

FINAL ENGLISH EXAM FOR DOCTORAL STUDIES (C1)

LISTENING

Fill in the gaps, or choose the best answer a, b or c.

1. If asked about NHS (National Health Service), most people in England
 - a. would give opposing views.
 - b. would have similar opinions about it.
 - c. wouldn't like to comment on it.

2. (...) but it is a service seemingly hamstrung by a multitude of problems, each one posing a to the future.

3. These are several cornerstones of the system—subsidized medicine, hospital and , and the fact that everything is ostensibly free.

4. The way GPs treat patients
 - a. is disgraceful.
 - b. hasn't changed a lot.
 - c. has changed a great deal.

5. In the past, some people avoided doctors because
 - a. they were ridiculed by them.
 - b. they were afraid of what the doctor might say.
 - c. the prices of medicines were too high.

6. According to the author, we have become a bit of
 - a. hypochondriacs.
 - b. hypertensives.
 - c. homophobes.

7. Improvements to the system have been many, and the of them have been successful.

8. What does "growth in the amount of information" refer to?
 - a. People having become more informed about health, diseases and their rights.
 - b. A considerable increase in the number of doctors.
 - c. Patients and doctors sharing their experiences.

9. Whereas we were once satisfied and grateful to or advice from a doctor after a reasonable wait (...)

10. (...) and they will point out to the need for paradigmatic changes to the system to root out the twin cancers of inefficiency and unreal that have spread through it.

READING

Read the text below and answer the questions in Task 1 and 2.

Who has not wished at some time or other, for a photographic memory? It is bad enough that we forget so much that we have worked diligently to learn at school. How can we formulate a realistic assessment of ourselves if our recollection of the past is both inaccurate and incomplete?

Yet a perfect memory is not the blessing that one may suppose. Russian psychologist Alexander Luria once told of a journalist, who could remember giant grids of numbers and long lists of words after seeing them for only a few seconds. This man could reproduce these grids both forward and backward, even after the passage of 15 years. He also remembered the circumstances under which he had originally learned the material.

The journalist used memory “tricks” to accomplish his astonishing feats, many involving the formation of visual images. But you shouldn’t envy him, for he had a serious problem: he could not forget. Images he had formed in order to remember kept creeping into consciousness, distracting him and interfering with his ability to concentrate. At times he even had trouble holding a simple conversation because the other person’s words would set off a jumble of associations. Eventually, unable to work at his profession, he took to supporting himself by travelling from place to place as a performer, demonstrating his abilities for audiences. Perhaps you are not convinced that a perfect memory would be less than a blessing. Imagine for a moment, what it would be like to remember everything. Each time you recalled the past, you would dredge up not only the diamonds of experience but the pebbles as well. Remembering might take hours instead of moments. The clutter in your mind might grow beyond your ability to organize it efficiently.

With a perfect memory, you might also remember things better off forgotten. Think back – would you really like to recall every angry argument, every embarrassing episode, every painful moment? How would total recall affect your relationships with relatives and friends? Could it be that the success of a close relationship depends on a certain amount of forgiving forgetfulness? Could it be that self-confidence and optimism are only possible if we lock some grievances in a back drawer of memory?

Like remembering, a certain degree of forgetting contributes to our survival and our sanity. Where is the line between adaptive forgetting and disruptive forgetting? If you had a choice, what would you choose to recollect with greater clarity, and what would you allow to fade? Think about it.

Task 1. Choose the best answer A, B, C or D for questions 1-5.

1. Russian psychologist Alexander Luria
 - a. had a perfect memory.
 - b. described a man with a perfect memory.
 - c. experimented with a man with a perfect memory.
 - d. taught somebody some memory strategies.

2. The journalist described in the text
 - a. was trained to remember numbers.
 - b. was not able to function normally.
 - c. became very famous in his profession.
 - d. learnt his skills while travelling.

3. The text says that if people could remember everything
 - a. they would talk for hours on end.
 - b. their brains would grow.
 - c. they would become rich but unhappy.
 - d. they would not be able to cope with it.
4. What effect would a total recall probably have on people?
 - a. more self-confidence and optimism
 - b. better relationships with other people
 - c. everlasting arguments with other people
 - d. more pain in life
5. People need to
 - a. forget from time to time.
 - b. write down the things they want to remember.
 - c. learn about scientific findings.
 - d. be more thoughtful.

