



OET SPEAKING SUB-TEST
PHYSIOTHERAPY

Free Sample · Cards 1–2 of 8 · (Roleplayer + Candidate)

2026 EDITION

FREE SAMPLE



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Free sample Cards 1–2 of 8 · full set at cliniverba.com

CARD	SCENARIO / SETTING	WHAT IT TESTS
No. 1	Outpatient Clinic – acute low back pain; wants a scan and bed rest	Red-flag screening; why imaging isn't needed; hurt vs. harm and staying active; a practical plan; expectations and safety-net.
No. 2	Outpatient Clinic – whiplash after a car accident; wants a collar	Symptoms and reassurance; whiplash and prognosis; why collars/rest are avoided; early movement; return to activity.

+ 6 more full role-plays in the complete 2026 set – get it at cliniverba.com

How to use these cards

- Each role play lasts about **5 minutes**, with **3 minutes** of preparation time first. The candidate reads only the **Candidate Card**; the interlocutor (teacher/partner) uses the **Roleplayer Card** and plays the patient.
- The candidate is the **physiotherapist** at all times. All the clinical information needed is given on the Candidate Card in brackets (e.g., ...) – the candidate only has to communicate it clearly, in the right order, with empathy.
- Cover all the TASK points, but let the patient's concerns lead the conversation: open the interaction, listen, acknowledge feelings, explain in plain language (avoid jargon), check understanding, and close by agreeing a clear plan.
- Assessment criteria to practise: **Intelligibility, Fluency, Appropriateness of language, Resources of grammar and expression**, and the clinical communication criteria (**relationship building, understanding the patient's perspective, providing structure, information gathering, information giving**).

ROLEPLAYER CARD NO. 1

PHYSIOTHERAPY

SETTING

Outpatient Physiotherapy Clinic

PATIENT

You are 42 years old and work in an office. Five days ago you strained your lower back lifting a heavy box. It is stiff and sore, but you have no pain, numbness or pins and needles in your legs. You have been resting in bed because you are afraid of doing more damage, and you think you need an MRI scan and possibly surgery.

TASK

- Describe your back pain (it started five days ago after lifting; stiff and sore; no leg symptoms) and say you have been resting in bed.
- Ask whether you need an MRI scan.
- Say you are afraid that moving will cause damage, and ask whether you should keep resting.
- Ask what you should actually do and how long it will take to get better.
- Agree to the plan and to stay active.

CANDIDATE CARD NO. 1

PHYSIOTHERAPY

SETTING

Outpatient Physiotherapy Clinic

PHYSIOTHERAPIST

This 42-year-old office worker has acute non-specific low back pain for five days after lifting, with no red-flag features and no leg symptoms. He/she has been resting in bed and expects a scan. Provide reassurance and management.

TASK

- Find out about the pain and check for red flags (e.g., onset, leg pain or pins and needles, bladder or bowel changes, numbness around the saddle area – refer urgently if present, etc.).
- Explain why a scan is not needed (e.g., most back pain is muscular and settles within weeks; scans often show harmless changes that do not change treatment, etc.).
- Reassure that hurting does not mean harming and that movement helps (e.g., staying active and avoiding bed rest speeds recovery; the back is strong, etc.).
- Give a practical plan (e.g., keep moving and return to normal activity gradually, gentle stretching and walking, pain relief such as paracetamol or ibuprofen or heat if needed, safe lifting technique, etc.).
- Set expectations and safety-net (e.g., it usually improves over a few weeks; come back or see a GP if leg symptoms or any red flags develop, etc.). Answer any questions.

ROLEPLAYER CARD NO. 2

PHYSIOTHERAPY

SETTING Outpatient Physiotherapy Clinic

PATIENT You are 34 years old and hurt your neck three days ago in a rear-end car accident. Your neck is painful and stiff. An X-ray at the hospital was normal. You are anxious and want a soft collar and to keep your neck as still as possible, and you are worried about long-term damage.

TASK

- Describe your neck pain and stiffness after the car accident three days ago.
- Say you want a soft collar and to keep your neck still to protect it.
- Ask whether you will have long-term damage.
- Ask what you should do to get better.
- Agree to the exercises and advice.

CANDIDATE CARD NO. 2

PHYSIOTHERAPY

SETTING Outpatient Physiotherapy Clinic

PHYSIOTHERAPIST This 34-year-old has a whiplash-associated neck sprain three days after a rear-end collision; the hospital X-ray showed no fracture. He/she is anxious, wants a collar and to immobilise the neck. Advise on management.

TASK

- Find out about the symptoms and concerns (e.g., pain, stiffness, headache, any arm symptoms or dizziness, worry about damage, etc.).
- Explain what whiplash is and the outlook (e.g., a strain of the neck's soft tissues, not a serious injury when there is no fracture; most people recover over weeks to a few months, etc.).
- Explain why a collar and rest are not advised (e.g., keeping the neck still stiffens it and slows recovery; gentle early movement is better, etc.).
- Give a plan (e.g., keep the neck gently moving through its range, work on posture and simple exercises, use heat and pain relief, and return to normal activities and work as able, etc.).
- Reassure and safety-net (e.g., improvement is expected; seek review if severe arm weakness or numbness or other new symptoms appear, etc.). Answer any questions.



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