



MINISTÈRE DES ARMÉES

ÉPREUVES D'ADMISSIBILITÉ DU CONCOURS 2021 D'ADMISSION À L'ÉCOLE DE SANTÉ DES ARMÉES

Catégorie : Baccalauréat - Sections : Médecine et Pharmacie

Lundi 29 mars 2021

ÉPREUVE D'ANGLAIS

Durée : 1 heure 30 minutes

Coefficient 1

Avertissements

- *L'utilisation d'encre rouge, de téléphone portable, de dictionnaire est interdite.*
- *Vérifiez que ce fascicule comporte 32 pages numérotées de 1 à 32, page de garde comprise.*
- *l'épreuve se compose de deux parties :*
 - Part I- reading comprehension*
 - Part II- Grammar and vocabulary*
- *Toutes les réponses aux QCM doivent être faites sur la grille de réponses jointe. Si le candidat répond aux QCM sur le fascicule et non sur la grille, ses réponses ne seront pas prises en compte par le correcteur.*
- *Pour chacun des QCM, les candidats doivent cocher la lettre de la proposition qu'ils considèrent comme correcte. Il est demandé aux candidats de faire très attention au numéro de QCM quand ils « cochent » la grille de réponses jointe.*
- *Chaque QCM comporte une seule réponse acceptable. (pas de points négatifs).*

PART I- Reading Comprehension

Document-1 Defence key figures

Table 1

	officers	NCOs	Enlisted military personnel	volunteers	total	%
Army	14,155	38,684	61,372	446	114,677	55.7
Navy	4,629	22,724	7,095	228	34,676	16.8
Air Force	6,534	23,710	9,998	214	40,456	19.7
Gendarmerie	208	1,947	0	417	2,572	1.2
Defence Health Service	3,141	4,377	0	76	7,594	3.7
Military Fuel Service*	212	334	893	0	1,439	0.7
Armament project coordination	1,773	0	0	0	1,773	0.9
SCA	1,836	1	0	16	1,853	0.9
Other managing services	703	39		0	742	0.4
Total	33,191	91,816	0	1,417	205,782	100.0
%	16.1	44.6	38.6	0.7	100.0	

* inter-service branch of the French Army subordinate to the head of the defence staff.

Source: DRH-MD/social report 2019 (document published in September-October 2020)

Scope = all military personnel under the French Ministry for the Armed Forces' PMEA in 2019.

Question 1 – Which statement best describes Table 1?

- A- Table 1 represents the breakdown of military personnel by staff category in the UK in 2020.
- B- Table 1 gives an overview of The French military personnel categorised by gender and staff category.
- C- Table 1 provides a recent breakdown of military personnel by staff category and by managing service in France.
- D- Table 1 gives key figures about military and civilian personnel working overseas.

Question 2 - Look at the figures in table 1. Which of the following statement is true?

- A- In 2019 French military officers represented over one third of all military personnel.
- B- In 2019 over half of all French military personnel were employed by the French ground forces
- C- There are more officers in the Air Force than anywhere else in the American forces.
- D- In 2020 The French Defence Health Service staff outnumbered The French Navy personnel.

Document 2 consists of 3 tables.

Table 2 Army (figures as of 1 July, 2020)

* UAVs: unmanned aerial vehicles

Equipment	Amount	Equipment	Amount
Armoured Vehicles		120 mm mortars	132
Main battle tanks	222	LRU (unitary launch rocket system)	13
Leclerc	222	Infantry equipment	
Tracked armoured vehicles	185	FELIN	23,075
VHM (High-mobility vehicles) + BV206L (Troop carrying vehicles)	89	Anti-tank weapon Systems (firing stations)	
DCL (Leclerc repair tanks)	18	Milan (457), MMP (medium-range missiles), Eryx (650), Javelin (76)	1,458
AMX 30 D (repair)	28	Helicopters	
EBG (Armoured engineer vehicles) + SDPMAC	50	Helicopters (86), Tigre(68), Cougar (24), Puma (46), Caracal (8), Caiman NH90	279
Wheeled armoured vehicles	6,371	Training Helicopters	
AMX 10 RCR (tanks)	247	Fennec*	18
ERC (Wheeled armoured vehicles) 90 Sagaie	40	Liaison aircraft	
VBCI (Armoured infantry fighting vehicles)	628	TBM 700 (8), Pilatus (5),	13
Troop transport (all types of LAV)	2,751	Ground-to-air weapon systems	
LAV (PVP)	1,149	Mistral firing stations	221
LAV (VBL-VB2L)including refurbished vehicles	1,418	UAVs (as air assets)*	
VBHP (highly protected armoured vehicles)	14	SDTI (Sperwer tactical UVAs systems)	15
		SDT (Tactical drone systems)	0
		DRAC (Close-range reconnaissance UAVs systems)	20
		SMDR (Reconnaissance mini-drone systems)	60
		DROGEN (2-drone systems used by the engineer regiment)	3
Buffalo (Mine-protected clearance vehicles)	4		
**UAV: Griffon (Multirole armoured vehicles)	220		
Wheeled vehicles	3,047		
Multi-purpose carriers	899		
Masstech (Light utility unarmoured vehicles)	498		
VT4 (4X4 tactical vehicles)	1,650		
Artillery			
155 mm self-propelled howitzers (CAESAR, AUF1 and TRF1)	120		
VAB(Armoured personnel carriers) with observation equipment	59		

Table 3 Navy (as of 1st July 2020)

Equipment	Amount	Equipment	Amount
Combat and support ships		Training	
Nuclear-powered ballistic missiles submarines (SSBN)	4	Navy academic ships and sailing boats	14
Nuclear-powered attack submarines (SSN)	5	Experimentation and test ships	3
Aircraft* carrier (CVN)	1	Onboard Aircraft	
Amphibious assault ships, also known as helicopter carriers	3	French Navy Rafale	42
1 st rank destroyers	15	Hawkeye-E2C	3
Surveillance frigates	6	Maritime patrol aircraft	
Offshore patrol vessels	18	Atlantique 2	22
Minehunters	10	Maritime surveillance aircraft	
Light support ships	8	Falcon 50 M (8), Falcon 200 "Gardian" (5)	13
Command and replenishment ships	3	Combat, search and rescue helicopters**	
Landing craft	16	Caiman Marine (24), Panther (16), Lynx (9), Dauphin Pedro (3)	52
Maritime gendarmerie		Support and public Service Helicopters	
Patrol ships and costal cutters	39	Dauphin N and Dauphin N3+ (8), Alouette III (12)	20
Hydrographic and Oceanographic ships	4	Maritime support aircraft	
Channel mine clearance and surveillance	7	Falcon 10 M (6), Xingu (10), Cap 10M (5)	21
Base ships for mine clearance and sonar-towing vessels	7		

vocabulary

* *Aircraft*: a means of transport that is able to fly by gaining support from the air.

