

# 外 国 語

英 語： 1～16 ページ

1. 試験開始の合図があるまで、この問題冊子を開いてはいけません。
2. 解答時間は 75 分間です。
3. 解答用紙の記入にあたっては、解答用紙の注意事項を参照し、HBの鉛筆を使用して丁寧にマークしなさい。
4. 受験番号、氏名、フリガナを解答用紙に記入しなさい。受験番号は記入例を参考して、正しくマークしなさい。
5. マークの訂正には、消しゴムを用い、消しきずは丁寧に取り除きなさい。
6. 試験開始後、ただちにページ数を確認し、落丁や印刷の不鮮明なものがあれば申し出なさい。
7. 試験終了後、解答用紙のみを提出しなさい。問題冊子は持ち帰りなさい。
8. 解答用紙は折り曲げないようにしなさい。

解答用紙の受験番号記入例

数 字 の 位 置	受 験 番 号				
	万	千	百	十	一
1	2	3	4	5	
0	0	0	0	0	0
1	1	1	1	1	1
2	2	2	2	2	2
3	3	3	3	3	3
4	4	4	4	4	4
5	5	5	5	5	5
6	6	6	6	6	6
7	7	7	7	7	7
8	8	8	8	8	8
9	9	9	9	9	9



## SECTION 1

以下の英文（1～5）の（ ）に入る最も自然で適切な語句を選択肢の中から一つだけ選び、それぞれ解答用紙に記入しなさい。

1. ( ) that effective time management skills are essential for success at medical school.

- ① Being noted
- ② Having noted
- ③ Note
- ④ Noted
- ⑤ Noting

2. The Ebola virus can cause serious illness which could be fatal ( ) untreated.

- ① hence
- ② if
- ③ otherwise
- ④ then
- ⑤ yet

3. Developing and sticking to a regular exercise routine can be ( ) to your body.

- ① beneficial of great
- ② benefit of great
- ③ of benefit great
- ④ of great beneficial
- ⑤ of great benefit

4. ( ) adults and older children, who are able to express themselves verbally, the only way for younger children to express their discomfort is by crying.

- ① Although
- ② Despite
- ③ In spite of
- ④ Nevertheless
- ⑤ Unlike

5. Even as physicians become increasingly aware of new medical discoveries, patients can also obtain their own information from a variety of sources, ( ) questionable reliability.

- ① are of some which of
- ② of some which are of
- ③ of which are some of
- ④ some of which are of
- ⑤ which of some are of

## SECTION 2

以下の英文（6～10）には文法・語法的な誤りが一つだけ含まれている。

その誤りを含む下線部を選び、それぞれ解答用紙に記入しなさい。

6. Discussing a patient's condition over the phone is permitted as long reasonable efforts are made to protect the patient's privacy, such as speaking quietly or using the phone in a specifically designated area.

- ① Discussing a
- ② is permitted
- ③ long reasonable
- ④ such as speaking
- ⑤ phone in a

7. I will now be asking you some questions about your sexual habits. These are routine questions I ask all my patients. Any information you provide will be complete confidential. Would that be all right with you?

- ① you some
- ② ask all
- ③ complete confidential
- ④ Would that be
- ⑤ right with

8. The first two or three minutes of your presentation are crucial and can effect the presentation as a whole.

- ① two or
- ② presentation are
- ③ and can
- ④ effect the
- ⑤ as a whole

9. By using genetic screening to prevent the birth of babies with genetic disorders might result in denying the right to life of people who have these kinds of medical problems.

- ① By using
- ② screening to
- ③ babies with
- ④ in denying
- ⑤ to life

10. In Western countries, there are strict guidelines forbidden guest authorship by which the author's research supervisor is acknowledged as one of the authors even though the supervisor did not actually contribute adequately to the writing of the academic paper.

- ① guidelines forbidden
- ② by which the
- ③ is acknowledged
- ④ even though
- ⑤ writing of

## SECTION 3

以下の英文（11～15）の（ ）に入る最も自然で適切な語句を選択肢の中から一つだけ選び、それぞれ解答用紙に記入しなさい。

11. I know that everyone supports your proposal, but let me ( ) for a moment to see if there are better options.

- ① give the devil his due
- ② go to the devil
- ③ play devil's advocate
- ④ raise the devil
- ⑤ speak of the devil

12. The use of ( ) technology creates a new model for educating our students and will allow us to make even greater contributions to the international medical community.

