

**GCE**

**Applied Science**

Unit **G622**: Monitoring the Activity of the Human Body

Advanced Subsidiary GCE

**Mark Scheme for June 2017**

**June 2017**

OCR (Oxford Cambridge and RSA) is a leading UK awarding body, providing a wide range of qualifications to meet the needs of candidates of all ages and abilities. OCR qualifications include AS/A Levels, Diplomas, GCSEs, Cambridge Nationals, Cambridge Technicals, Functional Skills, Key Skills, Entry Level qualifications, NVQs and vocational qualifications in areas such as IT, business, languages, teaching/training, administration and secretarial skills.

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This mark scheme is published as an aid to teachers and students, to indicate the requirements of the examination. It shows the basis on which marks were awarded by examiners. It does not indicate the details of the discussions which took place at an examiners' meeting before marking commenced.

All examiners are instructed that alternative correct answers and unexpected approaches in candidates' scripts must be given marks that fairly reflect the relevant knowledge and skills demonstrated.

Mark schemes should be read in conjunction with the published question papers and the report on the examination.

OCR will not enter into any discussion or correspondence in connection with this mark scheme.

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## Annotations

<b>Annotation</b>	<b>Meaning</b>
<b>DO NOT ALLOW</b>	Answers which are not worthy of credit
<b>IGNORE</b>	Statements which are irrelevant
<b>ALLOW</b>	Answers that can be accepted
( )	Words which are not essential to gain credit
—	Underlined words must be present in answer to score a mark
<b>ECF</b>	Error carried forward
<b>AW</b>	Alternative wording
<b>ORA</b>	Or reverse argument

**Subject-specific Marking Instructions****INTRODUCTION**

Your first task as an Examiner is to become thoroughly familiar with the material on which the examination depends. This material includes:

- the specification, especially the assessment objectives
- the question paper
- the mark scheme.

You should ensure that you have copies of these materials.

You should ensure also that you are familiar with the administrative procedures related to the marking process. These are set out in the OCR booklet **Instructions for Examiners**. If you are examining for the first time, please read carefully **Appendix 5 Introduction to Script Marking: Notes for New Examiners**.

Please ask for help or guidance whenever you need it. Your first point of contact is your Team Leader.

Question			Answer	Marks	AO element	Guidance
1	(a)	(i) E/U	Blood, flows/leaks (freely, from atrium to ventricle); Backflow (of blood) /blood returns;	2	AO1	A/W <b>Ignore</b> valves remain open
		(ii) E/U	Aorta;	1	AO1	More than one tick negates the mark
	(b)	(i) E/U	<i>Any one from:</i>  Does <b>not</b> show, moving/real time/live, images / blood flow; Can <b>not</b> be manipulated/moved to show different angles/views (of the valves moving);	1	AO1	<b>Accept</b> still images
		(ii) E/U	Ultrasound;	1	AO1	
	(c)	(i) A/B	QRS;	1	AO2	
		(ii) E/U	60;  (to) 80;	2	AO1	<b>Accept</b> +/- 2 for both values <b>Accept</b> 80 to 60
		(iii) C/D	Fingers/stethoscope <b>and</b> correct location of pulse; Count for appropriate time;	2	AO1	<b>Accept</b> e.g. wrist neck, ankle, brachial artery <b>Accept</b> times up to 1 minute <b>Ignore</b> repeats
	(d)	(i) C/D	<i>Any two from;</i>  Organ/tissue rejection / auto-immune response; May not, survive the surgery/make full recovery/ may die; Problems with blood pressure: Risk of infection / transplant may carry disease;	2	AO2	A/W  <b>Ignore</b> unqualified complications / stress /affect quality of life
		(ii) C/D	Younger/fitter patients may benefit more / not cost effective / other patients may have to wait longer; Patient/family may be anxious/stressed about outcome;	2	AO2	A/W <b>Ignore</b> age unqualified <b>Ignore</b> religion, poor quality of life
<b>Total</b>				<b>14</b>		

