for infection, antibodies, or blood cell counts; a chest X-ray to produce an image of your heart, lungs, and other chest structures; an electrocardiogram (ECG) to produce a recording of your heart's electrical activity; a heart ultrasound (echocardiogram) to make an image of your heart and its structures and, less often, doctors order cardiac magnetic resonance imaging (MRI) scans or heart muscle biopsies to help confirm a diagnosis.

Text 4

The prognosis for long-term damage is not predictable and only becomes evident as the patient is monitored by the doctor over time. After the initial phase of myocarditis, some patients can experience complete recovery; others may develop chronic heart failure due to injured heart muscle. Infrequently, some patients develop fulminant heart failure, a fatal condition without heart transplantation. Patients who have had myocarditis are at some risk for sudden unexpected, potentially fatal, heart rhythm abnormalities. These can often be prevented with implantable defibrillators if the heart muscle damage is severe.

Summary Myocarditis

Myocarditis is 1..... in some cases. Death occurs if the condition gets worse and when it becomes 2..... to treatment. In some cases, sudden death in a previously healthy person can also be due to an acute myocarditis that develops rapidly.

Myocarditis is 3..... of heart muscle. It can be caused by a variety of infections and conditions such as viruses, sarcoidosis, and 4..... diseases and others. The most common cause of myocarditis is infection of the heart muscle by a 5..... The virus invades the heart muscle to cause local inflammation. After the initial infection subsides, the body's immune system continues to inflict 6..... to the heart muscle.

In serious cases, the signs and symptoms of myocarditis 7.....depending on the cause of the disease. Common myocarditis symptoms include: 8.....pain, a rapid or abnormal 9..... (arrhythmia); shortness of breath, at rest or during physical activity; fluid retention with swelling of your legs, ankles and feet etc. Other signs and symptoms that you have with a viral infection include 10....., body aches, 11..... pain, fever, a 12.....throat or diarrhea. In most cases of viral myocarditis, the illness goes away on its own and there are no complications. Symptoms may last only a few days or 13..... However, some types of 14.....infections are more 15..... and can cause more severe or persistent 16..... and complications.

Myocarditis is diagnosed by detecting signs of 17.....of heart muscle. Blood tests for heart muscle enzymes can be elevated. A 18..... to produce an image of your heart, lungs, and other 19.....structures is one of the most common ways of detection. Electrical testing can suggest irritation of 20..... and demonstrate irregular beating of the heart (less often, doctors order cardiac magnetic resonance imaging (MRI) scans or heart 21..... to help confirm a diagnosis).

Reading Test - Part B

Time allowed: 60 minutes

There are two reading passages in this test. After each passage, you will find a number of questions or unfinished statements about the passage, each with four suggested answers or ways of finishing.

You must choose the one which you think fits the best, i.e. the best answer. For each question, 1-20, indicate on your answer sheet the letter A, B, C or D against the number of the question.

Answer all questions. Marks will not be deducted for incorrect answers.

READING PASSAGE A**A note on Eye Infections – Conjunctivitis****Paragraph 1**

Conjunctivitis is a common and often very contagious condition more commonly referred to as pink eye. Conjunctivitis often involves inflammation and swelling of the conjunctiva or the clear membrane covering the eye and lining the inner eyelids. It is very common among young children, particularly those in school or daycare. Elderly people can also be affected. Conjunctivitis typically poses no real threat to the patient's vision or wellness.

Paragraph 2

There are multiple causes and risk factors for conjunctivitis. Some of the more common causes of conjunctivitis include:

- Allergic reactions
- Viral contamination
- Bacterial contamination
- Exposure to irritants or chemical pollutants

Infectious conjunctivitis typically results from bacterial or viral contamination. While bacterial conjunctivitis may be treated with certain antibiotics, there is no traditional treatment for viral conjunctivitis. Multiple strains of bacteria are responsible for bacterial conjunctivitis; these include haemophilus influenzae and staphylococcus aureus. Viral conjunctivitis is a common condition affecting children from the time of birth through to their adult years. Viruses can enter the eye in many ways, resulting from the common cold or contagion with the flu. Some patients may develop a more serious form of viral conjunctivitis associated with a herpes infection; in this case, prompt medical attention is necessary to prevent permanent damage to the eye or vision.

Paragraph 3

One of the more commonly reported signs and symptoms of conjunctivitis include discomfort and pain in the eye, accompanied by redness or swelling of the eyelid, hence the name "pinkeye." Patients may experience reddening of the inner and

outer eyelid or may experience swollen eyelids. Some patients may report increased sensitivity to light and other irritants including the wind. Many patients with conjunctivitis will have discharge from the eyes that may be clear, white, green or yellow in color. Yellow or green discharge from the eye may suggest an infection and may require antibiotics or other forms of aggressive treatment. Conjunctivitis can spread from person to person or from eye to eye. Simply touching one eye then the other can spread viral conjunctivitis. Allergic conjunctivitis is a non-contagious condition. Typically, children exposed to bacterial conjunctivitis will have a two to four day window before symptoms appear.

