Región de Murcia

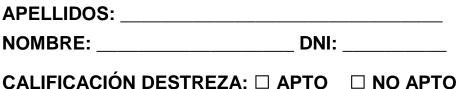
Consejería de Educación, Juventud y Deportes Dirección General de Formación Profesional y Enseñanzas de Régimen Especial

ESCUELAS OFICIALES DE IDIOMAS

PRUEBA ESPECÍFICA **DE CERTIFICACIÓN**

> **NIVEL B2 CONVOCATORIA JUNIO 2019**

COMPRENSION DE TEXTOS ESCRITOS



PUNTUACIÓN:

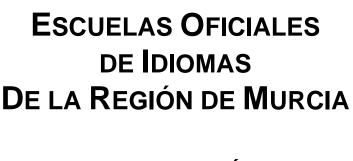
TAREAS: La prueba de Comprensión de Textos Escritos consta de TRES textos y TRES tareas.

DURACIÓN TOTAL: 70 minutos

INDICACIONES:

- Las tareas se desarrollarán en los espacios indicados.
- No escribir en las zonas sombreadas
- Emplear tinta permanente azul o negra. No usar lápiz.
- Corregir tachando el texto. No usar correctores líquidos o cintas.
- Puntuación total: 25 puntos. "Apto" ≥ 13









CORRECTOR

TASK A ▷ Read the descriptions of five different British escape rooms in TEXT 1 "Will the new Sherlock Holmes escape room be the best in Britain?". Match the statements below to their corresponding escape rooms (A, B, C, D or E) in the text. Write your final answers in the boxes provided next to each statement, as shown in example 0.

NOTE: There are two statements for each escape room.

10 points



0.	(EXAMPLE) This escape room is entirely based on a TV show.	A
1.	This escape room is set in an actual dungeon of an ancient prison.	
2.	In this escape room, the teams are given bonus time or prizes if they win their challenges.	
3.	In this escape room, no child aged under fifteen will be admitted.	
4.	This escape room includes the visit to a museum in its ticket price.	
5.	This escape room sold its tickets for the first month like hot cakes, just before its opening.	
6.	This escape room is located in a temple.	
7.	In this escape room there is a host who leads the game all the time.	
8.	This escape room is based on actual historical events in an amusing way.	
9.	This escape room is expected to become the most iconic escape room attraction in its city.	
10.	This escape room recreates exotic faraway places.	

TASK B ▷ Read TEXT 2 "New York City subway and bus services have entered 'death spiral', experts say". For items 1-10, choose the best option (A, B, C or D). Write your final answers in the grid provided below, as shown in example 0.

10 points



Example:

	0.	a. better	b. worse	c. slower	d. bad		

1.	a. requested	b. advertised	c. warned	d. approved
2.	a. rescue	b. cure	c. heal	d. repair
3.	a. increased	b. fallen out	c. dropped	d. given away
4.	a. trustworthy	b. ungrateful	c. terrific	d. unreliable
5.	a. raise	b. rise	c. promote	d. improve
6.	a. tackle	b. hide	c. ignore	d. disregard
7.	a. luxurious	b. humble	c. predictable	d. ambitious
8.	a. collected	b. launched	c. taken off	d. made up
9.	a. fine	b. pay	c. charge	d. forbid
10.	a. plus	b. in contrast to	c. considering	d. in spite of

0	1	2	3	4	5	6	7	8	9	10	SCORE:
В											/ 10
✓											/10

TASK C ▷ Read TEXT 3 "Could machines using artificial intelligence make doctors obsolete?". Choose the paragraph from the list below that best completes each gap. Write your final answers in the grid provided below, as shown in example 0.

NOTE: There is ONE extra paragraph that you do not need to use.

5 points

Α.

Machine learning is also not subject to the same level of potential bias seen in human learning that reflects cultural influences and links with particular institutions, for example.

B.

More broadly, Al's scale can be both a blessing and a curse. With Al, one poor programming choice carries the risk of harming millions of patients. Just as in drug development, we're going to need careful regulation to make sure that large-scale treatment protocols remain safe and effective.

C.

Furthermore, some patients, particularly younger ones and those with minor conditions, may rate correct diagnosis higher than empathy or continuity of care, he says.

D.

It has a "near unlimited capacity" for data processing and subsequent learning, and can do this at a speed that humans cannot match (EXAMPLE).

Ε.

Doctors can relate to the patient as a fellow human being and can gain holistic knowledge of their illness as it relates to the patient's life, they say.

F.

At the same time machines are "reading" and taking account of the rapidly expanding scientific literature.

G.

But Vanessa Rampton at the McGill Institute for Health and Social Policy in Montréal, Canada and Professor Giatgen Spinas at University Hospital in Zürich, Switzerland, maintain that machines will never replace doctors entirely because the interrelational quality of the doctor-patient relationship is vital and cannot be replicated.