2	(a)	(i) E/U	Aerobic; Oxygen; Energy/ATP; Glucose/oxygen;	4	AO1	<b>Ignore</b> oxyhaemoglobin/nutrients
		(ii) A/B C/D E/U	<p><b>[Level 0]</b> Candidate includes <b>fewer than two</b> valid points. <i>(0 marks)</i></p> <p><b>[Level 1]</b> Candidate shows a basic understanding of how carbon dioxide is removed from the muscle cells <b>and/or</b> the blood stream including at least <b>two valid points</b> but with little or no explanation. With little evidence of a logical order. <i>(1 – 2 marks)</i></p> <p><b>[Level 2]</b> Candidate shows an understanding of how carbon dioxide is removed from the muscle cells <b>and</b> the blood stream including <b>at least four</b> valid points. The explanation follows some logical order. <i>(3 – 4 marks)</i></p> <p><b>[Level 3]</b> Candidate shows a high level of understanding and gives a good description of how carbon dioxide is removed from the muscles cells <b>and</b> the blood stream. Must include <b>at least one valid point</b> referencing <b>Figure 2.1</b>, and including <b>at least six</b> valid points. The explanation follows a clear logical order. <i>(5 - 6 marks)</i></p>	6	AO1 and AO2	<p><b>Valid scientific points:</b></p> <p><b>Carbon dioxide removed from the muscle cells</b></p> <ul style="list-style-type: none"> <li>• CO<sub>2</sub> <b>produced</b> (in muscle/mitochondria)</li> <li>• High levels of CO<sub>2</sub> in the muscle</li> <li>• Low levels of CO<sub>2</sub> in tissue fluid/blood/RBCs/ other, cells/tissues</li> <li>• CO<sub>2</sub> leaves muscle/enters blood, by <b>diffusion</b></li> <li>• Along/down, a diffusion/concentration gradient /from high to low concentration</li> </ul> <p><b>NB CO<sub>2</sub> leaves muscle/enters blood, along/down a diffusion gradient = 2 marks</b></p> <p><b>Carbon dioxide removed from the blood stream</b></p> <ul style="list-style-type: none"> <li>• At the alveoli/air sacs/lungs</li> <li>• High levels of CO<sub>2</sub> in the blood/plasma/RBCs</li> <li>• Low levels of CO<sub>2</sub> in alveoli/air sacs/lungs</li> <li>• CO<sub>2</sub> leaves by <b>diffusion</b></li> <li>• Along/down, a diffusion/concentration gradient /from high to low concentration</li> </ul> <p><b>NB CO<sub>2</sub> leaves along/down a diffusion gradient = 2 marks</b></p> <p><b>With reference to Figure 2.1</b></p> <ul style="list-style-type: none"> <li>• Muscle cells close to the capillary / small gap / thin layer of tissue fluid</li> <li>• Capillary <b>wall</b> is thin / one cell thick</li> <li>• Red blood cell close to capillary wall / thin layer of plasma</li> <li>• Short diffusion distance(s)</li> </ul>

	(b)	(i) A/B	<b>FIRST CHECK THE ANSWER.</b> If answer is <b>3.25</b> award 2 marks 6.5 x 0.5 / 6.5÷2;  3.25;	2	AO2	<b>Accept</b> calculation in range <b>6.4</b> to <b>6.6</b> (squares deep) x 0.5 (dm <sup>3</sup> ) <b>Accept</b> value in range 3.20 – 3.30
		(ii) A/B C/D	Male value = <u>6dm<sup>3</sup></u> / <u>6.0dm<sup>3</sup></u> / <u>6.00dm<sup>3</sup></u> ; Female value = <u>4.25dm<sup>3</sup></u> ; This value closer to female/further from male;	3	AO1 and AO2	<b>Reject</b> a range for male or female values  A/W
		(iii) C/D	Breathing rate = <u>12</u> ; breaths per, minute/min / breaths min <sup>-1</sup> ;	2	AO2	<b>Ignore</b> bpm
		(iv) E/U	Increase/become greater/rise;	1	AO1	
		(v)	<b>Gaseous exchange at lungs</b>  Increase/greater rate, of gaseous exchange/diffusion; <b>More</b> oxygen/carbon dioxide delivered to alveoli/air sacs/respiratory surface/lungs;  <b>Muscle contraction</b> <i>Any two from:</i>  Greater rate/faster/stronger/more (muscle contraction)/work harder; <b>More</b> oxygen delivered / carbon dioxide removed; Greater rate of aerobic respiration / more energy/ATP released (for muscle contraction);	4	AO2	<b>Maximum 2</b> marks for each part of question  A/W <b>Ignore</b> more oxygen, needed/inhaled   AW <b>Ignore</b> more oxygen needed
			<b>Total</b>	<b>22</b>		