Paragraph 4 Bacterial and Viral

Bacterial infections mostly come from staphylococci and streptococci organisms that can come from your own skin or upper respiratory tract. The indicating symptoms of bacterial infections are thick, ropy mucous discharge accompanied with red, irritated and inflamed eyes. Luckily, bacterial eye infections are easily treated with antibiotic eye drops and, in most cases, will clear up within a few short days. Viral infections are commonly caused by an endovirus and often associated with an upper respiratory infection or common cold. Eyes are red and inflamed and become watery and runny. One of the most common viral infections is epidemic keratoconjunctivitis, also known as EKC; it is highly contagious and can last up to 2 weeks or more. This viral conjunctivitis is caused by an adenovirus and does not have a specific treatment to cure the infection. The doctor may prescribe steroid eye drops and artificial tears to help decrease inflammation, but mostly the virus simply needs to run its course.

Paragraph 5

Conjunctivitis may also result from chlamydial or gonococcal infections or STD's. Usually the inner eyelid becomes infected. This condition is more commonly noted in teens and young adults who are sexually active. When left untreated, this condition may affect newborn infants born to mothers infected with an STD. Signs may include a history of pelvic pain or vaginitis as well. Patients with Gonococcal infections may feel like a foreign object is chronically present within their eye, and are more likely to experience burning and inflammation. It is possible to transfer these conditions to the eye from hand contact so it is important, to help prevent the spread of infection, that frequent hand washing is adopted by patients and family members. Treatment usually involves use of antibiotics taken topically or orally and concomitant treatment may be necessary to treat genital and eye infections.

Questions

1 According to paragraph 1, which part of the eye is affected by conjunctivitis?

- A Conjunctiva
- B White membrane
- C Eye lids
- D Only a and b

2 According to paragraph 1, conjunctivitis is common among:

- A Children
- B Teens
- C School goers
- D Daycare children

3 Paragraph 2 talks about

- A Causes
- B Risk factors
- C Prevention
- D A and B

4 According to paragraph 2, what is linked with the herpes infection?

- A Bacterial infections
- B Viral infections
- C Allergic reactions
- D Exposure to chemical pollutants

5 According to paragraph 3, what is the most common symptom of conjunctivitis?

- A Mild pain in the eye
- B Watery eyes
- C Reddening of the inner and outer eyelid
- D All of the above

6 According to paragraph 3, color of discharge from eyes may be

- A Yellow and green
- B White, yellow and green
- C Yellow or green
- D White or green

7 Paragraph 4 is focused more on

- A Types of conjunctivitis
- B Types of bacterial conjunctivitis
- C Types of viral conjunctivitis
- D Types of bacterial and viral conjunctivitis

8 According to Paragraph 4, viral infections are caused by

- A Androvirus
- B Adenovirus
- C Endovirus
- D Adenonvirus

9 According to paragraph 5, other causes of conjunctivitis include

- A STDs
- B Chlamydial
- C Viral
- D Bacterial

10 According to paragraph 5, which is more common in gonococcal infections?

- A Pain around pelvis
- B Discharge or pus
- C Inflammation of the eyes
- D Reddening of the eyes

Reading passage two: osteomyelitis is an infection of the bone.**Paragraph 1**

Osteomyelitis is an infection of the bone. Osteomyelitis can occur in infants, children, and adults. Different types of bacteria typically affect the different age groups: in children, osteomyelitis most commonly occurs at the ends of the long bones of the arms and legs, affecting the hips, knees, shoulders, and wrists, whereas in adults, it is more common in the bones of the spine (vertebrae), feet, or in the pelvis. There are several different ways to develop the bone infection of osteomyelitis. The first is for bacteria to travel through the bloodstream (bacteremia) and spread to the bone, causing an infection. This mostly occurs when

the patient has an infection elsewhere in the body, such as pneumonia or a urinary tract infection that spreads through the blood to the bone. An open wound over a bone can lead to osteomyelitis. A recent surgery or injection around a bone can also expose the bone to bacteria and lead to osteomyelitis. Patients with conditions or taking medications that weaken their immune system are at a higher risk of developing osteomyelitis. Risk factors include cancer, chronic steroid use, sickle cell disease, human immunodeficiency virus (HIV), diabetes, hemodialysis, intravenous drug users, and the elderly.