** *Search and Rescue*: the activity of looking for and rescuing people who are lost or in danger. (collinsdictionary.com)

Table 4 Air Force (figures as of 1st of July 2020)

Equipment	Amount	Equipment	Amount
Combat aircraft		Liaison aircraft	
Rafale (omnirole)	102	A330, Falcon 7X, Falcon 900 and Falcon 2000 (for governmental use)	7
Mirage 2000 D (conventional assault)	70	TBM700 and DHC6 (liaison)	20
Mirage 2000-5 and 2000 C (air defence)	40	Training aircraft	
Mirage 2000 B	7	Pilatus PC-21	17
Transport aircraft		Alphajet (fighter pilot's training)	72
A340 and A310 (strategic aircraft)	4	Xingu (transport pilots'training)	22
C160R Transall (tactical transport)	11	Presentation teams	
C130 Hercules (tactical transport)	14	Alphajet patrouille de France	20
C130 J-30 Super Hercules (tactical transport)	2	Extra 300/330	3
KC 130-J (tactical transport and tanker)	2	Helicopters	
CN235 (tactical transport light)	27	Fennec (Air defence – air security active measures)	40
A400 M Atlas (tactical transport with strategic range)	17	Caracal (combat, search and rescue)	10
Support aircraft		Super Puma and Puma (transport, Search and Rescue)	23
C135 FR and KC 135 (tanker)	14	UAVs (air assets)	8
A330 phénix (tanker and transport)	2	Reaper	8
E3F SDCA (airborne detection command and control)	4	Ground-to-air weapon systems	
C-160G (electromagnetic intelligence gathering)	2	Crotale NG	12
		SAMP " Mamba"	8

Question 3 - Which of the following is true about document 2?

- A- Document 2 refers to the equipment that the French military can currently use.
- B-The three tables describe the military equipment that was used by the Army up until mid-July 2020.
- C- Document 2 gives information about vehicles and missiles produced by the French Military in 2020.
- D- Document 2 is composed of 3 tables detailing military vehicles available in 2020 in France.

Question 4 - Which of the following is true about French military equipment?

- A- *Fennec* is a type of helicopter designed for training purposes only.
- B- *Alphajet* is a type of transport aircraft.
- C- The French Navy does not have any drones.
- D- The French Navy does not have any combat aircraft at their disposal.

Question 5- Which means of transport do Navy paramedics use to provide assistance for people in distress?

- A- a Panther
- B- a Rafale
- C- a Falcon
- D- A Xingu

Question-6- What do the following means of transport have in common?

C160R Transall, C130 J-30 Super Hercules, BV206L

- A- They are used for transport purposes only.
- B- They are used by the French Airforce.
- C- They are used to conduct offensive combat.
- D- They are used by the French ground forces.

Document 3

	<h2>French take the lead in 'Le Crunch' for first time: Royal Navy Rugby Union</h2> <p>French take the lead in 'Le Crunch' for first time : Royal Navy Rugby ... https://www.navyrugbyunion.co.uk/match-reports/french-take-the-lead... 06/12/2020, 13:08</p>
1	<p>Plymouth Albion RFC played host to the French Navy, in the 13th fixture in the Babcock International competition between the Royal Navy and their French counterparts, the Marine Nationale. [...]</p>
5	<p>The Royal Marine Band from HMS Raleigh opened the evening before the teams took to the pitch to be introduced to the dignitaries prior to the playing of the National Anthems. The event was open to the public and a good crowd turned out to support the Royal Navy team and to enjoy the early evening sunshine.</p>
10	<p>The French side were the first team to put points on the scoreboard with a penalty kick from their fly half, Gregoire. After the restart the French were penalised for a knock on and it looked as if the Navy side were about to draw level, but uncharacteristically Jon Humphrey missed the posts with his kick. But it wasn't long before the Navy Senior XV got into their stride; with some lovely passing, and a cheeky kick chased by winger, Matt Bowden, who touched down into the corner. The conversion was missed and the Royal Navy took the lead 5 - 3.</p>
15	<p>The action came thick and fast, with the French pressurising in the Navy half [...]. [...] Gregoire added another 3 points to the scoreboard 5 - 6. Both teams played, fast exciting rugby, and the crunching tackles began to take their toll; Navy centre Jack Basher was replaced by no 23 Seta Raumakita following an injury. So competitive and evenly matched were the teams, the first half passed in a blur of excellent rugby. At</p>
20	<p>half time the score was Royal Navy 5 - Marine Nationale 6 [...].</p>
25	<p>To the delight of the home crowd, the Navy took the lead early in the second half, with full back Jon Humphrey returning to form, kicking a penalty, 8 - 6. However, the joy didn't last long as the French Navy No 8 [...] found some space with an impressive run down the wing to touch down under the posts. With another successful kick by Gregoire, the French had the lead 8 - 13. Then a penalty for an over-enthusiastic tackle by Navy No 8, David Fairbrother, allowed Gregoire to score more points, increasing the French lead 8 - 16.</p>
30	<p>Fresh legs came on for both sides but it was Fairbrother who made the next score, powering past a number of French defenders [...] to close the gap to one point, after Humphrey's successful conversion. Score 15 - 16.</p>
	<p>The clock was counting down but there was still time for the Royal Navy to go ahead; however, the next score, when it came, went again to the visiting French team</p>

	following another penalty. With the score line 15 - 19 the home side needed a try to clinch the match but, despite throwing everything they had at it, there wasn't enough time and the French were victorious.
35	The scoreline reflects how competitive the match was and both sides should be rightly proud of their performances. [...] The Royal Navy head coach, Ash Coates, will be heartened by the performance of his team, who in general, played a disciplined, spirited game of rugby, scoring two tries to the French one [...]. There are lessons to learn, and the Senior XV will have to avoid giving away penalties in the Inter Service competition if they want to retain their title. [...]
40	

Question 7 - Overall, the rugby game:

- A. showed great energy but was disorderly
- B. was played by violent, unruly players
- C. was fast, energetic and played with discipline
- D. showed that both teams lacked organisation

Question 8 - What did NOT happen during the game?