3	(a)	(i) E/U	To avoid contamination/infection of the <b>nurse</b> ;  To avoid contamination/infection of the <b>patient/blood/sample</b> ;	2	AO1	A/W <b>Accept</b> if 'contamination' not attributed = contamination of <b>nurse</b> <b>Ignore</b> unqualified biological hazard  <b>Accept</b> blood borne disease / correctly named pathogen/disease								
		(ii) E/U	<table border="1"> <thead> <tr> <th>Step</th> <th>Procedure</th> </tr> </thead> <tbody> <tr> <td>1</td> <td><i>Clean and prick the skin</i></td> </tr> <tr> <td>2</td> <td>Put biosensor/strip in contact with blood/damaged blood vessel/finger;</td> </tr> <tr> <td>3</td> <td>Obtain a reading / record results;</td> </tr> </tbody> </table>	Step	Procedure	1	<i>Clean and prick the skin</i>	2	Put biosensor/strip in contact with blood/damaged blood vessel/finger;	3	Obtain a reading / record results;	2	AO1	A/W  <b>Ignore</b> clinistix Mark across rows 2 and 3 if steps in correct sequence
Step	Procedure													
1	<i>Clean and prick the skin</i>													
2	Put biosensor/strip in contact with blood/damaged blood vessel/finger;													
3	Obtain a reading / record results;													
		(iii) E/U	Sharps/yellow/biohazard bin;	1	AO1	<b>Accept</b> special bin <b>Ignore</b> unqualified bin								



	(b)	(i) A/B C/D	<p>Any three from:</p> <table border="1" data-bbox="367 248 1104 858"> <thead> <tr> <th data-bbox="367 248 745 288">Type 1 diabetes</th> <th data-bbox="745 248 1104 288">Type 2 diabetes</th> </tr> </thead> <tbody> <tr> <td data-bbox="367 288 745 400">Insulin, dependent/given</td> <td data-bbox="745 288 1104 400">Non-insulin dependent / insulin not (always) given / controlled by diet</td> </tr> <tr> <td data-bbox="367 400 745 512">Juvenile/early years onset/born with it</td> <td data-bbox="745 400 1104 512">Late/adult onset/starts any time / obesity;</td> </tr> <tr> <td data-bbox="367 512 745 703">Cannot be prevented/cannot be cured</td> <td data-bbox="745 512 1104 703">Can be delayed with exercise/healthy lifestyle/ avoiding excess sugar in diet;</td> </tr> <tr> <td data-bbox="367 703 745 858">Body cells, destroy/attack insulin-producing cells / auto-immune response / produce, little/no insulin</td> <td data-bbox="745 703 1104 858">Do not produce enough insulin/ body/cells less responsive to insulin;</td> </tr> </tbody> </table>	Type 1 diabetes	Type 2 diabetes	Insulin, dependent/given	Non-insulin dependent / insulin not (always) given / controlled by diet	Juvenile/early years onset/born with it	Late/adult onset/starts any time / obesity;	Cannot be prevented/cannot be cured	Can be delayed with exercise/healthy lifestyle/ avoiding excess sugar in diet;	Body cells, destroy/attack insulin-producing cells / auto-immune response / produce, little/no insulin	Do not produce enough insulin/ body/cells less responsive to insulin;	3	AO1	<p>Must have correct <b>paired statements</b> for each mark</p> <p><b>Ignore</b> refs to genetics / inheritance <b>Ignore</b> develops unqualified</p> <p><b>Ignore</b> unqualified preventable</p> <p><b>Accept</b> other correct actions to delay onset of type 2</p> <p><b>Ignore</b> insulin does not work in body</p>
Type 1 diabetes	Type 2 diabetes															
Insulin, dependent/given	Non-insulin dependent / insulin not (always) given / controlled by diet															
Juvenile/early years onset/born with it	Late/adult onset/starts any time / obesity;															
Cannot be prevented/cannot be cured	Can be delayed with exercise/healthy lifestyle/ avoiding excess sugar in diet;															
Body cells, destroy/attack insulin-producing cells / auto-immune response / produce, little/no insulin	Do not produce enough insulin/ body/cells less responsive to insulin;															
		(ii) A/B	<p>Any two from:</p> <p>To check sugar/glucose/carbohydrate intake; To give dietary advice/plans; Excess sugar intake is linked to the onset of type 2 diabetes; The diet may relate to her glucose levels;</p>	2	AO2	<p>A/W</p> <p><b>Ignore</b> see how much insulin needed</p>										
	(c)	A/B C/D	<p>Any two from:</p> <p>To establish a 'zero/fasting level' / starting point / baseline reading; To compare, starting level/recovery time, with others; To avoid glucose/sugar in food affecting test results;</p>	2	AO1	<p><b>Accept</b> unfair/unreliable test</p>										

