## TRƯỜNG ĐẠI HỌC VĂN LANG ĐƠN VỊ: KHOA NGOẠI NGỮ

# ĐỀ THI VÀ ĐÁP ÁN THI KẾT THÚC HỌC PHẦN Học kỳ 1, năm học 2024-2025

### I. Thông tin chung

Tên học phần:	Đọc-Viết-N	lgữ Pháp 1					
Mã học phần:	72ENGL30123 Số t			n chỉ:	3		
Mã nhóm lớp học phần:	241_72ENGL30123_01						
Hình thức thi: Trắc nghi	Γự luận	Thời gian làm bài:		75	phút		
Thí sinh được tham khảo tài liệu:		□ Có		⊠ k	⊠ Không		

# II. Các yêu cầu của đề thi nhằm đáp ứng CLO

Ký hiệu CLO	Nội dung CLO	Hình thức đánh giá	Trọng số CLO trong thành phần đánh giá (%)	Câu hỏi thi số	Điểm số tối đa	Lấy dữ liệu đo lường mức đạt PLO/PI
(1)	(2)	(3)	(4)	(5)	(6)	(7)
CLO3	Sử dụng kỹ năng đọc để đọc hiểu các văn bản trình độ B1-B2 (CEFR	Trắc nghiệm	50%	1-20	5	PI 5.2
CLO4	Thiết lập kỹ năng phân tích, lập luận để viết đoạn văn trình độ B1-B2 (CEFR)	Tự luận	50%	21	5	PI 6.1

### III. Nội dung câu hỏi thi

# PHẦN TRẮC NGHIỆM (20 câu hỏi + thang điểm cho từng câu hỏi: 0.25 điểm)

### **READING PASSAGE 1**

### Read the passage and choose the correct option to answer each question.

Health experts say that many of us don't get enough sleep and, that unlike previous generations—who regularly got a full eight hours—we have too many distractions. Many of us have a demanding work life, we are constantly connected to our devices, and we feel as if we are on call 24/7. All of these pressures tend to keep us up at night. We just can't seem to

switch off and unwind at the end of the day. This lack of sleep results in frustration and exhaustion for many people.

But did people really get eight solid hours of sleeping past generations? New research into sleep patterns in the eighteenth and nineteenth centuries suggests that they did not. In fact, most people did not sleep through the night. Instead, they would sleep in two separate *segments*. For the first segment, they would sleep starting when it was too dark to see until about midnight. Then they would get up and engage in quiet activities, often by candlelight, for an hour or two. They would write in their journals, check on their animals, or do some work in the kitchen to prepare for the following day. Then, they would go back to sleep for another three to four hours, waking at dawn. This practice must have worked for them. They couldn't have gotten so much work done if they were constantly exhausted.

But this all changed with the invention of electric lighting. People started staying up later and later, sometimes until midnight, so they stopped waking up in the middle of the night to complete tasks. Instead, they would sleep through the night. Also, because fewer and fewer people were working on farms, they didn't need to wake up as early to care for their animals. As a result, more and more people began to sleep in a single segment. Does that mean the eight-hour guidelines are correct? Perhaps, but research on traditional societies living in different parts of the world today suggests otherwise. The full eight hours may still be just *wishful thinking* for the average adult. Between six and seven hours is probably enough for most of us.

# According to the article, why are adults today not getting enough sleep?

A. stress from responsibilities and modern life

**B.** advancements in technology

C. an inability to keep up with work

**D.** aging population

ANSWER: A

What is the most likely meaning of a *segment*?

**A.** part of a whole

**B.** a location

C. a division

**D.** a scale

ANSWER: A

The article says that people used to wake at dawn. About what time would that have been?

**A.** around 5:00 A.M.

**B.** before 4:00 A.M.

**C.** after 10:00 A.M.

**D.** around 8:00 A.M

ANSWER: A

What does the author mean when she says that the practice of segmented sleep "must have worked for them"?

**A.** They were very productive.

- **B.** They did not complain.
- **C.** The practice continues today.
- **D.** They should have found another job.

ANSWER: A

What does the author mean when she says that research suggests that eight hours of sleep is *wishful thinking*?

- **A.** Research shows that very few people actually get this much sleep.
- **B.** No one really knows how much sleep humans need.
- **C.** Sleep needs vary from one society to another.
- **D.** A lot of people have already had eight hours of sleep.