- ① cutting-edge
- ② high-maintenance
- ③ life-threatening
- ④ out-of-pocket
- ⑤ take-home

13. I was thinking about reading ( ) on the new child abuse and neglect policies because I'm not familiar with them.

- ① about
- ② by
- ③ down
- ④ for
- ⑤ up

14. Short conversation

Patient: My husband passed away three years ago.

Doctor: ( ) I understand this must be hard for you.

- ① Don't mention it.
- ② I need it yesterday.
- ③ I'm sorry to hear that.
- ④ It's a deal.
- ⑤ Let's call it a day.

15. In English we have the saying “( )”, and in that respect, students who get involved in too many extracurricular activities and part-time jobs may struggle academically.

- ① Bad money drives out good
- ② Better late than never
- ③ Don't bite off more than you can chew
- ④ Easy come, easy go
- ⑤ Watch your back

## SECTION 4

以下の英文は plagiarism 「剽 竊・盜作」に関する文章である。文章全体を読んで (16 ~ 30) に入る最も自然で適切な語句を選択肢の中から一つだけ選びなさい。

What is ( 16 )? Taro, a former medical student at a well-known medical school in Japan, didn't know the meaning of this word and his ignorance ( 17 ) him his career before ( 18 ) even started. His mother is a world-class neurosurgeon with research publications in top ranking medical journals. His grandfather was also a brilliant surgeon so for Taro, becoming a doctor was his natural ( 19 ), or so he thought. Taro didn't really study much during his time at medical school and did just enough to ( 20 ) by. It was at the end of 2<sup>nd</sup> year that his ( 21 ) started.

He had to submit a report on glucose metabolism and as usual, he ( 22 ) the internet to find information that he copied and pasted into his ( 23 ) and submitted it without any literary ( 24 ) or citations at all. Taro submitted “his” report through the new e-Learning system that his medical school had just ( 25 ) up the week before. What he didn't know was that this e-Learning system had very ( 26 ) plagiarism detection software which automatically detected all the sections of his report that were copied from another source. He was caught ( 27 ), in other words, he was caught submitting a report which included sentences and ideas which were not his but that he wrote as if they were his. Soon after, he was ( 28 ) punished because recently in Japan, ethical standards in academic publishing have increased dramatically. Taro was kicked out of the university and he disappointed his family. After that, he was never accepted to any other universities, and he was unable to ( 29 ) a steady job. Today, he is living with his parents as he continues ( 30 ) try to find a job.

16	17	18
① e-Learning ② fate ③ neurosurgery ④ plagiarism ⑤ publishing	① cost ② fired ③ gave ④ prevented ⑤ stopped	① be ② had ③ it ④ the ⑤ those
19	20	21
① calling ② environment ③ habitat ④ history ⑤ science	① get ② give ③ go ④ learn ⑤ teach	① 3 <sup>rd</sup> year ② fantasy ③ game ④ laziness ⑤ nightmare
22	23	24
① called ② consult ③ discovered ④ hand over ⑤ searched	① assignments ② computer ③ letter ④ report ⑤ website	① referees ② references ③ referrals ④ refusals ⑤ refutations
25	26	27
① blow ② broke ③ closed ④ heat ⑤ set	① created ② faulty ③ interested ④ simply ⑤ sophisticated	① plagiarism ② plagiarize ③ plagiarized ④ plagiarizing ⑤ plagiary
28	29	30
① calm ② severely ③ slightly ④ strong ⑤ weak	① become ② career ③ doctor ④ hold ⑤ working	① as ② be ③ for ④ the ⑤ to

## SECTION 5

以下の会話文を読み、設問（31～35）に対する最も自然で適切なものを選択肢の中から一つだけ選び、それぞれ解答用紙に記入しなさい。

### Conversation 1

Doctor: Mrs Stevens, I asked you to come to the clinic today so we can discuss the results of your tests.

Patient: I know doctor, is everything all right?

Doctor: What is your understanding of the reasons why we ordered these tests?

Patient: I think you mentioned that something may be wrong with my gut because of the diarrhea I've had recently.

Doctor: Well Mrs Stevens, I'm afraid I have some bad news.

