



General Certificate of Education

Health and Social Care 8626/8629

HC14 Diagnosis and Treatment

Report on the Examination

June 2009

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Set and published by the Assessment and Qualifications Alliance.

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Dr Michael Cresswell Director General.

HC14: Diagnosis and Treatment

General Comments

It is pleasing to report many very high scoring scripts in this series. The vast majority of candidates were able to access all four questions and provide appropriate responses using sound technical language across the different areas of the specification. The weaker candidates, as on other papers, were limited by a lack of detailed knowledge and limited use of the appropriate technical terminology.

Question 1

In part (a)(i) most candidates were able to gain the marks for how a medical practitioner would find out about a patient's medical record by questioning and use of computer records. In part (a)(ii) some weaker candidates were limited in their answers by drifting from the focus of the question, i.e. from the use of a stethoscope itself to a description of an application of its use such as blood pressure measuring. Candidates were however, very secure in their knowledge of the different common physical examination methods a medical practitioner may employ to help with diagnosis.

The strengths and limitations of using questionnaires and alternative methods for finding out about patient satisfaction with surgery opening times were also well known by the majority. Part (c) proved more challenging especially for weaker candidates who found it difficult to provide the necessary technical detail on radionuclide scanning to score more than two or three of the eight marks available.

Question 2

More able candidates handled the data relating to drug treatments well while weaker candidates tended to restate the information from the table. It is worth noting that candidates need to explore the information in depth, looking at patterns in the data and suggesting reasons for these to score very high marks and not simply restrict themselves by making numerical comparisons.

Many candidates only gained one of the three marks available in part (b) by restricting their answers to "over the counter" or not explanations of the difference between prescription and non-prescription drugs. Relatively few candidates gained marks for outlining why some drugs need to be prescribed, e.g. because they may be unsafe if taken without medical supervision. As on previous papers, most candidates demonstrated a sound knowledge of the ways in which medical drugs are named and classified. Reasons for oral administration of drugs were also secure and most gained the mark in part (d)(ii) by suggesting a different method.

Question 3

The question on dialysis produced some very pleasing high quality responses explaining both peritoneal and haemodialysis techniques. Again weaker candidates were limited by a lack of technical detail in their answers. The advantages and disadvantages of dialysis treatment at home compared with in hospital were generally well known. In part (c), most common answers covered blood tests for glucose levels when testing for diabetes and urine tests for infections. Some candidates incorrectly suggested chorionic villus sampling as a body fluid sampling technique.

Understanding of ultrasound scanning was very good by the majority of candidates who were able to give detailed explanations of its use and scientific principles. The advantages and

disadvantages of this technique compared with X-ray and other techniques were also known by most candidates.

Only the weakest of the candidature confused ultrasound as a radioactive technique.

Question 4

Many weaker candidates confused the three surgical techniques but the majority of candidates gained at least half of the marks available in part a. Microsurgery was the least well known, while endoscopy generally best understood. In part (b)(i) many candidates limited their responses to the destructive power of radiotherapy but failed to gain the marks available for explaining how this would aid surgery either by shrinking a tumour prior to surgical removal or preventing its regrowth post surgery. The side effects of radiotherapy however were well known and many candidates scored full marks in part (b)(ii). There were many vague answers in part (c). Most candidates gained the mark available for preventing a worsening of the condition but relatively few gained marks for preventing increased costs of treatment and/or treatment becoming less effective if delayed.

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