0	1	2	3	4	5	SCORE:
D						OOOKL.
✓						/5

Text 1: Will the new Sherlock Holmes escape room be the best in Britain?

WILL THE NEW SHERLOCK HOLMES ESCAPE ROOM BE THE BEST IN BRITAIN?

Rachel Dixon and Jane Dunford

It's a phenomenon that started in Japan and has spread rapidly around the world: the escape room, a physical game where participants solve puzzles and riddles against the clock to break out of virtual prisons, dungeons and other "locations". The number of rooms across the UK has soared to around 1,200 this year, a growth of 40% since 2017, according to Ken Ferguson of Exit Games, and continues to grow. In 2013 there were just seven.

A. Sherlock: The Game is Now, London

Steven Moffat and Mark Gatiss, the writers of the hit TV series *Sherlock*, have teamed up with Time Run – the company behind some of London's best escape games – to create an immersive challenge based on the show. *Sherlock: The Game is Now* is a 90-minute escape experience featuring sets and locations from the series, and new video and audio from cast members. The game opens in December in a secret central London location, but tickets are already selling fast despite the high price tag – December has sold out, while January has some slots left, and tickets until the end of May went on sale this week.

"It's the most anticipated game in the history of escape rooms," says Ferguson. "The company behind it has always pushed boundaries, with amazing sets and actors – and it's the first time intellectual property has been taken and made into a game. It will appeal to escape room fans as well as dedicated Sherlock fans. London needed a flagship* game and this is going to be huge." It is not the only TV-themed escape room to open this year: the BBC is working with Escape Hunt to launch a Doctor Who game in Bristol in December, and in Birmingham, Leeds, Oxford and Reading in early 2019. From £54pp, teams of four to six, over-10s, thegameisnow.com

B. The Crystal Maze**, Manchester and London

This game faithfully recreates the cult 1990s game show, with teams guided by a Maze Master to tackle fun mental and physical challenges in four zones over about 80 minutes. The more challenges each team wins, the more crystals they accrue, and the more time they get to catch tokens in the Crystal Dome. Top scores are recorded on an online Wall of Fame. There is also a branch in London. **Ken Ferguson's expert verdict:** "As a Crystal Maze-mad kid, this is everything I wanted it to be." *Manchester from £30pp, London from £50pp, teams of one to eight, over-13s, the-crystal-maze.com*

C. Escape in the Towers, Canterbury

As locations go, this one is hard to beat: Escape in the Towers is set in the real cells of Canterbury's 1830s former jail. The sinister storyline involves a dangerous doctor and an old crime and punishment lab, and there is an hour to escape. Tickets include entry to the Westgate Towers Museum & Viewpoint — this medieval gatehouse is the biggest surviving city gate in England. Expert's verdict: "A game worthy of its amazing setting." From £19pp, teams of two to five, over-12s, onepoundlane.co.uk

D. History Mystery, Norfolk

The Queenmaker is the first escape game in a real church: St Andrew's in Blickling, near Aylsham. Anne Boleyn worshipped here as a child and the unusual plot is based on that heritage – players must solve the puzzles within the hour to advance the marriage of Anne and Henry VIII, learning a little history along the way. History Mystery has other games at heritage locations including the 14th-century undercroft*** at the Museum of Norwich and the Norwich Guildhall, and is planning new games in other historic cities. **Expert's verdict:** "The masters of making history fun." *From £12.50pp, teams of two to 10, over-10s, historymysterygame.com*

E. Extremescape, near Stockport

For spectacular set design, it is hard to beat Extremescape in Disley, Cheshire. In the Pirate Ship game, players are marooned**** in an 18th-century Spanish galleon. In the Lost Tomb, the action takes place in an abandoned Mexican gold mine and a Mayan tomb. A new Viking room will be up and running by the end of the year. Teams have 90 minutes to escape the rooms, making it a great-value experience. **Expert's verdict:** "Jaw-dropping moments and amazing sets." From £15, teams of two to eight, over-15s, extremescape.co.uk

Adapted from: https://www.theguardian.com

^{*} flagship: the best or most important product that an organization has.

^{**} maze: labyrinth.

^{***} undercroft: an underground room.

^{****} maroon (v.): leave behind, desert.

Text 2: New York City subway and bus services have entered 'death spiral', experts say

NEW YORK CITY SUBWAY AND BUS SERVICES HAVE ENTERED 'DEATH SPIRAL'. EXPERTS SAY

Tue 20 Nov 2018 11.00 GMT

New York City's subway and bus service is already in crisis. It could be getting **– 0 –**. And more expensive.