- A. Seta Raumatika was injured.
- B. Jack Basher was injured.
- C. Players were switched out during the game.
- D. The French team conceded a penalty.

Question 9 - The public:

- A. was welcome to the game yet unhappy to be there
- B. was rowdy and had to be asked to leave
- C. left the game early as the weather was wet
- D. was welcome to the game and enjoyed being there

Question 10 - How many times did *Gregoire* score points?

- A. 11
- B. 4
- C. 19
- D. 8

Document 4

Thu 1 Oct 2020 10.49 BST

A patient I'll never forget	
1	The night shift in A&E started off as normal: routine heart attacks, head injuries, road traffic accidents, an array of minor injuries. It was what happened next that has stayed with me for 25 years, long after I left my job as _____ .
5	I can't remember exactly when the unmistakably shrill sound of the trauma bleep went off, but I do recall feeling a familiar churning in my stomach. Was it excitement? Or was it a sense of foreboding, a warning that something bad was about to happen, something hard to stomach and impossible to erase?
10	I looked up at the arrivals screen: "Trauma, patient moribund, ETA three minutes" were the only clues I had as I walked quickly to the resus room to set up my tray of equipment. One by one, my colleagues arrived; there were no "how are you's?" or pleasantries, no banter or gossip. There was just an eerie silence as we rushed to prepare so that we could be ready to jump into action as soon as the patient arrived.
15	The anaesthetist arrived and, amid the continuous beeping of ECG machines, we were quickly given our roles and instructions. The anaesthetist would take head, neck and airway, I was to take IV access and pain relief, the orthopaedics were ready to assess limbs and spine, the surgeon was to assess the abdomen, and so on.
	I listened carefully as I gowned and gloved up, my hands trembling.
20	What seemed like several long moments later, the paramedics rushed in with the patient on a trolley. The loud, firm, pressured voice of the paramedic said: "Twenty-nine-year old Caucasian male, severe burns to entire body from a house fire, past medical history includes mental health ..."
25	His voice faded as I took in the screaming, writhing body that was attached to a spinal board and covered in head-to-toe burns. The acrid smell of charred flesh and burnt hair still haunted me for several weeks afterwards, and I will never be able to stop hearing the screaming.
30	A familiar feeling descended over me – a calm, determined autopilot where somehow, after repeated exams, courses and emergency experience, I knew exactly what to do. "We need access, morphine and fluids ..." I heard the anaesthetist's firm instructions over the screaming and thrashing as he held oxygen over the patient's face.
35	The nurse restrained the patient's arm as I applied a tourniquet above the elbow; the burnt skin came away under my thumb but underneath I felt the familiar give of what I hoped was a vein. I was handed a grey cannula and on a wing and a prayer plunged it into the skin. A flashback of blood showed that access was secured and within seconds his rigid, desperate, clamping limbs suddenly softened and relaxed as the opiates took effect.
	My colleagues jumped into action to sedate him, secure an airway, carry out limb and abdominal assessments, ventilation and cardiorespiratory monitoring, and place lines

40	<p>and tubes. We worked to stabilise the patient so he could be transferred to intensive care.</p> <p>As the trolley was loaded with equipment and carefully wheeled out of resus, I prayed a silent hopeless prayer. I couldn't see how he could survive.</p>
45	<p>The debriefing was filled with a stunned silence, as the consultant asked if we were OK. We looked at the floor in what could only have been a mixture of horror and bravado and replied: "Yes." He spoke but I remember very little of what was said and after a few minutes our trauma team disbanded to go about the rest of our night shift, a part of each of us also scarred and changed forever.</p>
50	<p>I'm not sure why this patient has lived on in my memory. Perhaps it was the fact we were a similar age; at a time when I felt invincible, his life was taken from him. He fought for his life for several weeks, but survived only in my thoughts and the hearts of his loved ones. Years later I was again reminded of him and my own mortality as I myself recovered from mental health issues.</p>
55	<p>My thoughts turn to my friends and colleagues on the frontline of a global pandemic, and I fear for their wellbeing. They are also dealing with trauma, but don't have the time to process it. In more recent times, debriefing and counselling of healthcare workers has become available but it is by no means routine.</p> <p>My hope is that immediate funding for a national framework of in-house support and counselling will stem the tsunami of mental ill health among frontline workers that I envisage coming, and shed light on the ultimate medical taboo that is the mental health of our healthcare staff.</p>

Source: <https://www.theguardian.com/society/2020/oct/01/patient-ill-never-forget-burns-screams-still-haunt-me>

Question-11 Select the best answer to complete the blank in the first paragraph.

- A- A senior hemathologist
- B- A pharmacist
- C- A peadiatrician
- D- A young doctor

Question- 12 where was the patient when the trauma beep went off?

- A- In the trauma room
- B- On his way to the Hospital's Emergency Unit
- C- In Intensive Care Unit
- D- In his room, resting

Question 13 - How old is the narrator now?

- A- Around thirty-years-old
- B- 25-years-old
- C- Around fifty-five-years-old
- D- It is difficult to give him/her an age.

Question 14 - What can be said about the patient?

- A- He survived his injuries but was scarred and changed forever.
- B- She died shortly after her accident.
- C- He pulled through despite his severe injuries.
- D- He passed away.

Question 15 - What message does the author wish to convey?

- A- Medical staff shortages is a pressing matter that needs to be addressed quickly.
- B- Working in an Emergency unit is a calling that requires many human and medical skills.
- C- Some healthcare workers function under tremendous pressure. Public money is needed to help them to get proper counselling before they face burnout or emotional breakdown.
- D- The general public ought to be made aware of how poorly equipped the UK health care system is.