ANSWER: A

### Which of these statements can you infer from the article?

- **A.** Most adults today probably are getting enough sleep.
- **B.** The way that adults slept in the past was probably healthier.
- C. Sleeping patterns today are probably having a negative effect on health.
- **D**. People nowadays tend to sleep more than in the past.

ANSWER: A

### Which statement best expresses the author's attitude?

- **A.** We shouldn't always take health experts' advice too seriously.
- **B.** We need to learn from the past.
- **C.** We cannot turn back the clock on technology.
- **D.** Technology can help people improve their sleep quality.

ANSWER: A

# In terms of their impact on human sleep, in what way was electric lighting like today's electronic devices?

- **A.** They have both extended the workday.
- **B.** They have made our lives easier.
- **C.** They are both technological solutions.
- **D**. They have made our lives more difficult.

ANSWER: A

### According to the article, which of these statements is TRUE?

- **A.** Sleeping six or seven hours a day might be enough for us.
- **B**. Most people in the past slept through the night.
- C. Most people in the past preferred a long nap during the day.
- **D**. We must sleep more than eight hours a day.

ANSWER: A

### According to the article, what are the consequences of lack of sleep?

- A. frustration and exhaustion
- **B**. negative attitude towards work
- C. violence
- D. unemployment

ANSWER: A

#### **READING PASSAGE 2**

### Read the passage and decide whether each given statement is True (T) or False (F)

TRUE if the statement agrees with the information FALSE if the statement contradicts the information

### How I was floored by a tick

When Allan Little began to feel ill, he knew almost immediately what it was - Lyme Disease. But getting a medical diagnosis, and treatment, took a lot longer. I'd been going for years to the same little town in New England and Lyme Disease is everywhere there. You can't walk more than a few hundred meters in the countryside without coming across a public health notice warning you not to get bitten by a deer tick.

So, the intense headache, the aching limbs, the burning joints, the ferocious fever and night sweats that hit me in a matter of hours, a few days after I'd got back to London, were all consistent with what I'd read about the condition. I went to a London GP, who wasn't convinced. She took a blood sample and advised me to go home, rest, and take paracetamol. The next day, the blood test came back. It was negative for Lyme. My condition grew worse. I could hardly stand up. I called another doctor, who came to my house. He was also skeptical. He took another blood test. This too came back negative. But he gave me a prescription for powerful painkillers which made me feel well enough to get on a train to Edinburgh, my home town.

Within three hours of arriving at Waverley Station I was an in-patient in the Infectious Diseases Department of the city's Western General Hospital: diagnosis, Acute Lyme Disease. By now I had found the tick bite and the distinctive livid red rash, about six inches in diameter. (To be fair to those London GPs, I hadn't noticed it when I'd consulted them.)

"It's attacked your liver," the Edinburgh Consultant said. "You have three distinct kinds of liver inflammation". I made a lame sick-bed joke: "You're sure that's not like Lager-and-Lime Disease then?" She laughed politely and reassured me that that would look quite different. Why then had both blood tests come back negative? Dr Roger Evans of Raigmore Hospital in Inverness is one of the UK's leading Lyme Disease researchers. "In early Lyme Disease," he told me, "the test is not reliable because no antibodies have been produced. In the first few weeks of infection, you could test negative, but still have Lyme Disease."

This is a problem for GPs, especially in urban centres where Lyme Disease is unfamiliar. Lyme is not a viral infection. It's bacterial. GPs will not prescribe antibiotics if they think you're showing symptoms of a viral infection - and it does look and feel like a bad case of flu, or chronic fatigue syndrome, neither of which can, or should, be treated with antibiotics. "In the early weeks of infection, when the blood test is not reliable," says Evans, "the GP needs to assess the patient clinically, looking for other symptoms that identify Lyme Disease." In other words, symptoms that distinguish it from flu.

If you have been bitten: Firstly, remove the tick as soon as possible - the safest way is to use a pair of fine-tipped tweezers, or a tick removal tool. Then, grasp the tick as close to

the skin as possible, pull upwards slowly and firmly, as mouthparts left in the skin can cause a local infection. Once removed, apply antiseptic to the bite area, or wash with soap and water and keep an eye on it for several weeks for any changes. Finally, Contact your GP if you begin to feel unwell and remember to tell them you were bitten by a tick or have recently spent time outdoors.

