

More Information

Test 1 Training Reading Part A

Task information

- Part A tests your ability to skim, scan and record information quickly and accurately.
- You read four short texts (A–D) typically encountered in the medical workplace on the same topic, usually a medical condition or procedure.
- Each text addresses a different aspect of the topic, and at least one text will be graphical, for example, a table, graph, or flow chart.
- The texts can contain a variety of information, such as dosages, how to administer medication, what advice to give patients, symptoms and risk factors.
- There are three sets of questions. The first set is a multiple matching task where you have to identify in which text certain pieces of information are located.
- The other two sets of questions (short answer questions and sentence completion) ask you to find specific information within the texts.
- For these sets of questions, each answer / piece of missing information is a precise word or short phrase in one of the texts.
- You have 15 minutes to answer 20 questions.

Skimming: identifying types of information in the four texts

Before you read the first set of questions, skim-read the texts to familiarise yourself with them so that you have a 'map' in your head of what type of information each contains.

- **1** Read the following statements about skim-reading and put a tick (✓) if they are correct and cross (X) if they are incorrect.
 - 1 You use it to get an in-depth understanding of the text.
 - 2 You use it to get a general idea of the subject and purpose of a text.
 - 3 You use it to find specific words that you are looking for.
 - **4** You need to read the text slowly and carefully to ensure you understand every word.
 - **5** You focus on text features, such as format, structure, title, headings and sub-headings, graphical information, bold or highlighted information.
 - **6** For a paragraph or paragraphs of text, you move your eyes both horizontally and vertically across the text to find what you need.
- 2 Look at Text A on the subject of inflammatory bowel disease on the opposite page. Quickly skim read the text (30 seconds). Think of a title or heading to describe its overall content.

You only have
15 minutes in total for
Part A. Aim to skim all
four texts in two minutes
or less.

Tip! Some Part A texts have clear titles which explain their overall content and some do not. Text B which we will see later has its own title.

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Text A

Inflammatory bowel disease (IBD) is an umbrella term used to describe disorders that lead to chronic, relapsing intestinal inflammation. The two main types are:

Ulcerative colitis (UC): causes prolonged inflammation and sores (ulcers) in the colon and rectum **Crohn's disease (CD):** characterised by inflammation of the digestive tract lining. Often extends deep into affected tissues.

Symptoms include: diarrhoea, fever, fatigue, abdominal pain and cramping, rectal bleeding, reduced appetite, unintended weight loss

Treatment aims to relieve and prevent recurrence of symptoms and includes:

Dietary and lifestyle changes:

- · smaller and more frequent meals
- soft, bland foods & avoidance of trigger foods (fatty, fried, spicy, fibre-rich and dairy)
- stress management relaxation therapies such as meditation
- · adequate sleep & regular exercise

Medication:

- · aminosalicylates or mesalazines
- · immunosuppressants eg. steroids or azathioprine
- biologics
- antibiotics

Surgery: Approximately 25% of IBD patients will require surgery. Common reasons include poor reaction to medication or nutritional treatment, strictures in the intestine and abscesses or fistulas.

Text B

Classification of ulcerative colitis by severity

Symptoms	Severe	Mild
frequent defecation	> 6 times daily	< 4 times daily
fever	37.5 °C or higher	absent
tachycardia	90/min or more	absent
anaemia	Hb 10g/dl or less	absent
erythrocyte sedimentation rate (ESR)	30 mm/h or more	normal

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3 Now look at the topic box below. Look at Text A again and also Text B which has

medication types dosages risk factors types of treatment patient assessment administration diagnosis symptoms definitions types of condition side-effects investigations (contra)indications patient advice surgical

a title. Skim read the texts to identify which of the topics are included in each.

Tip! Some topics may be mentioned in more than one text so you need to read the question carefully to understand which aspect of the topic you are looking for.

Look at the following Part A multiple-matching questions and focus on the

Text A topics:

underlined words. Match the words to the alternative ways they could be expressed. In which text can you find information about:

- a) types or varieties
- b) dietary and/or lifestyle changes
- c) severity
- 1 how to assess the <u>seriousness</u> of an IBD?
- 2 definitions of the different kinds of IBD?
- 3 recommended <u>daily routine</u> <u>adjustments</u> for IBD patients.