	(d)	A/B C/D	<p><b>[Level 0]</b> Candidate includes <b>fewer than two</b> valid points. <b>(0 marks)</b></p> <p><b>[Level 1]</b> Candidate gives a basic description <b>and/or</b> comparison of the curves including <b>at least two valid points</b> but with little or no explanation. With little evidence of a logical order. <b>(1 – 2 marks)</b></p> <p><b>[Level 2]</b> Candidate gives a description <b>and</b> comparison of the curves, including <b>at least four valid points</b>, with some logical order. <b>(3 – 4 marks)</b></p> <p><b>[Level 3]</b> Candidate describes <b>and</b> compares <b>and</b> explains the curves. They should include <b>at least six valid points</b>, with <b>at least one ‘Explanation’ point</b>. Follows a clear logical order. <b>(5 - 6 marks)</b></p> <p><b><i>NB explanation point(s) can contribute to scores at levels 1 and 2</i></b></p>	6	AO1 and AO2	<p><b>Valid scientific points:</b></p> <p><b>Description</b></p> <ul style="list-style-type: none"> <li>• Starting level of 8</li> <li>• Increase to approx.* 15 / almost doubles / for *100 minutes / accept any correct value increase at named time</li> <li>• Decrease to *14 / to *125 minutes/the end / does not return to normal / accept any correct value decrease at named time</li> </ul> <p><b>Comparison</b></p> <ul style="list-style-type: none"> <li>• Healthy patient’s levels lower overall</li> <li>• Healthy patient starts with, lower level/ 4 /* half</li> <li>• Healthy patient level increases to, *6.5/to *30 mins/ increases less / accept any correct paired values/differences between values at named time</li> <li>• Healthy patient’s level drops sooner/at *30 mins</li> <li>• Healthy patient returns to starting level/4</li> </ul> <p><b>Explanation</b></p> <ul style="list-style-type: none"> <li>• Glucose (drink) taken into blood</li> <li>• Low/no insulin levels released</li> <li>• Limited effect on glucose levels</li> <li>• Some glucose, metabolised/oxidised/converted to glycogen/used up/broken down OR <i>vice versa</i> in context of glucose levels continuing to rise</li> <li>• Less able to respond to insulin</li> </ul> <p><b><i>NB * = approx. = realistic values in the region of</i></b></p>
			<b>Total</b>	<b>18</b>		

