

OET 2.0 PRACTICE
TESTS
MEDICINE - SPEAKING



Practice Test 1.

OET Speaking Role-play

EXAMINER CARD NO. 1 | MEDICINE

SETTING	Suburban General Practice
PATIENT	You are 45 and recovering from a mild heart attack two weeks ago. You were discharged from hospital four days ago. You are unsure how much physical activity is appropriate and are seriously worried that the heart attack has left you dramatically weakened. You fear that any physical activity such as walking, gardening or swimming might bring on another heart attack. The doctors have told you that another episode may be more severe than the first.
TASK	<ul style="list-style-type: none">• Explain your tiredness to the doctor and express your concern about your future.• Ask how much physical activity is advisable. Admit your fear that any physical activity may provoke a relapse.• Ask when you can return to work (you are an office worker sitting at a desk all your day) and whether the condition will make you an invalid for the rest of your life.• What can you do to reduce the risk of further attacks?

OET Speaking Role-play

CANDIDATE CARD NO. 1 | MEDICINE

SETTING	Suburban General Practice
PATIENT	This 45-year-old patient is attending the practice after suffering a mild anterior acute myocardial infarct two weeks ago. Recovery was uncomplicated, and the patient was discharged from hospital four days ago. He/she is now very concerned about the long-term progress of recovery.
TASK	<ul style="list-style-type: none">• Find out what is worrying the patient and be reassuring. Some fatigue is to be expected; it usually takes some weeks before full energy levels return.• Advise the patient of the importance of joining the cardiac rehabilitation program at a nearby hospital to increase exercise tolerance upon supervision.• Explain the importance of exercise (e.g., to lower cholesterol, lose weight, strengthen heart etc.).• Reassure the patient that his/her concerns are appropriate. Moderate physical activity is all right two weeks after a mild event with good recovery, with usually four to six weeks before attempting to return to work.• Provide recommendations for prevention of a future attack (diet, relaxation, stress management).

OET Speaking Role-play

EXAMINER CARD NO. 2 | MEDICINE

SETTING Suburban Clinic

PATIENT You are the parent of 5-year-old Matthew. You present to your doctor as a follow-up from an emergency consultation two days ago when he was newly diagnosed with asthma. For the past month, he has been waking frequently at night with coughing and has trouble breathing when running around. Last week, Matthew developed a cold with low-grade fever and two nights ago he had a severe bout of coughing, breathing difficulty and wheezing. You took him to the Emergency Department where he was treated with nebulised salbutamol and then discharged.

- TASK**
- You have little understanding of asthma and ask your doctor: "What is asthma? Will Matthew always have this condition?"
 - You are frightened that Matthew might have a severe attack and you seek advice on how to manage his condition.
 - Can the doctor help in any other way?

OET Speaking Role-play

CANDIDATE CARD NO. 2 | MEDICINE

SETTING Suburban Clinic

PATIENT A parent presents with his/her 5-year-old son, Matthew, as follow-up after an emergency consultation two days ago. Matthew had experienced a severe bout of coughing, breathing difficulty and wheezing on the back of a cold with low-grade fever. The parent felt frightened so took Matthew to the hospital Emergency Department where he was treated with nebulised salbutamol. The parent has little understanding of asthma and is very anxious about how to manage.

- TASK**
- Explain asthma to the parent (narrowing of airways in lungs). Describe some of the symptoms (e.g. shortness of breath, wheezing.).
 - Explain 2-3 management points (e.g., how to identify and control trigger factors; assess severity of symptoms; respond in an urgent situation; ensure school is informed and salbutamol available there.).
 - Reassure the parent by explaining that the prognosis is good if the parent understands the triggers and knows exactly what to do in an acute situation (you will support by developing an Asthma Action Plan and arranging an early review).

Practice Test 2.

OET Speaking Role-play

EXAMINER CARD NO. 1 | MEDICINE

SETTING Suburban General Practice

PATIENT You are 45 years old, married with three teenage children. You run a successful consultancy business. Three months ago, your mother-in-law was diagnosed with Alzheimer's disease and she is now living with you. You are finding it difficult to balance your family and work commitments, and are worried about how you will manage to support your mother-in-law. Your anxiety has been causing you to have problems with sleeping at night. You have come to see the doctor to request sleeping pills.

- TASK**
- Request sleeping pills, as you are sure these will help you to feel better.
 - Be insulted when the doctor cautions you against the risks of dependency (you are not someone likely to get addicted to medications).
 - Become angry when the doctor declines your request. You are sure sleeping pills will help to cure your anxiety.
 - Reluctantly agree to attend counselling for stress management.

OET Speaking Role-play

CANDIDATE CARD NO. 1 | MEDICINE

SETTING Suburban General Practice

PATIENT Your patient is 45 years old, married with three teenage children. He/she runs a successful consultancy business. Three months ago, his/her mother-in-law was diagnosed with Alzheimer's disease and she is now living with the family. The patient is finding it difficult to balance family and work commitments, and is worried about how you will manage to support the mother-in-law. Anxiety has been causing your patient to have problems with sleeping at night. He/she has come to see the doctor to request sleeping pills.

- TASK**
- Explain to the patient that you are reluctant to prescribe sleeping pills (e.g. risk of dependency, etc.).
 - Refuse to prescribe the sleeping pills but reassure the patient that anxiety can be managed by alternative methods (e.g. self-care techniques, dietary measures, exercise, etc.).
 - Counsel the patient on the role of stress management and sleep hygiene (e.g. focus on routines and natural rhythms, making sleeping environments more restful) in relieving anxiety.
 - Try to convince the patient to accept a referral to see a counsellor/psychologist for stress management.