Document 5

A Mother's Tear

By Amy Peterson

There's more to the story,
than what just appears.
A war written story,
from blood and from tears.
My son went to war,
a very proud man.
He fought in Iraq,
on the hot desert sands.
He witnessed his buddies,
his comrades, his men,
bleeding and dying,
he witnessed their end.
Where is Pvt. Tommy?
He's blown up all around,
his comrades spent hours,
picking him from the ground.
Sleeping in holes,
dug in the sand,
dreaming of home,
but it's become foreign land.
He can't tell his enemy,
from family or foe,
as he watches his friends sent out,
with tags on their toe.
He knows his Mama,
is sleepless like him,
and he tries to send word,
whenever he can.
He tries not to worry,
his family at home,
the horror that he faces,
he faces alone.
His mission is over,
he's sent back to me,
he fought for our freedom,
but he'll never be free.
He yearns for his buddies,
that died over there.
He's caught with the living,
in a doubled looped snare.
He screams in the night,
for the battle still roars,
as he lays in his bed,
he re-lives all the horror.

Nobody heard the fight,
he still fights,
except for his Mama,
who comforts him every night.
He never will be,
the son I once knew,
the war killed that part,
for freedom, for you.
Great Nation, Great Leaders,
and all those who will hear,
Freedom began
on a mother's first tear.

16 - Who is the narrator of the poem in relation to the main character?

- A. His daughter
- B. His wife
- C. His mother
- D. His sister

17- What is true about the main character of the poem?

- A. He held the position of a leader during his mission in Iraq.
- B. He died in Iraq.
- C. He shared every gory detail of his mission with his family and friends.
- D. His experience in Iraq made him stronger.

18 - What is implied in **lines 23 and 24**?

- A. The main character's allies have little chance of survival.
- B. The main character's friends seem to be corpses even before they are killed.
- C. The main character's friends are happy to be sent out to fight for freedom.
- D. The main character's friends will no doubt return home with a sense of achievement.

19 - What is the main character of the poem challenged with?

- A. He did not see many of his friends die in Iraq.
- B. He is not able to send letters to his family.
- C. His mother cannot comfort him.
- D. He cannot sleep at night, even after returning to his home country.

20 - Which of the following is true about the main character now?

- A. He is in good shape, ready to be sent out on his next tour of duty.
- B. He shows symptoms of Post Traumatic Syndrome Disorder and needs medical help.
- C. He is happy to be back home with his mother and friends.
- D. He wants to go back to Iraq where his comrades are stationed.

21 - What can be said about Pvt Tommy?

- A- He went missing in action.
- B- He was killed in action.
- C- He was made a prisoner of war.
- D- He was so drunk that his comrades had to pick him up and take him back to the barracks.

22 - How does the narrator portray the living conditions of the allied soldiers during the mission?

- A. precarious
- B. quite safe
- C. satisfactory
- D. exciting

What Our Patients Are Saying

Testimonials from Winchester Hospital Patients

Sometimes a hospital's story is best told by patients who have been there. We are pleased to present these stories and testimonials by Winchester Hospital patients.

<https://winchesterhospital.org>

Linda Telfer, Breast Cancer Survivor, Stow, MA

"Getting prepared for a mammogram after you've had cancer isn't exactly easy. I had breast cancer 11 years ago and while there are four or five hospitals closer to me, Winchester Hospital is the only place I'd consider.

The staff at the Winchester Hospital Breast Care Center has been with me through five successful biopsies – they know what I need to be comfortable and always go out of their way to make it possible. The nurses who cared for me know what I went through and are still there; they do a great job of making sure patients get the support they need every step of the way.

Everyone at the Breast Care Center has always been reassuring and quick to respond whenever I've needed some extra help – this means more than you know. The care at Winchester Hospital is wonderful and I deeply appreciate it.

Barbara Heffernan, Bladder Control Patient, Reading, MA

"I've had an overactive bladder and bladder control problems for more than 30 years. Anyone who experiences these symptoms can understand it's a horrible, embarrassing problem to live with.

I never felt comfortable talking about it, so I didn't – not even to my primary care physician. I didn't realize that I had options that could easily alleviate my issues.

Dr. Rajan at Winchester Hospital performed a minimally invasive surgery that literally has changed my life. I was incredibly well-informed throughout the entire experience right through recovery, making it as pleasant as it could have been. I used to have to plan my whole day so I could stop if I needed to. Now, I travel without a second thought.

Women tend to take care of everybody but themselves, but when you improve the quality of your own life, I believe it makes you an even better caregiver."

Elise Nicholson, Osteoporosis Patient, Stoneham, MA

"I live in Stoneham and teach at a local school. Winchester Hospital's Community Health Institute was offering a free bone density screening – something that I had never done in my 44 years. The 8-minute test determined that I had osteopenia (mild to moderate bone loss); this encouraged me to get further testing which revealed that I had osteoporosis (severe bone loss).

If not for Winchester Hospital, it would never have occurred to me to have a bone scan. The programs in their Community Health Institute are encouraging community awareness and impacting overall health – what a wonderful service."

[...]

Joan Romboli, Manchester, NH, lost 136 pounds following laparoscopic gastric bypass surgery at Winchester Hospital

"My mom was a big lady. And she died of a massive heart attack at 70. I took after her but didn't want to follow in her footsteps, so I took charge of my life. I said, 'I'm going to change this.'

I went to Winchester Hospital. It's clear that Winchester Hospital really understands and cares about obese people. I really felt like they were looking after me and my entire health by making sure that surgery was my best option.

I am now totally comfortable and accepting of my body. I feel great now, but it's still me, Joan."

[...]