Patient: What is wrong? Is it something serious?

Doctor: Unfortunately, the tests show that you have cancer in a part of your gut called the colon.

Patient: Oh my goodness! Can it be cured? Am I going to die?

Doctor: Mrs Stevens, I understand this must be very upsetting news for you. At the moment, all we know is that there is a tumor in your gut, but we still need to find out if it has spread to any other parts of your body.

Patient: So what is going to happen to me now?

Doctor: We need to act fast Mrs Stevens, I would recommend scheduling you for surgery before the end of this week.

Patient: Anything you say doctor, I just want to get through this.

31. Which of the following is true about the conversation above?

- ① Mrs Stevens would like some medication for her diarrhea because she is not concerned about having cancer.
- ② Mrs Stevens' gut is normal but her colon is abnormal.
- ③ The cancer has spread to many parts of Mrs Stevens' body and the doctor does not recommend an operation.
- ④ The doctor is very upset because the patient has incurable colon cancer.
- ⑤ The doctor would like Mrs Stevens to have surgery before the week ends.

## Conversation 2

Robert: Hi Maria, are you going to the party tonight?

Maria: Hi Robert. No, I'm going to stay home and study for the test next week.

Robert: I think you're stressing out too much, you should try to enjoy your university years. Later when you become a doctor, you won't have any free time.

Maria: Well Robert, I understand your point of view, but I really want to be an excellent doctor and for that reason I need to focus on my studies. Besides, my parents are making a really big effort to pay for my tuition, so I don't want to disappoint them.

Robert: Wow Maria, I thought you were a fun person but I see that you're just boring.

Maria: Oh yeah, well I thought you were a serious student, but now I realize you're just lazy and childish.

32. Which of the following is true about the conversation above?

- ① Maria is going to the party because she is stressed out about the test next week.
- ② Maria is very dedicated to her studies because she wants to be a wonderful doctor.
- ③ Maria tried to convince Robert to avoid the party and study with her instead.
- ④ Robert and Maria are having an argument about paying the tuition fees for university.
- ⑤ Robert thinks Maria is not a fun person because she wants to be a doctor.

### Conversation 3

Mike: Hey Jeff, we have to hand in our science report today but I haven't finished it yet. Can you help me out?

Jeff: What do you mean?

Mike: Just let me copy some parts of yours.

Jeff: But Mike, that would be dishonest. I don't think it's a good idea.

Mike: Come on Jeff, nobody will find out.

Jeff: Sorry Mike, I can't do that. It wouldn't be ethical. Don't you remember Dr Walter's lecture on ethics last week? He said honesty is very important for doctors.

Mike: But this is not a big deal, it's just a science report. You can be ethical for important things in the future after you become a doctor.

Jeff: That's exactly the problem. If you're not ethical about the small things, you'll never be ethical about the big things. Ethical behavior is not negotiable.

Mike: Fine, just forget it.

Jeff: I really hope you think about this more carefully in the future.

33. Which of the following is true about the conversation above?

- ① Dr Walter is a very strict teacher and Mike feels that it would be inappropriate to be unethical about submitting a science report.
- ② Jeff believes that allowing Mike to copy parts of his report is unethical, so it would be inappropriate to help him.
- ③ Jeff does not agree with Mike's plan because of an ethical problem that happened during one of Dr Walter's classes.
- ④ Jeff was not sure at first but finally he agrees to forget about the lecture and help Mike.
- ⑤ Mike wanted Jeff to double-check his science report to make sure Dr Walter will give him a good grade.

#### Conversation 4

Doctor: Can you give me an update on Mr Morris?

Nurse: Sure Dr Sanders. So far, he has been recovering normally since the surgery, but I'm slightly concerned about his temperature.

Doctor: Does he have a fever?

Nurse: Well, not a high fever but his temperature has been around 37.8°C since last night.

Doctor: Hmm... That could be a problem. We need to run some tests to figure out what's going on. The surgery was successful, but I'm worried that he may have an infection.

Nurse: I understand doctor, what tests would you like to order?

Doctor: First of all, let's get blood tests done and an X-ray of his chest. I'll check the surgical wound as soon as I've finished with the surgery I've got scheduled this afternoon for Mrs Parker.

Nurse: If you sign the orders, I'll have the test results ready for you by then.

