

8th November – Reading Part C

Text 2: Antibiotic prescriptions

Paragraph 4 – Vocab:

- Well-warranted
- Cautious
- Enthusiastic

18 What point does Dr Justin Coleman make about 'cautious' prescribers?

1. For this question, are we looking for the writer's attitude or someone else's?
2. The question uses the word "point" – How can we find the information we need in the paragraph?

While there are obviously cases in which antibiotic prescriptions are well-warranted, recent research has also shown that doctors considered as 'cautious' prescribers actually have the same rate of adverse outcomes from infections as 'enthusiastic' prescribers. 'I think this suggests that family doctors who are cautious prescribers still give antibiotics where they are needed. The difference lies in the larger numbers of people who probably don't need the antibiotics.' says Dr Justin Coleman, Chair of NPS MedicineWise's 'Choosing Wisely Australia' initiative. 'And that's really where we need to make the changes.'

18 What point does Dr Justin Coleman make about 'cautious' prescribers?

- (A) They are solely motivated by concerns about antibiotic resistance.
- (B) They see a lower number of adverse outcomes than 'enthusiastic' prescribers.
- (C) They care for patients as effectively as 'enthusiastic' prescribers.
- (D) They have made active changes to their prescribing habits.

What does Dr Justin Coleman tell us about 'cautious' prescribers?

Paragraph 5 – Vocab:

- To intervene
- Irony
- Deflection strategy

19 What downside of 'delayed prescribing' is mentioned in the fifth paragraph?

1. This question uses the word "downside" – How can we find the information we need to answer the question?

What can family doctors do? One approach is to intervene at the prescribing stage. 'Delayed prescribing' is a strategy in which a prescription, or 'script', is written for antibiotics, but the patient is asked not to fill it for 48 hours. 'It does work in the sense that only a third of patients are ever likely to fill the script,' says Turnidge. 'But the irony of that is if you need an antibiotic, you actually need it now. Waiting two days isn't a great idea.' Turnidge does, however, suggest that delayed prescribing is useful as a deflection strategy because it sends the message to patients that says, 'No, you don't need antibiotics now.' Another strategy being considered by the ACSQHC is introducing scripts that expire within two weeks of being written. Turnidge believes **this** could be very effective because it will prevent patients from storing prescriptions for weeks or months then using it for some other indication.

19 What downside of 'delayed prescribing' is mentioned in the fifth paragraph?

- (A) Doctors are uncomfortable telling patients that they can't have the antibiotics now.
- (B) It might be unsafe to make patients wait two days before taking antibiotics.
- (C) Patients don't like being asked to wait two days before taking antibiotics.
- (D) Two thirds of patients will never fill the prescription for antibiotics.

What problem with delayed prescribing does the text mention?

20 What does the word '**this**' in the fifth paragraph refer to?

1. How far back in the text do we need to read to find out what words like “this” refer to?
2. Does the sentence after “this” help us at all?

What can family doctors do? One approach is to intervene at the prescribing stage. 'Delayed prescribing' is a strategy in which a prescription, or 'script', is written for antibiotics, but the patient is asked not to fill it for 48 hours. 'It does work in the sense that only a third of patients are ever likely to fill the script,' says Turnidge. 'But the irony of that is if you need an antibiotic, you actually need it now. Waiting two days isn't a great idea.' Turnidge does, however, suggest that delayed prescribing is useful as a deflection strategy because it sends the message to patients that says, 'No, you don't need antibiotics now.' Another strategy being considered by the ACSQHC is introducing scripts that expire within two weeks of being written. Turnidge believes **this** could be very effective because it will prevent patients from storing prescriptions for weeks or months then using it for some other indication.

20 What does the word '**this**' in the fifth paragraph refer to?

- (A) making patients wait before receiving a script
- (B) reducing the waiting time before scripts can be filled
- (C) limiting the number of prescriptions per patient
- (D) giving patients scripts that are valid for a limited period of time

According to the text, what will “prevent patients from storing prescriptions for weeks or months”?