Task 2. In the text find the words meaning:

1. showing care and effort in one's work or duties (Paragraph 1)
2. to achieve, realize, attain (Paragraph 3)
3. mental connections between things (Paragraph 3)
4. finally, in the end (Paragraph 3)
5. to have an effect on, to influence (Paragraph 4)

VOCABULARY and GRAMMAR

Task 1. For each sentence choose a word that best completes it.

1. Pneumonia consistently for the overwhelming majority of the combined pneumonia and influenza deaths.

a. answers	b. accounts	c. establishes
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2. In 2015, 23.4 million people had diagnosed diabetes, only 1.6 million in 1958.

a. compared with	b. comparatively	c. in comparing
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3. The speaker for this conference is Professor Brown from the University of Berkeley.

a. keynote	b. pivotal	c. apparent
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4. A correlational study is a scientific study in which a researcher investigates associations between

a. variables	b. interferences	c. disruptors
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5. The analysis of these trends was beyond the of this trial.

a. research	b. scope	c. approach
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6. Comparing the maps of the numbers of malaria deaths distinct geographic patterns.
 a. provides b. reveals c. assumes
7. The study employed methodology the requirements and conditions of an Intensive Care Unit.
 a. appropriate to b. relative to c. significant for
8. On 27 March professors Marc Llaquet from the Department of Endodontics and Ernest Lucas a talk about dental auto-transplantation.
 a. gave b. made c. said
9. Professor Gray didn't agree with Professor Smith and the latter's theories in his article.
 a. supported b. challenged c. dissipated
10. Scientists have finally made a major in the treatment of cancer.
 a. contrivance b. breakthrough c. achieve

Task 2. Complete the sentences. Use the words in bold if provided. Do not change the words in bold.

1. It's ages since we saw each other.
 We
2. People say that jogging is very healthy. (SAID)

3. It is a pity you didn't tell us about the situation. (WISH)

4. I don't know the answer because I haven't read the book.
 If.....
5. Robert didn't steal the money. He didn't even know where the key to the safe was. (CAN'T)

6. Please don't spend all your pocket money on sweets.
 I'd
7. He didn't realize until that moment how much he loved her.
 Only then
8. They know that she has been away for a long time.
 She's known.....
9. I'm very pleased that we shall meet again soon. (LOOK)

10. It was really unnecessary to bring all these books for the examination. (NEED)
 You

Task 3. Complete the text below with the words given. Use one word in each gap. There are five words you do not need to use.

assigned	conducted	designed	enrolled	evidence
extrapolated	outcome	particular	adjusted	uptake

A Randomized Trial of Prophylactic Antibiotics for Miscarriage Surgery

Methods

We (1) a double-blind, placebo-controlled, randomized trial investigating whether antibiotic prophylaxis before surgery to complete a spontaneous abortion would reduce pelvic infection. We randomly (2) patients to a single preoperative dose of 400 mg of oral doxycycline and 400 mg of oral metronidazole or identical placebos. The primary (3) was pelvic infection within 14 days after surgery. Pelvic infection was defined by the presence of two or more of four clinical features (purulent vaginal discharge, pyrexia, uterine tenderness, and leucocytosis).

Results

We (4) 3412 patients in Malawi, Pakistan, Tanzania, and Uganda. A total of 1705 patients received antibiotics and 1707 received placebo. There were no significant between-group differences in adverse events (5) for age and length of hospitalisation.

WRITING

Write a formal e-mail in English. The prompts are given below.

Jesteś studentem studiów doktoranckich Wydziału Lekarskiego/Farmaceutycznego/Nauk O Zdrowiu Uniwersytetu Jagiellońskiego – przedstaw się.