OET Speaking Role-play

EXAMINER CARD NO. 2 | MEDICINE

SETTING	Suburban Clinic
PATIENT	You are 32 years old and have a painful left ear. You first noticed this about three days ago and, despite using paracetamol, the pain has worsened and was particularly severe last night. This morning, you noticed what appeared to be pus on your pillow, which you presume has come from the painful left ear. Surprisingly, the pain has lessened somewhat, but your hearing seems to have deteriorated and you are worried about it.
TASK	<ul style="list-style-type: none">• Find out what has happened to you and what needs to be done about it.• Express alarm at the diagnosis and explain your fear of deafness. You are also very concerned at the amount of pus that came from the ear (isn't a hole in the eardrum a serious matter?).• When your doctor advises against activities involving pressure change, be very concerned. Your favourite hobby is scuba diving, and you are aware that ear problems can affect fitness to dive. Will it affect your scuba diving?• Be hard to reassure, but eventually accept the doctor's advice.

OET Speaking Role-play

CANDIDATE CARD NO. 2 | MEDICINE

SETTING	Suburban Clinic
PATIENT	This 32 year old patient presents with a three day history of a painful left ear. On examination, there is severe otitis media (inflammation in middle ear) present in the left ear, with a recent small central perforation of the left eardrum and pus visible from external auditory canal.
TASK	<ul style="list-style-type: none">• Explain the diagnosis to the patient.• Explain the mechanism: infection build-up of pus behind eardrum; eventual perforation reduction in pain (pus previously under pressure – released to flow freely to the outside).• Reassure that patient (e.g. not an unusual occurrence with this condition; small perforation will heal readily; no permanent effect on hearing).• Outline treatment: broad spectrum antibiotic; review at the end of the course, when perforation can also be reassured; audiological testing if hearing deficits continue.• Advise against any activities the involve pressure change (e.g. aircraft flight, diving, etc.) until condition has completely resolved.

Practice Test 3.

OET Speaking Role-play

EXAMINER CARD NO. 1 | MEDICINE

SETTING Suburban General Practice

PATIENT You are the parent of a 10-month-old boy. You think your child is suffering from gastroenteritis. You're becoming very worried about the child. He has had diarrhoea for the last 24 hours (8-10 times in that period) and has also vomited twice. He is urinating regularly but is crying more than usual, has a fever and is coughing. He has apparent soreness in the nappy area.

- TASK**
- Answer the doctor's questions about the baby's condition.
 - You are worried that the child is becoming dehydrated. As the doctor about this, and whether medication is appropriate.
 - You're quite panicky, and not really listening to what the doctor is saying. Get the doctor to make things clearer for you (i.e., repeat, paraphrase, etc.).
 - Also ask about what to feed the child, both now and later, when the diarrhoea has subsided. You are currently breastfeeding.

OET Speaking Role-play

CANDIDATE CARD NO. 1 | MEDICINE

SETTING Suburban General Practice

PATIENT The parent of a 10-month-old boy has come to see you. The child is suffering from gastroenteritis. The parent appears anxious. The child shows no evidence of dehydration. He is passing urine regularly, and is happily playing on the floor of your office.

- TASK**
- Ask for more details about the child's symptoms.
 - Confirm the diagnosis of gastroenteritis and give a brief explanation (i.e., bowel infection, symptoms consistent with parent's description).
 - Give advice and reassurance to the parent.
 - Explain the inappropriateness of any medication other than Gastrolyte (or equivalent), a saline glucose solution.
 - Advise the parent on suitable food intake (e.g. continue breastfeeding more frequently, child may refuse food initially, etc.).

OET Speaking Role-play

EXAMINER CARD NO. 2 | MEDICINE

SETTING	Suburban Clinic
PATIENT	You are 34 years old. Your spouse recently noticed a small dark skin lesion on the lower part of your back. You are not sure how long it has been present, nor whether it has been growing. You are not aware of any symptoms such as itching or bleeding. Your father died of malignant melanoma (a lethal skin cancer) and you are very worried that you might have the same problem.
TASK	<ul style="list-style-type: none">• Explain the reasons for your concern at finding this lesion, and your fear of the possibility of cancer due to your family history.• When the doctor diagnoses a benign condition, be hard to convince. Ask further questions:<ul style="list-style-type: none">- What will I do about this now?- Shouldn't I go into hospital straight away and have it removed completely?- What will the consequences be if my fears are correct?- Will I get sick and die like my father?- Will I need major operations and chemotherapy?• Eventually accept the doctor's explanation.

OET Speaking Role-play

CANDIDATE CARD NO. 2 | MEDICINE

SETTING	Suburban Clinic
PATIENT	This 34 year old patient is attending because his/her spouse has noticed a small dark skin lesion on the patient's lower back. The patient is concerned that this represents a skin cancer, and requests your opinion on management. You diagnose a benign, simple pigmented nevus that has probably been present for many years.
TASK	<ul style="list-style-type: none">• Explain the diagnosis (most likely birthmark, mole, etc.) and reassure.• Explain the treatment: excising the lesion under local anaesthetic (an excisional biopsy) and using histopathological examination (examination under microscope) to determine the nature of the lesion (a simple process: can be done in your rooms with minimal risk; results available in a few days).• Explain the procedure if the lesion is malignant: urgent referral to a surgeon for a wider excision of the lesion and probably adjuvant therapy (chemo- or radiotherapy). Based on the clinical appearance of the lesion, there is no need for urgent admission for a large procedure.

Practice Test 3.

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