Tip! The words used in the questions may be expressed differently in the four texts so think about the meaning of the questions rather than just focusing on the specific words in the questions.

5 Look again at the questions in Exercise 4. Decide in which text (A or B) you are most likely to find the answer. Then scan-read the text to confirm your ideas.

There are usually seven of these multiple matching questions at the start of Part A.

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Reading Part A

Action plan

Remember that you only have 15 minutes for Part A, after which the Paper will be collected in. There are 20 questions and three question types with each requiring a slightly different approach. It is recommended that you try to answer the questions in order, as for example, doing the matching questions exercise first will help you for the later short answer and sentence completion questions.

Matching questions

- 1 Start by skim reading the texts to get an overview of the type of content each contains. Try not to spend more than a minute on each text.
- **2** Focus on text features, such as titles, headings, and words in bold that help you understand what information each text contains.
- **3** For each question, think about what is being asked for and decide which of the four texts you think most likely contains the information, based on your skim reading.
- **4** Check the text to confirm your ideas and if you cannot, check the next most probable text.
- **5** Indicate your answer by writing the capital letter of the text in the space provided.

Short answer and sentence completion questions

- 1 Read the questions / incomplete sentences and underline key words which help you decide what you are looking for and consider in which text you might find the answer.
- 2 Think about what type of information you are being asked for (a name, quantity, medication, etc.).
- **3** Scan the text you have chosen for the answer using the key words to guide you.
- **4** Write your answer (a word or short phrase) in the space provided clearly. Remember that the word or phrase required must be in the same form as it appears in the text.
- **5** For sentence completion questions, read through the sentence with the answer in place to check spelling, grammatical fit, that you haven't repeated words from the sentence and that the information is complete.

Pneumonia: Texts

Text A

Assessment, admission and discharge

The CURB65 score is used to determine 30-day mortality risk for patients with Community Acquired Pneumonia (CAP). It may also be used to inform admission and discharge decisions in conjunction with clinical judgement. Give 1 point for each of the following:

- Confusion: Abbreviated Mental Test Score <8
- blood Urea nitrogen: >7mmol/L
- Respiratory rate: >30 breaths / minute
- Blood pressure: systolic < 90 mmHg /diastolic< 60 mmHg
- age: >65

Admission guide:

- >1: low risk \rightarrow home care
- >2: moderate risk \rightarrow admission
- >3 to 5: high risk \rightarrow urgent admission / ICU care

Do not discharge patients with a score of 3 or above.

Before discharging, consider the following additional risk factors:

- temperature > 37.5°C
- heart rate >100 BPM
- oxygen saturation < 90% on room air
- inability to eat without assistance.
- End of life patients agree approach for managing pneumonia in context of overall care plan.
- If a patient has a dementia diagnosis, the mental assessment must be adapted accordingly.

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Text B

Information to give patients - community acquired pneumonia

Awareness of what to expect when recovering can help to reduce patients' anxiety and highlight the need to consult their healthcare professional if they feel that their condition is deteriorating or not improving as expected. Explain to patients that after starting treatment their symptoms should steadily improve, although the rate of improvement will vary with the severity of the pneumonia. It is expected that after:

1 week: fever resolved

4 weeks: chest pain and sputum production substantially reduced

6 weeks: cough and breathlessness substantially reduced

3 months: most symptoms resolved but fatigue may still be present

6 months: most people will feel back to normal

Provide patients with additional, specific advice regarding:

- possible adverse reactions to antibiotics.
- seeking medical help if symptoms worsen rapidly or significantly, if symptoms do not start to improve within three days, or if the person becomes systemically very unwell.

Text C

Thoracentesis procedure

A thoracentesis involves the removal of fluid from the pleural space. It involves the following steps.