Paragraph 4 – Vocab:

- Well-warranted
- Cautious
- Enthusiastic

18 What **point** does **Dr Justin Coleman** make about **'cautious' prescribers**?

1. For this question, are we looking for the writer's attitude or **someone else's**?
2. The question uses the word "point" – How can we find the information we need in the paragraph?

While there are obviously cases in which antibiotic prescriptions are well-warranted, recent research has also shown that doctors considered as **'cautious' prescribers actually have the same rate of adverse outcomes from infections as 'enthusiastic' prescribers.** **'I think this suggests that family doctors who are cautious prescribers still give antibiotics where they are needed.** The difference lies in the larger numbers of people who probably don't need the antibiotics.' says Dr Justin Coleman, Chair of NPS MedicineWise's 'Choosing Wisely Australia' initiative. 'And that's really where **we need to make the changes.**'

18 What point does Dr Justin Coleman make about 'cautious' prescribers?

- (A) They are **solely motivated by concerns** about antibiotic resistance.
- (B) They see a **lower number** of **adverse outcomes** than 'enthusiastic' prescribers.
- (C) They **care** for patients **as effectively as** 'enthusiastic' prescribers.
- (D) They **have made active changes** to their prescribing habits.

What does Dr Justin Coleman tell us about 'cautious' prescribers?

Paragraph 5 – Vocab:

- To intervene
- Irony
- Deflection strategy

19 What **downside** of **'delayed prescribing'** is mentioned in the fifth paragraph?

1. This question uses the word “downside” – How can we find the information we need to answer the question?

What can family doctors do? One approach is to intervene at the prescribing stage. 'Delayed prescribing' is a strategy in which a prescription, or 'script', is written for antibiotics, but the patient is asked not to fill it for 48 hours. **'It does work in the sense that only a third of patients are ever likely to fill the script.'** says Turnidge. **'But the irony of that is if you need an antibiotic, you actually need it now. Waiting two days isn't a great idea.'** Turnidge does, however, suggest that delayed prescribing is useful as a deflection strategy because it sends the message to patients that says, 'No, you don't need antibiotics now.' Another strategy being considered by the ACSQHC is introducing scripts that expire within two weeks of being written. Turnidge believes **this** could be very effective because it will prevent patients from storing prescriptions for weeks or months then using it for some other indication.

19 What downside of 'delayed prescribing' is mentioned in the fifth paragraph?

- (A) **Doctors are uncomfortable** telling patients that they can't have the antibiotics now.
- (B) It **might be unsafe** to make patients wait two days before taking antibiotics.
- (C) **Patients don't like being asked to wait** two days before taking antibiotics.
- (D) **Two thirds of patients** will **never fill** the prescription for antibiotics.

What problem with delayed prescribing does the text mention?

20 What does the word **'this'** in the fifth paragraph refer to?

1. How far back in the text do we need to read to find out what words like “this” refer to?
2. Does the sentence after “this” help us at all?

What can family doctors do? One approach is to intervene at the prescribing stage. 'Delayed prescribing' is a strategy in which a prescription, or 'script', is written for antibiotics, but the patient is asked not to fill it for 48 hours. 'It does work in the sense that only a third of patients are ever likely to fill the script,' says Turnidge. 'But the irony of that is if you need an antibiotic, you actually need it now. Waiting two days isn't a great idea.' Turnidge does, however, suggest that delayed prescribing is useful as a deflection strategy because it sends the message to patients that says, 'No, you don't need antibiotics now.' Another strategy being considered by the ACSQHC is **introducing scripts that expire within two weeks of being written**. Turnidge believes **this** could be very effective because it will prevent patients from storing prescriptions for weeks or months then using it for some other indication.

20 What does the word **'this'** in the fifth paragraph refer to?

- (A) **making patients wait** before receiving a script
- (B) **reducing the waiting time** before scripts can be filled
- (C) **limiting the number of prescriptions** per patient
- (D) giving patients **scripts** that are **valid** for a **limited period of time**

According to the text, what will “prevent patients from storing prescriptions for weeks or months”?

Answers:

18) C

19) B

20) D