

## WRITING: QUESTION BOOKLET

CANDIDATE NAME: \_\_\_\_\_

D.O.B.: 

D	D	M	M	Y	Y	Y	Y
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PROFESSION: \_\_\_\_\_

VENUE: \_\_\_\_\_

TEST DATE: \_\_\_\_\_

Example:

2	5
0	0
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9

CANDIDATE NUMBER							
0	0	0	0	0	0	0	0
1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4
5	5	5	5	5	5	5	5
6	6	6	6	6	6	6	6
7	7	7	7	7	7	7	7
8	8	8	8	8	8	8	8
9	9	9	9	9	9	9	9

## CANDIDATE DECLARATION

By signing this, you agree not to disclose or use in any way (other than to take the test) or assist any other person to disclose or use any OET test or sub-test content. If you cheat or assist in any cheating, use any unfair practice, break any of the rules or regulations, or ignore any advice or information, you may be disqualified and your results may not be issued at the sole discretion of CBLA. CBLA also reserves its right to take further disciplinary action against you and to pursue any other remedies permitted by law. If a candidate is suspected of and investigated for malpractice, their personal details and details of the investigation may be passed to a third party where required.

## CANDIDATE SIGNATURE: \_\_\_\_\_

## INSTRUCTIONS TO CANDIDATES

You must write your answer for the Writing sub-test in the **Writing Answer Booklet**.

You must **NOT** remove OET material from the test room.

## Occupational English Test

**WRITING SUB-TEST: DENTISTRY**

**TIME ALLOWED: READING TIME: 5 MINUTES**

**WRITING TIME: 40 MINUTES**

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

### Notes:

**Assume that today's date is 30 August 2019.**

Mrs Georgas is a regular patient at your clinic.

#### PATIENT DETAILS:

**Name:** Mrs Helen Georgas

**DOB:** 23 Mar 1931 (Age 88)

**Address:** Stillwater Retirement Village  
35/222 Main Road  
Stillwater

**Social background:** Retired school teacher

**Allergies:** Nil

**Medical history:** High blood pressure  
Glaucoma  
Parkinson's disease

**Dental chart:** Full maxillary denture  
Removable acrylic partial denture to replace 35, 36, 37, 44, 45  
Buccal glass ionomer cement (GIC) restorations 46 (root), 47  
Full gold crown (FGC) 46

**Dental history:** 2014 Removal of remaining upper teeth, fittin for full upper denture  
2015 Buccal GIC restoration 46

#### Last dental visit

**14 Feb 2019** Denture stomatitis (upper) noted  
Advised Pt: must remove denture at night

## Treatment record

30 Aug 2019

**Presenting complaint:**

Denture uncomfortable, itchiness on roof of mouth

**Examination:** OE: Pt has full upper denture and partial lower acrylic denture

Caries: 33LA, 31M, 41M

Periodontal Screening & Recording (PSR): xxx

222

Palate appears erythematous – noted last visit (? denture stomatitis). No improvement

Pt requires assistance to remove dentures. Says staff at retirement village don't help her with this

Does not remove dentures at night

**Treatment:** Scale and clean

Restorations 33/41/31 with GIC

**Plan:** Letter to Nurse-In-Charge re denture stomatitis & staff support of denture care (remove nightly, ensure clean, leave in clean dry container)

Review 1 wk – if no improvement, antifungals required

Possible prescription – Amphotericin B (Fungilin) lozenges (antifungal treatment) 4x/day

## **Writing Task:**

Using the information given in the case notes, write a letter to Ms Dennis, the Nurse-In-Charge at Stillwater Retirement Village where the patient lives, recommending closer supervision of her oral care. Address the letter to Ms Veronica Dennis, Stillwater Retirement Village, 222 Main Road, Stillwater.

**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.**

Any answers recorded here will not be marked.

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**Please record your answer on this page within the lines provided.**

(Only answers on Page 2 and Page 3 within the lines provided will be marked.)

**Please record your answer on this page within the lines provided.**

(Only answers on Page 2 and Page 3 within the lines provided will be marked.)

Space for notes and rough draft. Only your answers on Page 2 and Page 3 will be marked.

## Occupational English Test

### WRITING SUB-TEST: DENTISTRY SAMPLE RESPONSE: LETTER

Ms Veronica Dennis  
Stillwater Retirement Village  
222 Main Road  
Stillwater

30 August 2019

Dear Ms Dennis

Re: Mrs Helen Georgas  
DOB: 23.03.1931

I am writing in regard to Ms Georgas, a resident at Stillwater Retirement village, to request closer supervision of her oral care.

Mrs Georgas attended my clinic today for a routine dental examination. She wears a full upper denture and a partial acrylic lower denture. At the last dental visit, it was noted that she had a denture-related stomatitis associated with her upper denture. On today's examination, this condition is still present. The denture stomatitis is causing Mrs Georgas some discomfort and making her palate feel itchy.

Mrs Georgas advised me today that she does not remove her dentures for any period of time as she requires assistance to do so. It appears that the staff at the retirement village are not helping her to remove her dentures.

Could you please arrange for staff to remove Mrs Georgas' dentures every evening and ensure they are thoroughly cleaned and left in a clean dry container over night. I will review Mrs Georgas in one week. If there is no improvement of the denture stomatitis after this routine has been established for one week, I will prescribe antifungal medication to assist in the resolution of the condition.

Please let me know if you have any questions.

Yours sincerely

Dentist