- 1 Ask the patient to sit, leaning forwards, with their arms resting on a table.
- 2 Use auscultation and chest percussion to estimate the fluid height.
- 3 Select and mark the insertion point, one intercostal space below the top of the effusion. Insertion below the ninth rib should be avoided due to the risk of intra-abdominal injury. Prepare the insertion area and apply a sterile drape.
- 4 Use a 25-gauge needle to anaesthetise the skin over the insertion point.
- 5 Switch to a 22-gauge needle and advance this over the superior edge of the rib. In order to avoid intercostal vessel injury, the needle must not touch the inferior surface. Intermittently aspirate and inject.
- 6 Once pleural fluid is aspirated, withdraw slightly then inject additional anaesthetic to the highly sensitive parietal pleura. Note the penetration depth.
- 7 Attach an 18-gauge over-the-needle catheter to the syringe and advance over the superior aspect of the rib, pulling back while advancing. When fluid is aspirated, stop advancing, guide the catheter over the needle and remove the needle. Cover the open catheter hub to prevent air entering the pleural cavity.
- 8 Attach a syringe with a 3-way stopcock to the catheter hub. Aspirate the fluid required for diagnostic analysis (generally 50ml). If a larger amount is to be withdrawn for therapeutic reasons, attach a collection bag to the stopcock. Aspiration should be limited to 1500ml in order to avoid the risk of pleural edema or hypotension.
- 9 When aspiration is complete, ask the patient to hum whilst the catheter is removed. This lowers the chances of pneumothorax occurring. Cover the site with an occlusive dressing.

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Text D

Complication	Comment	Treatment	
Bacteremia: Presence / multiplication of bacteria in the bloodstream	Untreated & clinically significant bacteremia progresses to SIRS, sepsis, septic shock and MODS.	Antibiotics (typically IV infusion)	
Acute Respiratory Distress Syndrome (ARDS) Build up of fluid in alveoli	More common in patients with severe pneumonia or chronic underlying lung diseases.	May require ventilation.	
Pleural effusion: Accumulation of fluid in pleura.		Antibiotics, drainage (thoracentesis,	
Empyema: Infection of the fluid		thoracostomy), pleurectomy.	
Pleurisy: Inflammation of pleura		NSAIDs	
Lung abscess: Formation of pus in a lung cavity.	Most frequently arises as a complication of aspiration pneumonia, caused by periodontal disease and poor oral hygiene.	Antibiotics. Surgical / percutaneous intervention required for abscesses > 6 cm. Lobectomy / pneumonectomy considered for patients who do not respond.	

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Part A

TIME: 15 minutes

- Look at the four texts, **A–D**, in the separate **Text Booklet** that follows the guestions.
- For each question, **1–20**, look through the texts, **A–D**, to find the relevant information.
- Write your answers on the spaces provided in this Question Paper.
- Answer all the guestions within the 15-minute time limit.
- Your answers should only be taken from texts A-D and must be correctly spelt.

Pneumonia: Questions

Questions 1-7

For each question, **1–7**, decide which text (**A**, **B**, **C** or **D**) the information comes from. You may use any letter more than once.

In which text can you find information about

1	the typical recovery timeline for pneumonia?	
2	the definitions of medical terms related to pneumonia?	
3	the equipment required to carry out a specific procedure.	
4	patient guidance regarding medication side effects?	
5	how to decide whether a patient should be hospitalised?	
6	the underlying cause of some conditions associated with pneumonia?	
7	the type of patient for whom the standard evaluation will	

need adapting?

Questions 8-14

Answer each of the questions, **8–14**, with a word or short phrase from one of the texts. Each answer may include words, numbers or both.

- Removing too much fluid during thoracentesis increases the risk of low blood pressure or ______.
- 9 Most patients can expect to make a full recovery from pneumonia within _____ months.
- In order to reduce the risk of a pneumothorax, the patient should _____ during withdrawal of the catheter.

Advice |

- **1** Look for information related to periods of time.
- **2** What punctuation sometimes introduces definitions?
- **3** The key word here is 'equipment'.
- **4** Which text's title tells you it refers to things to tell the patient?
- **5** Which text explains how to handle pneumonia patients?
- **6** Look for names of various conditions.
- **7** Which text explains how to handle pneumonia patients?

Advice Δ

- **8** Look in the text about thoracentesis.
- **9** You are looking for a number.
- **10** What kind of word is missing noun, adjective, or verb?

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11	during thoracentesis reduces the chance of injury to the abdomen.	
12	A patient may still feel tired months after having pneumonia.	
13	Patients who cannot independently may be required to remain in hospital.	
14	Patients whose blood oxygen levels are lower than may be at greater risk of dying.	
Question	ns 15–20	
	ch of the sentences, 15–20 , with a word or short phrase from one of the texts. ver may include words, numbers or both.	
15	How many mls of fluid should be removed from the lung for investigation of the patient's condition?	
16	When performing a thoracentesis, which part of the rib should be avoided whilst inserting the needle?	
17	Which treatment may be necessary for patients with ARDS?	
18	What should be used to protect the insertion site following a thoracentesis?	
19	What is the risk level of a patient with a CURB65 score of 2?	
20	How is medication for bacteremia usually administered?	