Doctor: Excellent. I should be back at around 4:30 PM. Will you still be here?

Nurse: Yes doctor, my shift finishes at 5:30 PM today.

Doctor: Thank you. Please contact me if anything else comes up.

34. Which of the following is true about the conversation above?

- ① The doctor ignored the nurse's suggestions because he believes the surgery was successful and that the patient is recovering well.
- ② The doctor is most concerned about the nurse's schedule and would like to meet her before she goes home.
- ③ The nurse told the doctor the patient's life is in danger and requires urgent treatment in order to survive.
- ④ The patient will take some tests before his surgery so the doctor can find more information about his health problem.
- ⑤ The patient's test results will be ready for the doctor after he finishes operating on another patient this afternoon.

### Conversation 5

Doctor: Hello Mr Green, how can I help you today?

Mr Green: Hi Doc, well I'm a bit embarrassed about this... I've been having some trouble with my waterworks recently.

Doctor: There's nothing to be embarrassed about. Tell me more about the problem you're having.

Mr Green: Well, it's getting harder for me to go to the washroom. I can't seem to get started and after I'm finished I still feel like I haven't emptied my bladder.

Doctor: I see, and how long have you been having this problem?

Mr Green: It started about 3 months ago, but it was very mild at first so I ignored it. Recently it has been getting worse and worse. Yesterday, I went to the toilet several times but I just couldn't urinate.

Doctor: Do you have any pain when you urinate?

Mr Green: Yes, a little, especially when I finish. Do you think it's something serious?

Doctor: Hmm... this is a very common problem in men your age. It happens when a gland called the prostate gets enlarged and starts causing trouble when you urinate.

Mr Green: So can you give me some medicine to make it better?

Doctor: Unfortunately Mr Green, we need to run some tests first to find out what the problem is and how severe it is. Also, we need to make sure it's not something more serious.

Mr Green: Okay Doc, whatever you say.

35. Which of the following is true about the conversation above?

- ① Mr Green decided to visit the doctor because he has been having problems while watching fireworks.
- ② Mr Green is very embarrassed because he has been having problems when he walks to the toilet.
- ③ Mr Green's symptoms began a few months ago and they were not severe at that time.
- ④ The doctor believes Mr Green may have a rare disease and thinks that more tests are needed.
- ⑤ The doctor is upset because Mr Green should have come sooner to avoid enlargement of his prostate.

## SECTION 6

以下の英文を読み、下線部（36～40）と最も近い意味のものを選択肢の中から一つだけ選び、それぞれ解答用紙に記入しなさい。

### Vocabulary Preview

*eminent dean: well-known head of a medical school*

*allegedly: apparently*

*rowing: sport involving long thin boats*

*apocalyptic: disastrous, terrible*

*intrinsic: core, genuine*

*befall: happen*

### Success from failure

Few doctors can honestly claim they have gone through their careers without failing something. Even the eminent dean of my medical school allegedly failed his finals because of a love affair with rowing. I managed to perform consistently poorly for the whole five years. (36) Failing seemed apocalyptic at the time; in reality it was a chance to take stock.

(37) Getting wound up was depressingly unproductive. Calm reflection and positive thinking was key: admitting why things went wrong, thinking about preventing them from happening again, and realising the positives that can be drawn. I would never have spent four extraordinary months abroad, be working in general practice in Buckinghamshire, or have met my wife, had I not failed certain exams when I did.

Apart from improving my problem solving skills and my approach to exams, I have learnt a lot about myself. I understand better my own strengths and limitations. Experiencing failure has also made me more tolerant of others: colleagues, students, and, most importantly, patients. (38) Being aware of my own fallibility makes it easier to accept shortcomings in others.

Ultimately, failure is an intrinsic part of the medicine game. (39) The best thing to do is learn from and capitalise on it. Failure, much like illness, can befall anyone at any time. A consultant in my final year said to me, “Exams? Ah, don’t worry about failing a few now and again — we’ve all done it. It hasn’t affected my career at all. (40) Breezing exams doesn’t necessarily make you a good doctor.”

