



Occupational English Test

WRITING SUB-TEST

Dietetics

Practice test

Please print in BLOCK LETTERS

Candidate number

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Family name

Other name(s)

City

Date of test

Candidate's signature

YOU MUST NOT REMOVE OET MATERIAL FROM THE TEST ROOM.

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OCCUPATIONAL ENGLISH TEST

WRITING SUB-TEST: DIETETICS

TIME ALLOWED: READING TIME: 5 MINUTES

WRITING TIME: 40 MINUTES

Read the case notes and complete the writing task which follows.

Notes:

Tim Langham was referred to you by his GP for dietary advice.

Patient: Mr Tim Langham

DOB: 1.8.1987

Presenting Complaint:

B12 deficiency 2° to pernicious anaemia
diagnosed by referring GP

History of Presenting Complaint:

Moody, irritable, withdrawn, mild depression, lethargy
Weight loss
Mother complains of his aggressive outbursts

Past Medical History:

Asthma, childhood onset
Chickenpox, 1992
Measles, 1996

Anthropometric Data:

Height: 180cm
Weight: 66kg
BMI: 20.4

Biochemical Data:

FBE

| | | |
|--------------|-----------|------------------------------|
| Hb* | 118g/L | (Ref range: 130-180g/L) |
| Serum iron | 12µmol/L | (Ref range: 10-30µmol/L) |
| Ferritin | 30g/L | (Ref range: 30-300g/L) |
| MCV | 120fL | (N: <98fL) |
| B12* | 100µmol/L | (Ref range: 120-680µmol/L) |
| RBC folate | 980nmol/L | (Ref range: 360-1,400nmol/L) |
| Serum folate | 36 nmol/L | (Ref range: 7-45nmol/L) |

Medication:

B12 (1,000µg) IM injection, 2/week
Ventolin inhaler

TURN OVER

SH: Vegetarian for 7 years, doesn't like eating eggs
University student; lives in shared house near university
Shares with 3 other students; all share cooking
No partner
Body-conscious, works out at gym 4-5 hours per day
Non-smoker; no recreational drug use
Social drinker (weekends – 2-3 drinks/night, wine or spirits)
Amino acid supplements

Dietary Information:

Breakfast: Special-K cereal with low-fat milk
Toast (white bread) with jam, honey, or peanut butter
Orange juice
Coffee

Morning tea: Wholemeal salad sandwich
Cola or sports drink

Lunch: Pasta with vegetarian sauce
Cake
Tea or coffee

Mid-afternoon: High protein cereal bar or high protein milk shake

Dinner: TV dinners/frozen dinners – soups, pasta with vegetarian sauce,
rice, potatoes
Ice-cream &/or tinned fruit/mousse

Supper: Dry biscuits with cheese or chocolate bar
Coffee

Management:

Advice given: vegetarian dietary sources of B12 – eggs, yoghurt, etc.
vegetarian sources of iron – e.g., legumes, green leafy vegetables, dried apricots, figs,
nuts combine with vitamin C-containing foods (↑ absorption)

Immediate plan: continue IM injection B12 (at GP surgery)
draw up dietary menu plan
recommend fresh food especially fruit & vegetables
R/v 2/52

Patient wishes to discontinue IM B12
Patient believes his diet is good – reluctant to change

Writing task:

Using the information in the case notes, write a letter back to the referring GP, Dr Bruce Russell, Health First Clinic, 123 High Street, Newtown.

In your answer:

- expand the relevant notes into complete sentences
- do not use note form
- use letter format

The body of the letter should be approximately 180-200 words.

OCCUPATIONAL ENGLISH TEST

WRITING SUB-TEST: DIETITIAN

SAMPLE RESPONSE: LETTER

(Today's date)

Dr Bruce Russell
Health First Clinic
123 High Street
Newtown

Dear Dr Russell

Re Tim Langham, DOB 1.8.1987

I am writing to you regarding your patient, Mr Tim Langham, who attended today for dietary advice. As you know, he presents with symptoms and test results suggestive of pernicious anaemia, which requires IM B12 treatment.

Tim is a vegetarian of seven years duration who has been suffering from weight loss, mood changes such as irritability and depression, and aggressive behaviour. Blood tests reveal B12 deficiency. His haemoglobin and B12 are low, red cells show an increased mean cell volume, and ferritin and serum iron are at the low end of normal. His BMI is still within the normal range, despite his recent weight loss.

As his diet is deficient in vitamin B12 and obviously contains inadequate iron, I have advised Tim of the need for continuing with IM injections of B12 to correct this problem, and given him advice on the vegetarian dietary sources of B12 and iron. I suggested combining his iron-containing foods with vitamin C-containing foods to enhance iron absorption. However, Tim is reluctant to make any alterations to his diet, which he believes is good.

I will review him in two weeks, and have advised him to contact you regarding the B12 injections.

Thank you for your ongoing management of this patient.

Yours sincerely

Dietitian