4	(a)	(i) A/B C/D	<p>Any six from:</p> <table border="1" data-bbox="421 292 1113 1054"> <thead> <tr> <th data-bbox="421 292 772 331">X-ray scanner</th> <th data-bbox="772 292 1113 331">MRI scanner</th> </tr> </thead> <tbody> <tr> <td data-bbox="421 331 772 408">Uses <b>ionizing</b> radiation</td> <td data-bbox="772 331 1113 408">Non-<b>ionizing</b></td> </tr> <tr> <td data-bbox="421 408 772 485">Does not use magnetism</td> <td data-bbox="772 408 1113 485">Uses magnetism</td> </tr> <tr> <td data-bbox="421 485 772 671">High bone definition/bone seen clearly / poor soft tissue resolution/soft tissue not seen clearly</td> <td data-bbox="772 485 1113 671">Good soft tissue resolution/soft tissue seen clearly</td> </tr> <tr> <td data-bbox="421 671 772 711">2D image/not 3D</td> <td data-bbox="772 671 1113 711">3D image</td> </tr> <tr> <td data-bbox="421 711 772 788">Scan completed in a few seconds/quick</td> <td data-bbox="772 711 1113 788">Scan completed in 10 – 15 minutes/ longer</td> </tr> <tr> <td data-bbox="421 788 772 865">May create birth defects/diseases</td> <td data-bbox="772 788 1113 865">No biological hazards</td> </tr> <tr> <td data-bbox="421 865 772 978">Does not involve confined space / not noisy</td> <td data-bbox="772 865 1113 978">Confined space / claustrophobic / noisy</td> </tr> <tr> <td data-bbox="421 978 772 1054">Can be used with metal implants</td> <td data-bbox="772 978 1113 1054">Cannot be used with metal implants</td> </tr> </tbody> </table>	X-ray scanner	MRI scanner	Uses <b>ionizing</b> radiation	Non- <b>ionizing</b>	Does not use magnetism	Uses magnetism	High bone definition/bone seen clearly / poor soft tissue resolution/soft tissue not seen clearly	Good soft tissue resolution/soft tissue seen clearly	2D image/not 3D	3D image	Scan completed in a few seconds/quick	Scan completed in 10 – 15 minutes/ longer	May create birth defects/diseases	No biological hazards	Does not involve confined space / not noisy	Confined space / claustrophobic / noisy	Can be used with metal implants	Cannot be used with metal implants	6	AO1	<p>A/W Each response marked independently Two marks can be awarded in one box, e.g. MRI = non ionising, as uses magnets = 2 marks <b>Accept</b> ionised = ionising</p> <p><b>Accept</b> correct named example of a soft tissue</p> <p><b>Ignore</b> cost/availability</p>
X-ray scanner	MRI scanner																							
Uses <b>ionizing</b> radiation	Non- <b>ionizing</b>																							
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Can be used with metal implants	Cannot be used with metal implants																							

		<p><b>(ii)</b> <b>A/B</b> <b>C/D</b></p> <p><b>Use of X-ray scanner</b></p> <p>To detect, broken/damaged bones / damaged cartilage;</p> <p><b>Use of MRI scanner</b></p> <p>To detect damage to, soft tissue/internal organs/blood vessels/nerves / detect internal bleeding;</p>	2	A02	<p>Benefit <b>must</b> be linked to type of scanner A/W</p> <p><b>Ignore</b> broken hand</p> <p><b>Accept</b> any correctly-named soft tissue <b>Ignore</b> unqualified internal injuries</p>
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<b>(iii) E/U</b>				4	<p>Mark only as <b>paired statements</b>.</p> <p>Each correct pair of statements = 1 mark.</p> <p><b>Maximum</b> 2 marks for Tomek and 2 marks for Radiographer  <b>Accept</b> not in for too long</p> <p><b>Ignore</b> harm</p> <p><b>Ignore</b> uncooperative</p> <p><b>Ignore</b> wearing headphones</p> <p><b>Ignore</b> extracted metal injuring radiographer</p>
	<b>Procedure</b>	<b>Risks</b>	<b>Ways of minimising the risks</b>		
	<b>X-ray</b>	<b>Tomek</b> Cell/DNA, damage/mutation / cancer	Avoid excessive use of X-rays / use alternative scan / wear protective clothing		
		<b>Radiographer</b> Cell/DNA, damage/mutation / cancer	Leave the room / wear protective clothing / wear detection badge		
	<b>MRI</b>	<b>Tomek</b> <i>Any one from:</i> Ear damage / noise causes stress	Wear ear plugs / headphones		
		Panic attack / claustrophobia	Calm the patient / play music / sedation / alternative scan / panic button		
		Cannot fit into the space	Use a, modified/larger, MRI scanner		
		Damage to tissue due to metal objects/implants	Remove metal objects / avoid using MRI scan if metal implants /check, with patient/medical history		
		<b>Radiographer</b> <i>Any one from:</i> Ear damage / noise causes stress	Wear ear plugs / leaves the room		
		Electrocution	Effective training		