Paragraph 2

Symptoms of osteomyelitis can vary greatly. In children, osteomyelitis usually occurs more quickly. They develop pain or tenderness over the affected bone, and they may have difficulty or inability to use the affected limb or to bear weight or walk due to severe pain. They may also have fever, chills, and redness at the site of infection. In adults, the symptoms often develop more gradually and include fever, chills, irritability, swelling or redness over the affected bone, stiffness, and nausea. In people with diabetes, peripheral neuropathy, or peripheral vascular disease, there may be no pain or fever. The only symptom may be an area of skin breakdown that is worsening or not healing. Acute osteomyelitis occurs with a rapid onset and is usually accompanied by the symptoms of pain, fever, and stiffness. It generally occurs after a break in the skin from injury, trauma, surgery, or skin ulceration from wounds. Chronic osteomyelitis is insidious in onset; it may be the result of a previous infection of osteomyelitis and, despite multiple courses of antibiotics, it may reoccur. Symptoms of chronic osteomyelitis are subtle but may include fever, pain, redness, or discharge at the site of infection.

Paragraph 3

The diagnosis of osteomyelitis begins with a complete medical history and physical examination. During the discussion about medical history, the doctor may ask questions about recent infections elsewhere in the body, past medical history, medication usage, and family medical history. The physical examination will look for areas of tenderness, redness, swelling, decreased or painful range of motion, and open sores. The doctor may then order tests to help diagnose osteomyelitis. Several blood tests can be used to help determine if there is an infection present; these include a complete blood count (CBC), the erythrocyte sedimentation rate (ESR), C-reactive protein (CRP), and blood cultures. None of these is specific for osteomyelitis but they can suggest that there may be some infection in the body. Imaging studies of the involved bones may be obtained; these can include plain radiographs (X-rays), bone scans, computed tomography (CT) scans,

magnetic resonance imaging (MRIs), and ultrasounds. These imaging studies can help identify changes in the bones that occur with osteomyelitis.

Paragraph 4

In many cases, osteomyelitis can be effectively treated with antibiotics and pain medications. If a biopsy is obtained, this can help guide the choice of the best antibiotic. The duration of treatment of osteomyelitis with antibiotics is usually four to eight weeks but varies depending on the type of infection and the response to the treatments. In some cases, the affected area will be immobilized with a brace to reduce the pain and speed up the treatment. Sometimes, surgery may be necessary. If there is an area of localized bacteria (abscess), this may need to be opened, washed out, and drained. If there is damaged soft tissue or bone, this may need to be removed. If bone needs to be removed, it may need to be replaced with bone graft or stabilized during surgery.

Paragraph 5

With early diagnosis and appropriate treatment, the prognosis for osteomyelitis is good. Antibiotics regimens are used for four to eight weeks and sometimes longer in the treatment of osteomyelitis depending on the bacteria that caused it and the response of the patient. Usually, patients can make a full recovery without longstanding complications.

However, if there is a long delay in diagnosis or treatment, there can be severe damage to the bone or surrounding soft tissues that can lead to permanent deficits or make the patient more prone to reoccurrence. If surgery or bone grafting is needed, this will prolong the time it takes to recover.

Questions

1 Which of the following statements is not true, according to the information provided in paragraph 1?

- A Osteomyelitis is common among people of all ages
- B Osteomyelitis can be caused by bacteria
- C In most of the cases, people who have pneumonia may develop osteomyelitis
- D Osteomyelitis is commonly observed in people who are prone to bacterial infections

2 According to paragraph 1, which of the following can lead to osteomyelitis?

- A Bacterial infection
- B An open wound
- C Under rated bone operation
- D None

3 According to paragraph 2, symptoms of osteomyelitis in children may include

- A Tenderness in the bone
- B High fever
- C Inability to walk
- D All of the above

4 According to paragraph 2, which type of osteomyelitis is slow in the beginning?

- A Chronic
- B Acute
- C Both chronic and acute
- D None

5 According to paragraph 3, which group is more specific for diagnosis?

- A CBC and ESR only
- B Only ESR and CRP
- C CRP, ESR and CBC
- D None

6 According to paragraph 3, involved bone suggests

- A Wounded bone
- B Operated bone area
- C Bacterial infected bone
- D Bone with tenderness

7 According to paragraph 4, which one of the following statements is not correct?

- A Treatment may be completed within 4 to 8 weeks

- B The duration of the treatment varies depending on the type of osteomyelitis
- C Working of the affected area is stopped in order to speed up the treatment
- D Bone is often replaced with bone graft for perfect treatment

8 Paragraph 4 emphasizes which of these the most?

- A Removal of the localized bacteria
- B How to treat osteomyelitis in a short duration of time
- C Bone replacement for effective results
- D Necessity of surgery for effective treatment

9 What does paragraph 5 suggest?

- A Use of the antibodies in treatment of osteomyelitis varies depending on what type of osteomyelitis it is
- B Osteomyelitis is effective in all cases
- C Four to eight weeks is the typical time for length of treatment
- D None

10 According to paragraph 5, delay in treatment of diagnosis may result in

- A Inability to walk properly
- B Permanent damage to bone
- C Removal of affected bone
- D None

END OF READING TEST