23. What does Linda Telfer say about her choice of hospital?
- A. She could have gone to any other hospital.
 - B. All other five hospitals she went to refused to take her on.
 - C. Had she been given the choice, she would have chosen a hospital different to the one in Winchester.
 - D. Winchester hospital is the only one she felt comfortable going to.
24. According to the Winchester Hospital patients:
- A. The patients felt miserable, horrible and embarrassed about their illnesses because of the Winchester hospital staff.
 - B. The nurses and the doctors were very supportive of the patients they gave quality care to.
 - C. The Winchester medical staff sought to care for the patients but were unsupportive and didn't seem encouraging.
 - D. Most of the staff showed they were uncaring apart from the nurses who were very supportive of the patients.
25. Who found out she had a medical issue after medical imaging?
- A. Linda
 - B. Barbra
 - C. Elise
 - D. Joan
26. What do the 4 patients have in common?
- A- They have been to different hospitals.
 - B- They all have had to struggle with life-threatening health conditions.
 - C- They all left feedback on the same website to share what they had to say about their experiences in Winchester Hospital.
 - D- They are young patients.
- 27 - Who felt embarrassed to share her medical issues with other people?
- A. Linda
 - B. Barbra
 - C. Elise
 - D. Joan
- 28 - What impression do we have after reading those testimonies?
- A- Winchester Hospital is staffed with caring and well-trained professionals. You are in good hands there.
 - B- Despite the high-quality care that one receives at Winchester Hospital, caregivers are not always close to the patients.
 - C- The only criticism about Winchester hospital is that they tend to run unnecessary tests.
 - D- Patient safety and patient satisfaction are not always a priority at Winchester Hospital.

JUNE 19, 2020

EUROPEAN MARITIME FORCE - EUROMARFOR : RETURN TO OPERATION SEA GUARDIAN



From May 28th to June 16th, an EUROMARFOR Task Group, composed by the French Frigate Courbet and the Italian Frigate Carabiniere, was engaged in an operational maritime theatre, under direct Operational Control of NATO. It was a debut in 25 years of existence of EUROMARFOR. The nearly 300 embarked sailors displayed the colors of the European Maritime Force, in central Mediterranean Sea, alongside with other nations of the North Atlantic Treaty Organization, in operation Sea Guardian. The EUROMARFOR Task Group directly ensured the security of this strategic area of Europe's southern flank, by actively participating in the fight against international terrorism and illegal trafficking. Beyond the dense operational activity, French and Italian sailors were able to carry out numerous joint training events, such as fire-fighting exercises, replenishing at sea and helicopter landings, among others.

Returning to her homeport, on June 16th, the French frigate Courbet demonstrated the commitment of the 4 EUROMARFOR's nations (France, Italy, Portugal and Spain) to engage in the offshore defense of Europe. EUROMARFOR demonstrates with this operation, its full complementarity with other international military coalitions, such as NATO or the EU.

During this deployment in the Mediterranean Sea, within a multinational maritime force, the FS Courbet and ITS Carabinieri, as a EUROMARFOR Task Group, currently under the Operational Command of VADM FRA-N Jean-Philippe Rolland, helped to establish the role of their countries among those contributing to NATO's missions, in this strategic area for European interests.

29 - Which is NOT a type of mission that could have been carried out by the EUROMARFOR Task Group?

- A. Boat searches aboard suspicious craft
- B. Medical evacuation exercises
- C. Fighting terrorism
- D. Providing humanitarian aid

30 - What does EUROMARFOR show?

- A. Working individually is time-saving and most efficient.
- B. European countries find it challenging to work together.
- C. Protecting the Mediterranean Sea is not in the interest of the European Union.
- D. Two alliances can work alongside efficiently.

31- Who ensured the security of Europe's southern flank?

- A. NATO
- B. EUROMARFOR
- C. The EU
- D. The French Navy all by itself

Landmine toll still high amid concerns over COVID-19 impact on clearance efforts

<https://news.un.org/en/story/2020/11/1077502!>

Thousands of people continue to be killed and injured every year by landmines and explosive weapons in conflicts around the world, while the COVID-19 pandemic has forced mine-clearance efforts to be scaled back, a UN-backed civil society report on the issue [said](#) on Thursday.

According to the [Landmine Monitor 2020](#), more than 80 per cent of the world – 164 countries – have adopted the Mine Ban Treaty 23 years after it was drafted and signed, and most of the 33 countries that are not bound by it, comply nonetheless.

Despite this achievement, long-running conflicts continue to cause mainly civilian casualties, while other dangers requiring action include the new use of improvised landmines by non-State armed groups and a decrease in global mine action assistance.

For 2019, “we recorded about 2,200 people killed of those 5,545 casualties overall”, said Loren Persi, Landmine Monitor 2020 Impact research team leader from The International Campaign to Ban Landmines/Cluster Munition Coalition (ICBL-CMC), at a virtual press conference moderated by the UN Institute for Disarmament Research ([UNIDIR](#)) in Geneva.

Mr. Persi added that the ratio of people killed to injured, indicated very clearly “that there were many, many more casualties and that people who were injured by landmines and explosive remnants of war are not being recorded adequately in many countries where there are conflicts”.

Young lives shattered

Most casualties are civilians, in part because they lack the access to emergency assistance that military targets have at their disposal, and men make up more than eight in 10 victims, journalists heard.

“Seven years ago, we reached an all-time low in new landmine casualties”, said Mr. Persi. “But this achievement has overturned, and we are seeing heightened numbers of civilians killed and wounded. Appallingly, nearly half of all these casualties are children. We need to act now to reverse this trend, to save lives, and to address the trauma and suffering with much needed assistance.”

Although landmine awareness-raising schemes are a proven way of keeping communities safe, accidents involving civilians are frequently linked to the need to work or find food, said Ruth Bottomley, Monitor research specialist and expert on contamination, clearance and risk education.

Her comments coincide with data from the Monitor showing that 2019 also saw a reduction in global funding for mine action, with 45 donors and affected States contributing approximately \$650 million, a seven per cent decrease from 2018.

Paying price for risk-taking

“Men have always been one of the hardest groups for us education operators to reach, partly because they are often away from home and out of the community”, focusing on making a living, she said.

“But also because those livelihood activities often take them into mined areas, so for example through agriculture, forestry, hunting; and they are also more likely to take intentional risks.”

Despite some improvements in providing services for victims of landmines - improvised or not - or unexploded ordnance by some States Parties, the Monitor noted that “accessibility gaps remained in all countries”.



UNMAS/Gwenn Dubourthoumieu

A deminer undergoing training in the Democratic Republic of the Congo.