Advice \Box

- **11** You need two words here
- **12** You are looking for a number.
- **13** What kind of word follows 'cannot'?
- **14** Look in a text that is about examining the patient.

Advice

- **15** Look in the text that gives procedures.
- **16** In the correct text, it tells you what the needle mustn't touch.
- **17** The key words here are 'ARDS' and 'treatment'.
- **18** This is likely to come at the end of a text.
- **19** Think about what CURB65 is used to determine.
- **20** Which text mentions bacteremia and its treatment?

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Test 1 Training Reading Part B

Task information

- Part B tests your ability to identify the main idea, gist, purpose and to locate a specific detail within a text.
- There are six unrelated texts of 100–140 words with a three-option multiple choice question on each text.
- The question stems are either direct questions answered by one of the answer options or sentences that are completed by one of the answer options.
- The texts cover a variety of healthcare workplace text types, such as memos and emails to staff, guidelines for treatments or dealing with patients, manuals, and policy documents.
- No specialist knowledge is required to understand the texts as they are designed to be accessible to all medical professionals.
- You have 45 minutes to complete both Part B (6 questions) and Part C (16 questions).

Question focus

- 1 There are four main types of reading skills tested in the questions in Part B. Match the reading skills (1–4) being tested to the correct explanation (a–d) of what the reader is looking for in a text.
 - 1 gist a) one specific piece of information given in the text
 - 2 main idea b) the overall topic or message of the text
 - detailthe reason the text was written (its intention)purposethe most important point the writer is making

Main idea and detail questions

The main idea is the key message in the text and is given more emphasis, whereas a detail is one aspect of the text, often, but not necessarily related to the main idea.

1 Look at the sample Part B text (memo) and two possible Part B question stems below (without answer options) that you could be asked about it. Decide which question is asking for the main idea (M) of the text and which a specific detail (D) in the text.

To:

Subject: All staff

Patient involvement in treatment decisions

This is a reminder that staff should facilitate the involvement of patients in treatment decisions wherever possible. This supports adherence to treatment without necessarily increasing the overall length of a consultation. Some patients may find the consultation process intimidating, so the style, speed and tone of speech should be adapted to the needs of individual patients. Any factors which could affect the patient's interpretation of explanations, such as learning disabilities or language barriers, must be considered. Avoid making assumptions about the patient's understanding and be aware of any unspoken gestures, expressions or body language which indicate that the patient wishes to make a point or does not understand what has been said. Remember that fully informed patients who have the capacity to make such decisions have the right to decide whether or not to take medication.

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- 1 According to the memo about patient involvement in treatment decisions, it is very important for staff to
- 2 According to the memo about patient involvement in treatment decisions, one way that patients may indicate a lack of understanding is
- 2 Now look at question 1 again. Read the text. Think about the main message the writer is trying to communicate about patient involvement in treatment decisions. Write down in your own words what you think the writer's main point is.
- 3 Now look at the question with answer options. Which option best matches your ideas in Exercise 2 and summarises the overall message?

According to the memo about patient involvement in treatment decisions, it is very important for staff to

A make a range of adjustments to how they communicate.

B accept that poor outcomes are sometimes inevitable.

C establish whether extra support would be helpful.

4 Now look at question 2. This question stem is asking you to locate a detail in the text, specifically how patients may indicate a lack of understanding. Read the memo again. Locate and underline the section in which it mentions patient's understanding.

According to the memo about patient involvement in treatment decisions, one way that patients may indicate a lack of understanding is by ...

5 Read the underlined section closely. Which way that patients may indicate their lack of understanding is mentioned? Then look at the answer options. Decide which option matches this.

A asking for advice to be repeated

B using non-verbal communication

C disregarding important information

Tip! The main idea may be stated directly or be a summary of what the writer is trying to communicate. In this text, you're looking for a summary of the message to staff.

Tip! Think about the meaning of each option rather than focusing on individual words.

Tip! All of the answer options in Part B questions are logically possible, so do not guess based on your own real life experience. Find the answer in the text.

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