Catching it early is vital. Angela Howard felt ill with Lyme Disease in the 1990s. She had never heard of it. Her doctor, she says, told her to go home and see whether her symptoms persisted. It was only when a visiting American friend saw the distinctive rash concentric red rings around the place where the tick bite had occurred that she realised she might have Lyme Disease. She says her doctor was still reluctant to diagnose Lyme. "Doctors say you can only get this abroad - that it comes from overseas. But I hadn't been abroad. I'd been picnicking in Wiltshire." She was not treated early and her symptoms have persisted for years.

There is an accumulation of anecdotal evidence that Lyme Disease often goes undiagnosed. One problem is that no-one knows how prevalent it now is. It is not a notifiable disease in the National Health Service - doctors are not required to inform a central database when they diagnose it. So there is no reliable evidence of how widespread it is, or where in the country you are most likely to get it. Roger Evans at Raigmore Hospital wants to remedy that.

"We're using Scotland as a pilot study," he said. "We're trying to create maps of areas where there's a risk of tick exposure. We're using satellite data from the European Space Agency to create an app that will give information, but which will also be interactive, so that users can put in information about where they've been bitten and whether the Lyme Disease rash has appeared." Why has Lyme, which 30 years ago seemed largely limited to a small area of New England - Lyme is the town in Connecticut where it was first identified - now so prevalent across the continental USA and in Europe? One theory is climate change: that small gradations in climate can create new habitats for micro-organisms, or keep them alive and active for longer.

I was struck, at the time of my own treatment, that awareness was far greater in Scotland than in England and Wales. And awareness of the condition is vital to catching it early. For when you catch it early, treatment is easy, and in most cases successful. It floors you though. It took me four or five months to get my strength and stamina back. It is a debilitating and dangerous illness and there is no doubt that it is getting more common. You can get it in the Scottish Highlands, in Devon and Cornwall, in Richmond Park in London and probably in your own back garden - anywhere where there are small furry animals on whose skins a deer tick can live. If you get it, you can get treatment. But take it from me: it really helps if you know what it is you've got.

### Alan had no doubt about his illness from the beginning.

**A.** True

**B.** False

ANSWER: A

### Both blood tests were negative for Lyme Disease.

A. True

**B.** False

ANSWER: A

Alan didn't become a Waverley Station patient for more than 3 hours.

A. False

**B.** True

ANSWER: A

Blood tests were inaccurate because they were taken unprofessionally.

A. False

**B.** True

ANSWER: A

We're using satellite data from the European Space Agency to create an app that will give information

A. True

B. False

ANSWER: A

When bitten, you should remove the tick, preferably with a tool.

A. True

**B.** False

ANSWER: A

Angela Howard felt good with Lyme Disease in the 1990s.

A. False

**B.** True

ANSWER: A

It is advising to contact a doctor, if you feel ill after removing the tick.

A. True

B. False

ANSWER: A

The awareness was far greater in Scotland than in England and Wales.

A. True

B. False

ANSWER: A

It is a notifiable disease in the National Health Service.

A. False

**B.** True

ANSWER: A

# PHẦN TỰ LUẬN (1 câu + thang điểm từng câu hỏi: 5 điểm)

Choose **ONE** of the following topics to write a paragraph. (at least 150 words)

**Topic 1**: It is wrong to keep animals in zoos. Write an argumentative paragraph to express your viewpoint.

**Topic 2:** Choose two regions in Vietnam, and make a comparison in both similarities and differences. Write a comparison paragraph.

# ĐÁP ÁN PHẦN TỰ LUẬN VÀ THANG ĐIỂM

Phần câu hỏi	Nội dung đáp án	Thang điểm	Ghi chú
I. Trắc nghiệm		5.0	
Câu 1 -10	A,B,C or D	0.25	
Câu 11 - 20	True or False	0.25	
II. Tự luận		5.0	
Câu 1	Bài viết được chấm theo tiêu chí đã	5.0	
	được công bố trong ĐCCT		
	Điểm tổng	10.0	

TP. Hồ Chí Minh, ngày 16 tháng 10 năm 2024

P. Trưởng bộ môn

Giảng viên ra đề

ThS. Cao Thị Xuân Tú

ThS. Trương Hồng Ngọc