Pandemic, conflict: a lethal combination

The [COVID-19](#) pandemic and related movement restrictions had also prevented survivors and other persons with disabilities from accessing services in a number of mine-affected countries, it added, noting also that children represented 43 per cent of civilian casualties.

“Conflict is ongoing in several State parties, so Afghanistan, Yemen, Ukraine, and this is also hampering our clearance efforts,” added Ms. Bottomley. There is new contamination which is adding to the problem and also making it more difficult to estimate that amount of contamination. So, in Yemen, they have not been able to do that for the last two years and they’re hoping to be able to better survey some of these areas, but there’s still lack of access”.

Myanmar in spotlight

In the last year, the only confirmed use of antipersonnel landmines by State forces was by Myanmar, according to the Monitor. “They have been using every single year in the 22 years that the Monitor has been reporting, so that is not surprising they continue to, but they’re now alone in their desire to continue to use this weapon on a regular basis,” said Stephen Goose, Director of Human Rights Watch’s Arms Division.

More worrying are numerous allegations of landmines use by non-State armed groups “in about a dozen other countries”, Mr. Goose added.

Over the reporting period, the Monitor said that non-State armed groups used antipersonnel mines in at least six countries: Afghanistan, Colombia, India, Libya, Myanmar, and Pakistan.

“We haven’t been able to confirm in any of these countries, but the fact that there are that many allegations out there continue to be a disturbing factor,” he added.

On a more positive note, the Monitor highlighted that the vast destruction of antipersonnel mine stocks “continues to be one of the great successes” of the Mine Ban Treaty.

More than 55 million stockpiled antipersonnel mines have been destroyed to date, including more than 269,000 destroyed in 2019.

32- What can be said about the global death toll of landmines?

A- Regardless of the covid-19 pandemic, the number of individuals who are injured or killed by landmines or explosive devices keeps decreasing.

B- Over the past decades the figures about landmine casualties have kept on deteriorating despite the numerous landmine awareness-raising schemes.

C-What with the countless landmine awareness-raising schemes, the number of casualties from explosive weapons such as landmines has plummeted.

D- Sadly, the number of landmine casualties in on the rise again.

33- Who are the victims and why?

A- Civilians are reluctant to use emergency assistance, which accounts for the high number of victims among them.

B- Military personnel make up for the vast majority of landmine victims as they represent a primary target.

C- As breadwinners, men seek to provide for their families at the expense of their own safety.

D- About 50% of vulnerable people fall victim to explosive weapons every year.

34 - What is the exact nature of the link between the current pandemic and mine clearance?

A- Since the outbreak of the pandemic, it has become increasingly difficult to assess the amount of contamination in some parts of the world.

B- Mine clearance has gained momentum since the beginning of the pandemic.

C- Little can be said of the impact of the current pandemic on mine clearance.

D- The current pandemic has triggered off movement restrictions measures, which has helped reduce the number of landmine casualties.

35 - Who uses explosive weapons such as landmines nowadays?

- A- 33 countries have not signed the Mine Ban Treaty, and use such weapons on a regular basis.
- B- A substantial number of regular armies use landmines as a last resort.
- C- Landmine Monitor reports one regular army still using landmines in their arsenal of weapons.
- D- The Director of Human Rights Watch's Arms Division claims that a dozen states still use landmines in the world.

36- Who is who?

- A- Loren Persi works as a reporter for the UN Institute for Disarmament Research (UNIDIR) in Geneva.
- B- Loren Persi works as a research coordinator.
- C- Stephen Goose is a UN ambassador.
- D- Stephen Goose, Loren Persi and Ruth Bottomley are colleagues working in the same humanitarian organisation.

Document 9

Read the following excerpt from a book on IEDs and select the most suitable title for each paragraph.

<p>The National Academies of SCIENCES ENGINEERING MEDICINE</p> <p>THE NATIONAL ACADEMIES PRESS</p> <p>Countering the Threat of Improvised Explosive Devices: Basic Research Opportunities: Abbreviated Version (2007)</p> <p>Chapter: Summary</p> <p>https://www.nap.edu/read/11953/chapter/2</p>	<p>I- _____</p> <p><i>Improvised explosive device (IED)</i> is defined here as an explosive device that is placed or fabricated in an improvised manner; incorporates destructive, lethal, noxious, pyrotechnic, or incendiary chemicals; and is designed to destroy, incapacitate, harass, or distract. IEDs may incorporate military stores, but they are normally devised from nonmilitary components. They are as varied as “command-detonated” pipe bombs, “booby-trapped” military ordnance, and car bombs. They always contain explosive materials, detonators, and triggering mechanisms; they are often cased and may use shrapnel. The term <i>improvised</i> may apply either to the construction of the device or to its use by irregular forces. Thus, a mine produced for regular forces may be considered an IED if it is used by irregular forces, but an unmodified mine placed by regular forces is not considered an IED. Explosive devices designed to disperse chemical, biological, or radiological material are generally not classified as IEDs and were not considered for this study</p> <p>II- _____</p> <p>Throughout history, and with varying effectiveness, groups have resorted to the use of IEDs to advance a particular cause or wear down an adversary. IEDs are used by terrorists to strike soft targets and by insurgents as weapons against a stronger enemy. They can be made at relatively low cost, are relatively easy to construct and emplace, and can achieve both strategic and tactical results.</p> <p>The concerted use of IEDs to achieve an adversary’s strategic or tactical goals is referred to as an IED campaign. Two fundamental aspects of an IED campaign are its asymmetry and idiosyncratic nature.¹ Overarching the IED campaign is the sociopolitical context of the insurgency or terrorist group that carries it out. The adversary’s objective, beyond casualties, is usually to affect the psychology of the local population or the populations of other engaged nations by creating fear, instability, or discomfort. The adversary expects to move these audiences in ways advantageous to their cause. Counter-IED and counterinsurgency efforts are inexorably linked, and counterinsurgency concepts can be used as tools to defeat an IED campaign. [...]</p> <p><i>1 Asymmetry is the absence of a common basis of comparison with respect to a quality or a capability; idiosyncrasy is possession of a peculiar or eccentric pattern.</i></p>
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III-

In an IED campaign, the adversary must carry out numerous steps before initiating an IED attack. That process includes obtaining funding and bomb materials, recruiting people, constructing the device, selecting the target, delivering the device to its target, carrying out the attack, and disseminating information about the attack for propaganda or other purposes. Together, such steps make up the IED threat chain. The elements of the threat chain can be grouped into three basic components: organization, resources, and operations. The adversary must have an organization of trusted people with secure communication, connections to outside sources of support, a public interface for recruitment and publicity, and some degree of popular support or tolerance. [...]