Officials at the Metropolitan Transportation Authority (MTA) – 1 – last week that without a major infusion of cash, they will have to drastically cut service or increase fares on the system that carries millions of New Yorkers around the city.

Andy Byford – the transit expert and veteran of the London Underground who was brought in almost a year ago to – **2** – the subway from a state many commuters considered rock bottom – instead had to grapple with bad news. "We don't want to go down this road. We absolutely do not," Byford, the president of New York City Transit, said at a board meeting.

The system's financial straits have gotten worse in part because it has fewer riders, and is collecting less money in fares. Expected passenger revenue over a five-year period has -3 – by \$485m since July. "They've entered this death spiral," said Benjamin Kabak, who runs the transit website Second Avenue Sagas. "The subway service and the bus service has become -4 – enough for people to stop using it. If people aren't using it, there's less money, and they have to keep raising fares without delivering better service."

The authority is proposing a fare hike that would take effect in March. One option would -5 – the basic fare for a ride to \$3 from the current \$2.75. Another option would leave the base fare the same but increase the cost of monthly passes and eliminate bonuses for riders. They are also proposing \$41m a year in service cuts, mainly increasing the time between trains and buses on some routes. And, if approved, the plan would delay the launch of faster bus routes.

Those changes will still leave the MTA with massive deficits, expected to hit nearly \$1bn a year by 2022. To — those deficits, officials say they would have to cut service more drastically, or raise fares by an additional 15%.

All those troubles come without accounting for any money to pay for Byford's – 7 – plan to actually turn around the crumbling subway system. That plan, which involves replacing an antiquated signal system that dates back to before the second world war, could cost \$40bn.

The subway hit a crisis last year, when a state of emergency was declared. Delays more than tripled from about 20,000 a month in 2012 to more than 67,450 in May 2017. The delays cost New Yorkers more than \$300m in lost work time a year, an independent budget study found. A year after an emergency plan was -8 -, more than a third of trains were still arriving late, though some modest improvements were notched this fall.

The MTA's chairman, Joe Lhota, abruptly resigned this month, effective immediately.

"Things are moving slower than they were in 1950. And at the same time we've had three fare hikes. Riders are already paying more for less. This is in the richest city in the world," said Danny Pearlstein of the Riders Alliance.

Turning things around will require a huge infusion of cash. New York's governor, Andrew Cuomo, who controls the MTA, favors congestion pricing, which would **– 9 –** drivers to enter prime areas of Manhattan.

But the congestion pricing plan went nowhere this year. After Democrats claimed control of the state senate, advocates hope it may have a better chance next year if Cuomo puts his political muscle behind it.

MTA officials point to growing competition from Uber and Lyft to explain their dropping ridership, **– 10 –** riders sneaking in without paying. Critics say it is bad service that is driving people away.

Adapted from: https://www.theguardian.com

Text 3: Could machines using artificial intelligence make doctors obsolete?

COULD MACHINES USING ARTIFICIAL INTELLIGENCE MAKE DOCTORS OBSOLETE? November 7, 2018

Artificial intelligence (AI) systems simulate human intelligence by learning, reasoning, and self-correction. This technology has the potential to be more accurate than doctors at making diagnoses and performing surgical interventions, says Jörg Goldhahn, MD, MAS, deputy head of the Institute for Translational Medicine at ETH Zurich, Switzerland.

-0-

Increasing amounts of health data, from apps, personal monitoring devices, electronic medical records, and social media platforms are being brought together to give machines as much information as possible about people and their diseases. -1-1.

"The notion that today's physicians could approximate this knowledge by keeping up to date with current medical research while maintaining close contacts with their patients is an illusion especially because of the sheer volume of data," says Goldhahn.

-2-

While the ability to form relationships with patients is often presented as an argument in favour of human doctors, this may also be their "Achilles heel," Goldhahn points out. Trust is important to patients but machines and systems can be more trustworthy than humans if they can be regarded as unbiased and without conflicts of interest.

- 3 - "In some very personal situations the services of a robot could help patients avoid feeling shame." The key challenges for today's healthcare systems are rising costs and insufficient numbers of doctors. "Introducing Al-driven systems could be cheaper than hiring and training new staff, Goldhahn says. "They are also universally available, and can even monitor patients remotely. Doctors as we now know them will become obsolete eventually."

– 4 –

They agree that machines will increasingly be able to perform tasks that human doctors do today, such as diagnosis and treatment, but say doctors will remain because they are better at dealing with the patient as a whole person.

– 5 **–**

A doctor-patient relationship where the doctor thinks laterally and takes into account an individual patient's preferences, values and social circumstances is important for healing, particularly for complex conditions, when there are symptoms with no obvious cause, and if there is a high risk of adverse effects.

Adapted from: https://www.sciencedaily.com/releases/2018/11/181107184903.htm