1. Piszesz do uczestników konferencji, która odbędzie się na naszym uniwersytecie w dniach od 20 września do 26 września 2019 roku. Podajesz temat konferencji: Model Funkcjonowania Studiów Doktoranckich.
2. Poinformuj o tym, że tematy sesji są właśnie przygotowywane i będą wkrótce zamieszczone na naszej stronie internetowej. Poproś o sprawdzanie aktualnych informacji.
3. Poinformuj o możliwości rejestracji (tylko online) i o terminach zgłoszeń:
 - przesłanie streszczenia – do 20 czerwca
 - zgłoszenie uczestnictwa – do 10 lipca
4. Poinformuj o opłatach dla osób rejestrujących się na konferencję:
 - pracownicy akademicy – 200 zł
 - studenci – za darmo
5. Poinformuj o możliwości zwiedzania Krakowa oraz o możliwości uczestniczenia w przyjęciu integracyjnym (cena dla uczestnika włączona w opłatę rejestracyjną, dla osoby towarzyszącej 100 zł), zachęcając uczestników do skorzystania z tej propozycji.

KEY

Listening

1. b
2. serious threat
3. operations and procedures
4. c
5. b
6. a
7. vast majority
8. a
9. receive treatment
10. patient expectations

Reading

Task 1

- 1 b
- 2 b
- 3 d
- 4 d
- 5 a

Task 2

- 1 diligently
- 2 accomplish
- 3 associations
- 4 eventually
- 5 affect

Vocabulary and Grammar

Task 1

- 1 b
- 2 a
- 3 a
- 4 a
- 5 b
- 6 b
- 7 a
- 8 a
- 9 b
- 10 b

Task 2

- 1 We haven't seen each other for ages
- 2 Jogging is said to be very healthy.
- 3 I wish you had told us about the situation.
- 4 If I had read the book I would know the answer.
- 5 Robert can't have stolen the money.
- 6 I'd rather you didn't spend all your pocket money on sweets.
- 7 Only then did he realize how much he loved her.
- 8 She is known to have been/to be away for a long time.
- 9 I look forward to meeting you again soon.
- 10 You needn't have brought

Task 3

- 1 conducted
- 2 assigned
- 3 outcome
- 4 enrolled
- 5 adjusted

Listening – Transcript**The changing face of demands on the NHS**

Ask a large enough sample of people in England about their views on the National Health Service (NHS) and you will eventually see a pattern emerging in their answers. The NHS, you will find, is still viewed as the provider of one of the best health services in the world, but it is a service seemingly hamstrung by a multitude of problems, each one posing a serious threat to the future.

These are several cornerstones of the system - subsidized medicine, hospital operations and procedures and the fact that everything is ostensibly free. However, for the majority of people, the cog which drives everything else is the GP. For anyone with a long enough memory, the service offered by GPs has changed beyond recognition over the years. Gone are the days when one ageing dinosaur of a doctor sat on a studded, leather throne in his surgery dispensing wisdom, and occasionally medicine, to his patients. Gone also are the days when the number of people wanting to visit a doctor was limited by a lack of knowledge mixed in with a rather unhealthy dose of fear at what the doctor might tell them. And gone also are the days when the options if you felt a bit dicky were limited to a visit to the aforementioned ageing dinosaur or not. Nowadays, the slightest twinge or change to the body's status quo is enough to have patients reaching for the phone to make an appointment, or hopping into the car to make a visit to their GP's surgery. Once there, a choice of four or five doctors, often fresh-faced and full of new ideas, is the norm.

Improvements to the system have been many, and the vast majority of them have been successful. Why then the phenomenon of the eternally dissatisfied, whingeing patient?

Firstly, there has been a growth in knowledge about our health, coupled with an often insidious growth in the amount of information surrounding us, the combination of which is an often skewed perception of our state of health and the products required to treat it. Secondly, the rise in awareness that we need to look after our health if we are to make it beyond middle age has led us beyond just being healthy. We now have to be super-healthy, one of the results of which is that we make even greater demands on the system.

The system of targets and incentives introduced by a well-meaning Labour government under the stewardship of Tony Blair has also resulted in inflated expectations. Whereas we were once satisfied and grateful to receive treatment or advice from a doctor after a reasonable wait, we now translate waiting time limits into something which, coupled with patient charters and rights, creates as many problems as it solves. Ask many NHS staff nowadays about the solutions to these problems and their thoughts on the future direction of the service and they will point out to the need for paradigmatic changes to the system to root out the twin cancers of inefficiency and unreal patient expectations that have spread through it.