IV-

An ideal approach to defeating the IED threat would include a set of integrated efforts aimed at squeezing the adversary at each stage of the IED threat chain. However, limitations in understanding or in technical capabilities prevent that. The limitations suggest areas of basic research that are relevant to the IED challenge, and those areas are set out below.

Relationships Between the Human Terrain and the IED Threat

The human terrain—the political, social, cultural, and economic environment—is a critical element at all stages of an IED attack, and it probably is also the most complex and the least well understood. Within the social and behavioral sciences, numerous methods can be used in novel counter-IED research. [...]

Data Acquisition, Data Fusion, and Analysis

There is a need to detect the activities that precede IED use so as to predict events well before an IED detonation. That requires a wide variety of information including data from both human and technical sources, and the systematic inference of actionable knowledge from the fusion of the data. [...]

Analytical Techniques for Assessing IED Countermeasures

Analytical methods that quantitatively assess the effectiveness of IED countermeasures are needed. There are some studies about the evaluation of counter-suicide-bombing measures in Israel, and the effectiveness of airline-passenger screening, but to the committee's knowledge there is nothing in the scientific literature regarding the evaluation of IED countermeasures.

Detection and Disruption Throughout the IED Threat Chain

There are various points in the chain of events leading up to an IED attack at which improved detection and disruption technologies might be usefully applied. For each detection opportunity, there are basic-research issues regarding the particular signatures, methods, and limits of detection. With respect to disruption, technical opportunities exist to improve current approaches or to make them more readily fielded in theater.

37- Which title is most accurate for the first paragraph?

- A- IED production
- B- The history of IED threats
- C- Defining IEDs
- D- IEDs: a growing threat

38 - Which title is most accurate for the second paragraph?

- A- IEDs: a lethal weapon
- B-The purpose of IED campaigns
- C- IEDs throughout history
- D- The future of IEDs

39- Which title is most accurate for the third paragraph?

- A- Planning an IED campaign: a long and complicated process
- B- Ways and means to gain access to terrorist groups
- C-Neutralising IEDs
- D- IEDs: a powerful deterrent

40 - Which title is most accurate for the fourth paragraph?

- A- The different stages of an IED attack
- B- Countering the IED threat
- C- The IED threat chain
- D- Detecting and defusing IEDs

Grammar and vocabulary

41. He ____ home many souvenirs from his numerous operations abroad during his time in the Navy.
- A. bring
 - B. brought
 - C. bought
 - D. take
42. The phone rang during the night and, ____ it wasn't very loud, it still woke her up.
- A. though
 - B. tough
 - C. taught
 - D. thought
43. Though the safety guideline highlights the importance of handling guns with gloves, I prefer using my ____ hands to shoot.
- A. bare
 - B. bear
 - C. beer
 - D. bra
44. The task force was ____ a French vessel, the Guépratte frigate, and was composed of the Italian frigate Scirocco, the Spanish patroller Serviola and the Spanish submarine Galerna.
- A. held by
 - B. led by
 - C. thought by
 - D. signed by
45. Mental resilience training is a ____ part of Army life.
- A. highlight
 - B. key
 - C. strategy
 - D. red
46. Oh dear! You don't look well! ____ is the trouble?
- A. how
 - B. what
 - C. when
 - D. why
47. I need to have a look at the stiches on your abdomen, can you ____ for me please?
- A. lie on your stomach
 - B. lie up
 - C. lie down
 - D. crouch up
48. ____ I have my frame now please nurse?
- A. Do
 - B. Can
 - C. Want
 - D. Reach

49. If we work _____ the assigned task will be over quicker.
- A. with ourselves
 - B. with each other
 - C. by ourselves
 - D. by each other
50. In France, we use the metric system of measuring and _____?
- A. weighing
 - B. weighting
 - C. waiting
 - D. scaling
51. The patient needs to fill in this form about his allergies _____ going to the operating theatre.
- A. before
 - B. during
 - C. by
 - D. for
52. In this book you can find _____ about the different organs of the human body.
- A. informations
 - B. information
 - C. advice
 - D. advices
53. How do you _____ the name of that medicine?
- A. spell
 - B. describe
 - C. orthography
 - D. wrote
54. The British use a _____ to erase mistakes written in pencil.
- A. scrubber
 - B. rudder
 - C. rubber
 - D. gum
55. When I want to show I agree with someone but want to do so without speaking, I _____ my head.
- A. node
 - B. nod
 - C. nodded
 - D. nodle
56. Many of the poems in this collection are written _____ Emily Dickson. She really is a great poetess!
- A. by
 - B. of
 - C. from
 - D. for

57. My patient sits up all of a sudden because she ____ sharp pains in her belly.
- A. got
 - B. get
 - C. gets
 - D. gotten
58. Hospitals both large ____ small are feeling the strain.
- A. with
 - B. and
 - C. together
 - D. or
59. The Docs is the story of four Navy Corpsmen deployed ____ Iraq.
- A. at
 - B. in
 - C. inside
 - D. under
60. Do you have ____ patients?
- A. many
 - B. much
 - C. someone
 - D. a lot
61. Come on, finish your medication, there's ____ left to drink.
- A. many
 - B. a little
 - C. a few
 - D. much
62. All military personnel must know how to apply a tourniquet in the ____ of having to treat serious haemorrhage.
- A. eventual
 - B. eventually
 - C. eventful
 - D. event
63. The doctor ____ about her patients.
- A. expressed concern
 - B. concerned
 - C. concentrated
 - D. expressed concentration
64. I wasn't concentrated on what I was doing and let my syringe ____ the table.
- A. fall off
 - B. fell off
 - C. fell through
 - D. fall threw