	<b>(b)</b>	<b>(i)</b> E/U	<table border="0" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th style="text-align: center;">Label</th> <th style="text-align: center;">Organ</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">A</td> <td style="text-align: center;">Rib</td> </tr> <tr> <td style="text-align: center;">B</td> <td style="text-align: center;">Heart</td> </tr> <tr> <td style="text-align: center;">C</td> <td style="text-align: center;">Right lung</td> </tr> <tr> <td style="text-align: center;">D</td> <td style="text-align: center;">Vertebral column</td> </tr> </tbody> </table>	Label	Organ	A	Rib	B	Heart	C	Right lung	D	Vertebral column	4	AO2	Each correct line = 1 mark
Label	Organ															
A	Rib															
B	Heart															
C	Right lung															
D	Vertebral column															
		<b>(ii)</b> C/D	<p><i>Any two from:</i></p> <p>Vertebral column/label A, is on the lower part/at bottom, of image;</p> <p>Heart/ label D is, on the upper part of the image/above vertebral column;</p> <p>Right lung is on the left side of the image;</p> <p>Sternum is at top of image;</p>	2	AO2	A/W										
<b>Total</b>			<b>18</b>													

5	(a)	(i) E/U	Blood pressure = mmHg; Temperature = 36.5; (to) 37.2;  Peak flow = $\text{dm}^3 \text{ min}^{-1}$ ;	4	AO1	One mark for <b>each</b> correct value of the temperature range <b>Accept</b> +/- 0.1 °C variation <b>Accept</b> values only in correct position, if only one value correct
		(ii) C/D	Fastest rate / greatest force; (Of) air breathed out/blown out/exhaled/expired;	2	AO1	Accept forced expiratory flow rate = 2 marks
	(b)	(i) A/B	<i>Any two from:</i>  Pad/cuff (on arm); Leads/wires are fully connected; Equipment at zero; Wait until, Ben/athlete, using the cycle at a, fixed/constant speed before taking the readings;	2	AO2	A/W  <b>Reject</b> on leg <b>Ignore</b> check equipment not faulty  <b>Ignore</b> repeats
		(ii) E/U	<b>Description</b> Increase;  <b>Explanation</b> <i>Any two from:</i>  Heart contracts, more strongly/harder; Increased, stroke volume/cardiac output; The heart/pacemaker/SAN receives nervous stimulation; The heart/pacemaker/SAN receives hormones/adrenaline; More carbon dioxide released/generated during exercise;	3	AO1	<b>Maximum</b> 1 mark for correct explanation of blood pressure if blood pressure is <b>decreasing</b> .  <b>Ignore</b> faster / slower  <b>Accept</b> message = nervous stimulation
		(iii) E/U	<i>Any two from:</i>  Could fall off/may need to be held on; Sweat (on forehead); Inaccurate/imprecise/qualitative not quantitative / subjective; Not representative of, positioned close to, core/internal, temperature;	2	AO1	A/W  <b>Ignore</b> unreliable

	(c)	(i) E/U	Any two from: To test; To repeat / retest / do more tests; To save/compare/for reference OR in case one lost/damaged;	2	AO1	A/W  <b>Accept</b> to test in another lab/to test twice
		(ii) E/U	ELISA;	1	AO1	<b>Accept</b> phonetic spelling of ELISA <b>Accept</b> immunological assay/ serological test / enzyme linked immunosorbent assay
		(iii) C/D	<b>1. Performance-enhancing drug</b>  Any one from: Unfair / cheating; Damaging/harmful/unhealthy effect;	1	AO2	A/W
			<b>2. Diseases such as hepatitis</b>  Any one from: Identify the virus; Give treatment; May cause underperformance; Reduce spread (of hepatitis/it/virus);	1	AO2	A/W
			<b>Total</b>	<b>18</b>		



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