*Adapted from Survive Medical School: Top Tips for Tomorrow’s Doctors by Ayan Panja  
<https://intranet.birmingham.ac.uk/as/employability/careers/documents/public/c-survivingmedicalschoolbmjguide.pdf>*

36. Failing seemed apocalyptic at the time; in reality it was a chance to take stock.

- ① Failing improved my investment skills so I could buy better stock.
- ② I thought failing was a huge problem but I realised that in fact, failing was a huge learning opportunity.
- ③ My love affair with failure enabled me to have great success in the stock market.
- ④ When I failed, I thought the situation was terrible, but it was actually an opportunity to learn from my success and improve.
- ⑤ When I failed, it seemed like a good chance to have soup.

37. Getting wound up was depressingly unproductive.

- ① Covering up my wounds after making mistakes was useless.
- ② Feeling relaxed about failing did not help to solve the problem.
- ③ Getting my clock wound up made me depressed and unproductive.
- ④ It was a terrible waste of time to get too stressed out about failing.
- ⑤ The more depressed I got about getting wound up, the more productive I became.

38. Being aware of my own fallibility makes it easier to accept shortcomings in others.

- ① Beware of short falls in people because they can lead to your own failure.
- ② I became a more understanding person after I realised I was immune to failure.
- ③ I can forgive people for coming up short after I realise that I have fallen.
- ④ To beware of failing makes it easier to short change other people.
- ⑤ Understanding my weak points helps me understand other people's weaknesses.

39. The best thing to do is learn from and capitalise on it.

- ① Capitalising letters as you have learned is the finest thing to do.
- ② It is ideal to encourage a bad situation like failing in order to grow.
- ③ Learning how to make money is the top thing to do in your life.
- ④ Learning the capitals of countries is the greatest thing to do.
- ⑤ The number one approach to improve myself is to learn from my mistakes.

40. Breezing exams doesn't necessarily make you a good doctor.

- ① Easily passing tests does not mean you will be an excellent doctor.
- ② Good doctors are not necessarily those who found breezy examinations in medical school.
- ③ Medical school examinations may have been easy but it doesn't mean you'll be a bad doctor.
- ④ Windy examinations could make you an awful doctor.
- ⑤ You may not become a good doctor if you felt breeziness during examinations.

## SECTION 7

以下の英文を読み、設問（41～45）に関して英文の内容と合致しないものを選択肢の中から一つだけ選び、それぞれ解答用紙に記入しなさい。

### Vocabulary Preview

*distress: misery, sadness*

*anguish: suffering, pain*

*reconcile: exchange, change, replace, settle*

*congruent: fitting*

*immersed: deeply involved in*

*apprehensions: worries*

*console: comfort, soothe*

*admonished: warned, advised, strongly recommended*

*manipulative: artful*

*dissect: separate*

*tangled: twisted, confused*

*magnify: increase*

*underlies: causes, brings about, can lead to*

*invasive: intrusive, disturbing*

*expanse of: wide*

The caring function of family medicine emphasizes our personalized approach to health care and our commitment to understanding the patient as a person, respecting the person as an individual, and showing compassion for his or her discomfort. Compassion, from the word *patior*, literally means “to suffer with,” to share in another’s distress and to be moved to give relief. Compassion reflects the physician’s willingness to share the patient’s anguish and to attempt to understand what the sickness means to that person.

Compassion involves both sympathy and empathy. Sympathy could be described as involving compassion but not passion. Sympathy is the sharing or understanding of the feelings of another person. Empathy, derived from the German *EinfüAduhlung*, which means “feeling into,” involves a closer and more involved understanding and identification with another person.

It has been said that more mistakes in medicine are made by those who do not care than by those who do not know.

Caring implies that empathy, which is the capacity of physicians to participate in the feelings of the patient, is best accomplished if physicians place themselves in the role of the patient in an effort to understand the patient’s feelings. Doing so will help the physician understand and perhaps accept why the patient chooses a therapeutic option different from the one recommended. Through empathy, physicians attempt to

reconcile their own beliefs about what is best with the patient's beliefs. Without an empathetic approach, physicians risk harming patients by making decisions that are not congruent with their beliefs, values, and meaning of life as they perceive it. In addition, treating patients with tenderness and caring can relieve much of their emotional suffering and contribute more to their recovery than many of the drugs we use.