65. Contrary to popular belief, catheters, which is what is left in a patient's vein when they are on a drip, are very ____ and don't at all feel like you have a needle in your arm!
- A. pliant
 - B. bent
 - C. dangerous
 - D. Kinked
66. Please try to stay calm, we are going to ____ you out of here as soon as we can.
- A. direct
 - B. stretcher
 - C. drive in
 - D. fly off
67. Clinic duty must be pretty _____ after the action you lived through yesterday.
- A. happy
 - B. dull
 - C. extravagant
 - D. anxious
68. Napoleon was ____ by the Duke of Wellington at Waterloo in 1815.
- A. beated
 - B. retreated
 - C. beaten
 - D. battle
69. "I _____ a regiment as a General Duties Medical Officer."
- A. gained
 - B. regained
 - C. joined
 - D. passed
70. As colleagues, we enjoy going out for lunch together and ____ our boss.
- A. so doesn't
 - B. neither does
 - C. so does
 - D. neither doesn't
71. When patients _____ hospital they are usually seen first by one of the junior doctors on the ward where they will later receive treatment and care.
- A. leave
 - B. check out of
 - C. are admitted to
 - D. enter into
72. It is high time you _____ complaining about life and how hard it is. Wait until you go on a mission with the *green berets*; you will realise that you haven't seen anything yet!
- A. had stopped
 - B. would stop
 - C. stopped
 - D. have stopped

73. The Accident and Emergency Department is where patients who are _____ ill should go for assessment and treatment.
- A. acutely
 - B. harmfully
 - C. acute
 - D. in great
74. I'd rather you _____ smoke when you are in the house. There is such thing as passive smoking, you know!
- A. didn't
 - B. don't
 - C. can't
 - D. shall
75. You must refrain _____ tea or coffee while taking this medicine.
- A. to drinking
 - B. from drinking
 - C. drink
 - D. drinking
76. All but two of the injured were _____ from hospital within twenty-four hours.
- A. discharged
 - B. released
 - C. dismissed
 - D. allowed
77. I have been meaning to _____ polishing my shoes before troops review. I hope I have enough time left.
- A. get round to
 - B. get out of
 - C. get down
 - D. get through
78. Before Lights out, our group leader decided to _____ a coin to see who would take out the rubbish bins.
- A. throw
 - B. pitch
 - C. roll
 - D. toss
79. Private Johnson was awarded a medal in _____ of his bravery and his services to the nation.
- A. view
 - B. recognition
 - C. regard
 - D. light
80. The reconnaissance vehicle _____ a home-made bomb not far from our headquarters. A few minutes later, everyone climbed out of the wreckage completely _____,
- A. drove over/ unwounded
 - B. bumped into / intact
 - C. hit/ unscathed
 - D. touched/ intact

81. Many war reporters' best photographs are taken when they are actually _____ fire.
- A. on
 - B. under
 - C. in
 - D. to
82. The troops will perform several combat formations _____ the sound of drums.
- A. under
 - B. over
 - C. to
 - D. in
83. No matter what people say or do, Sgt Cooper _____ his life to the skills and expertise of his surgeon.
- A. owes
 - B. has lost
 - C. preserves
 - D. maintains
84. "Now, the rules of engagement are pretty clear! Under no circumstances _____ open fire _____ civilian targets unless your life is directly threatened."
- A. should you/ in
 - B. you should / at
 - C. should you/ into
 - D. are you allowed to/ on
85. My son was _____ from one of the most prestigious military academies for bad behaviour.
- A. exiled
 - B. dismissed
 - C. expelled
 - D. discharged
86. Our troops _____ enemy forces until reinforcements arrived.
- A. held off
 - B. held out
 - C. held away
 - D. held down
87. Everyone – especially flag officers- ought to be held responsible for _____ actions. I am thinking of a general who was relieved from his command after committing one of the worst _____ in the history of warfare.
- A. his/ glitches
 - B. her/ defeats
 - C. their/ blunders
 - D. his/ disasters

88. The consultant outlined the patient's _____ and asked the medical students who were with him to identify the disease.
- A. signs
 - B. comments
 - C. notes
 - D. symptoms
89. The first time private Smith took part in an obstacle course she broke her arm in two places but thankfully it did not take long before the bone would _____ .
- A. cure
 - B. seal
 - C. knit
 - D. join
90. I have been off-colour all day. I must be _____ with a cold.
- A. coming off
 - B. coming down
 - C. coming on
 - D. coming out
91. Local anesthesia is safe. You have nothing to worry about. A few hours after the injection the feeling of numbness will _____ .
- A. wear off
 - B. fade out
 - C. drop away
 - D. fall through
92. The armed forces are lending a hand to the riot police _____ keep the violent crowd under control.
- A. that presently tries to
 - B. which are attempting at
 - C. who are currently doing their best to
 - D. whom is trying to
93. The search and rescue team _____ the area for possible casualties. None has been found so far.
- A. have been seeking
 - B. have looked
 - C. have investigated
 - D. have been combing
94. Every soldier was just as _____ as _____ leader to complete the mission successfully.
- A. determined / their
 - B. serious/ her
 - C. dedicated / his
 - D. willful/ their

95. Though badly damaged by the fire after the explosion of a car bomb, our headquarters was eventually _____ and no one _____ .
- A. rebuilt / has been injured
 - B. renewed / was wounded
 - C. renovated / has been injured
 - D. rebuilt / was injured
96. A young recruit was hit by an oncoming vehicle that was driving at full speed towards our recce party last night. He was blinded by the _____ of the car's headlights and was unable to avoid the car.
- A. glare
 - B. gleam
 - C. glow
 - D. flare
97. It's no _____ having the most noble thoughts if you can't convert them into action.
- A. reason
 - B. worth
 - C. good
 - D. point
98. I guess our platoon leader would be more popular amongst us if he _____ ingratiate himself with the company commander.
- A. didn't try so hard to
 - B. tried so hard to
 - C. didn't try harder to
 - D. tried even more to
99. Now that we have identified the problem we must decide on an appropriate course of _____.
- A. progress
 - B. solution
 - C. action
 - D. development
100. Can you _____ the day without at least one cup of tea or coffee?
- A. get on
 - B. get at
 - C. get through
 - D. get by