Chekhov, a physician himself, thought that medical students should spend half their time learning what it feels like to be ill. Although this method for developing empathy might be extreme, it is important that the student, before becoming immersed in the technical and cognitive aspects of medicine, be able to identify with the patient's feelings, fears, and apprehensions so that the knowledge acquired during medical school can be applied meaningfully in the context of these needs. Although the physician might be able to cure a disease only occasionally, he or she can always console the patient. An unknown author has admonished the medical profession: "To cure sometimes, to relieve often, to comfort always."

The family physician is in a position to minimize the often frightening and dehumanizing experiences patients are subjected to in our modern medical system. As physicians, we must constantly strive to preserve personal dignity for patients, especially when their identities are threatened by the strange and often dispassionate hospital environment.

Long before the medical technology explosion, Osler, cautioned us to know the patient rather than the disease. Knowing the patient is part of the art of medicine. The use of sympathy, tact, and gentleness in caring for a patient is as essential to high-quality medical care as the manipulative skill of a surgeon.

Good interpersonal skills enhanced by compassion enable the physician to dissect out the tangled mass of personal difficulties that so often form the core of functional disease or magnify the symptoms of an organic condition. We all know that a broken spirit underlies a great deal of the problems we encounter in practice.

It is ironic, in this era of rapid technological advances, a time when physicians are able to do so much to help patients medically, that patient and physician each feel increasingly rejected by the other. Technology is experienced as invasive and dehumanizing. Medicine is no longer the laying on of hands; it is a physician reading signals from a computer monitor. Medicine is no longer a physician sitting at the bedside with a sympathetic hand on the patient's arm. Instead, it is a physician speaking across an expanse of desk, laboratory results in hand, at a frightened patient in need of a human touch.

*Adapted from "Compassion and the Art of Family Medicine: From Osler to Oprah" by Robert E. Rakel, MD*

*Department of Family Medicine, Baylor College of Medicine, Houston, Texas*

*J Am Board Fam Med. 2000;13(6)*

41. Regarding the concepts of sympathy and empathy, which of the following is FALSE?

- ① Sympathy and empathy are concepts that both closely relate to the perception of patients' feelings.
- ② Sympathy involves understanding patients' feelings but it leaves out passion.
- ③ Unlike empathy, sympathy is considered to be related to the concept of compassion and passion.
- ④ Unlike sympathy, empathy is considered to require a closer and more involved understanding of another person by trying to identify with him or her.
- ⑤ Unlike sympathy, empathy implies a deeper understanding of patients by participating in their emotions.

42. Regarding the concept of caring, which of the following is FALSE?

- ① In order to show it, doctors should convince patients to have the same beliefs as they do.
- ② It requires doctors to have a good understanding of their patients' beliefs.
- ③ It requires understanding, respect and compassion.
- ④ Lack of it can lead to decision making which could harm patients.
- ⑤ Lack of it can often lead to medical mistakes.

43. Regarding the education of medical students, which of the following is FALSE?

- ① A good understanding of patients' feelings, fears, and apprehensions is necessary so that medical knowledge can be applied in a meaningful way.
- ② Chekhov recommended that medical students become physically sick for half a day so they can understand patients' feelings.
- ③ Doctors should always console the patient whether the disease can be cured or not.
- ④ It is important for medical students to obtain a good understanding of patients' emotions while in medical school.
- ⑤ Students should learn to understand patients' feelings and fears before focusing on the technical aspects of medicine.

44. Regarding medical technology, which of the following is FALSE?

- ① It has diminished physical contact because of the risk of infection.
- ② It has produced an overemphasis on test results at the expense of the human touch.
- ③ It has resulted in doctors becoming less sensitive to their patients' needs.
- ④ It is seen by patients in a negative way because it takes away the human aspect of health care.
- ⑤ While it has allowed doctors to do more medically for their patients, the relationship between doctors and patients has become worse.

45. Regarding the general meaning of the entire text, which of the following is **FALSE**?

- ① Doctors must demonstrate compassion toward their patients in order to make them feel cared for and avoid the dehumanizing effects of modern medical technology.
- ② Doctors should prioritize test results over advanced medical technology in order to provide better health care.
- ③ For doctors, comforting patients is more often required than curing disease.
- ④ Good interpersonal skills are necessary for doctors to understand patients and better treat their medical problems.
- ⑤ Medical students should be taught at an early stage how to understand their patients' feelings in order to better apply medical knowledge.