

# **Cambridge Technicals Health and Social Care**

Unit 4: Anatomy and physiology for health and social care

Level 3 Cambridge Technical in Health and Social Care **05831 - 05833 & 05871** 

Mark Scheme for January 2024

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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.

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### MARKING INSTRUCTIONS

#### PREPARATION FOR ON-SCREEN MARKING

#### **RM ASSESSOR**

- 1. Make sure that you have accessed and completed the relevant training packages for on-screen marking: *RM Assessor Assessor Online Training*; *OCR Essential Guide to Marking*.
- 2. Make sure that you have read and understood the mark scheme and the question paper for this unit. These are posted on the RM Cambridge Assessment Support Portal <a href="http://www.rm.com/support/ca">http://www.rm.com/support/ca</a>
- 3. Log-in to RM Assessor and mark the **required number** of practice responses ("scripts") and the **number of required** standardisation responses.

#### PREPARATION FOR PAPER-BASED MARKING

#### **MARKING**

- 1. Mark strictly to the mark scheme.
- 2. Marks awarded must relate directly to the marking criteria.
- 3. The schedule of dates is very important. It is essential that you meet the RM Assessor 50% and 100% (traditional 40% Batch 1 and 100% Batch 2) deadlines. If you experience problems, you must contact your Team Leader (Supervisor) without delay.
- 4. If you are in any doubt about applying the mark scheme, consult your Team Leader by telephone or the RM Assessor messaging system, or by email.

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#### 5. Crossed Out Responses

Where a candidate has crossed out a response and provided a clear alternative then the crossed out response is not marked. Where no alternative response has been provided, examiners may give candidates the benefit of the doubt and mark the crossed out response where legible.

### **Rubric Error Responses – Optional Questions**

Where candidates have a choice of question across a whole paper or a whole section and have provided more answers than required, then all responses are marked and the highest mark allowable within the rubric is given. Enter a mark for each question answered into RM assessor, which will select the highest mark from those awarded. (The underlying assumption is that the candidate has penalised themselves by attempting more questions than necessary in the time allowed.)

# **Multiple Choice Question Responses**

When a multiple choice question has only a single, correct response and a candidate provides two responses (even if one of these responses is correct), then no mark should be awarded (as it is not possible to determine which was the first response selected by the candidate).

When a question requires candidates to select more than one option/multiple options, then local marking arrangements need to ensure consistency of approach.

# **Contradictory Responses**

When a candidate provides contradictory responses, then no mark should be awarded, even if one of the answers is correct.

Short Answer Questions (requiring only a list by way of a response, usually worth only one mark per response)

Where candidates are required to provide a set number of short answer responses then only the set number of responses should be marked. The response space should be marked from left to right on each line and then line by line until the required number of responses have been considered. The remaining responses should not then be marked. Examiners will have to apply judgement as to whether a 'second response' on a line is a development of the 'first response', rather than a separate, discrete response. (The underlying assumption is that the candidate is attempting to hedge their bets and therefore getting undue benefit rather than engaging with the question and giving the most relevant/correct responses.)

Short Answer Questions (requiring a more developed response, worth two or more marks)

If the candidates are required to provide a description of, say, three items or factors and four items or factors are provided, then mark on a similar basis – that is downwards (as it is unlikely in this situation that a candidate will provide more than one response in each section of the response space.)

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Longer Answer Questions (requiring a developed response)

Where candidates have provided two (or more) responses to a medium or high tariff question which only required a single (developed) response and not crossed out the first response, then only the first response should be marked. Examiners will need to apply professional judgement as to whether the second (or a subsequent) response is a 'new start' or simply a poorly expressed continuation of the first response.

- 6. Always check the pages (and additional objects if present) at the end of the response in case any answers have been continued there. If the candidate has continued an answer there, then add a tick to confirm that the work has been seen.
- 7. Award No Response (NR) if:
  - there is nothing written in the answer space

Award Zero '0' if:

• anything is written in the answer space and is not worthy of credit (this includes text and symbols).

Team Leaders must confirm the correct use of the NR button with their markers before live marking commences and should check this when reviewing scripts.

- 8. The RM Assessor **comments box** is used by your team leader to explain the marking of the practice responses. Please refer to these comments when checking your practice responses. **Do not use the comments box for any other reason.**If you have any questions or comments for your team leader, use the phone, the RM Assessor messaging system, or e-mail.
- 9. Assistant Examiners will send a brief report on the performance of candidates to their Team Leader (Supervisor) via email by the end of the marking period. The report should contain notes on particular strengths displayed as well as common errors or weaknesses. Constructive criticism of the question paper/mark scheme is also appreciated.

- 10. For answers marked by levels of response:
  - a. To determine the level start at the highest level and work down until you reach the level that matches the answer
  - b. To determine the mark within the level, consider the following

Descriptor	Award mark
On the borderline of this level and the one below	At bottom of level
Just enough achievement on balance for this	Above bottom and either below middle or at middle of level (depending on number of marks
level	available)
Meets the criteria but with some slight	Above middle and either below top of level or at middle of level (depending on number of
inconsistency	marks available)
Consistently meets the criteria for this level	At top of level

1. Annotations to be used when marking scripts.

Annotation	Meaning
<b>~</b>	Correct response
×	Incorrect response
+	Positive
	Negative
L1	Level 1
L2	Level 2
L3	Level 3
^	Omission mark
BOD	Benefit of doubt given (this annotation counts as a mark so do not tick as well)
REP	Repeat
TV	Too vague
SEEN	Noted but no credit given

Q	uesti	ion		Ans	swer	Marks	Guidance					
1	(a)		One	One mark per correct answer as shown in the table.		<b>5</b> (5x1)	Do not accept any other answer					
				Statement	Structure		If more than one answer is given in a box e.g. retina/macula:					
								A light-sensitive surface covering the back of the eye where rays of light focus.	retina √		No mark should be awarded.	
				A small area at the back of the eye that contains a high concentration of photoreceptors.	macula √							
										Can be adjusted by muscles to control the amount of light that enters the eye.	iris √	
									Can change shape to focus light rays entering the eye.	lens √		
				Watery fluids that keep the eye in shape.	humours √							

Question	Answer		Guidance	
1 (b)*	<ul> <li>Level 3 (7–8 marks)</li> <li>detailed discussion of effects of cataracts AND impact on lifestyle AND</li> <li>linked and relevant to cataracts with clear use of terms</li> <li>There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated.</li> <li>Level 2 (4–6 marks)</li> <li>sound discussion of effects of cataracts AND impact on lifestyle AND</li> <li>mostly relevant to cataracts with some use of terms</li> <li>There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence.</li> <li>Sub max of 4 for effects or impacts on lifestyle done well.</li> <li>Level 1 (1–3 marks)</li> <li>Brief attempt at a discussion of effects of cataracts AND / OR impact on lifestyle but answer may be list like.</li> <li>AND</li> <li>may not be linked to cataracts</li> <li>There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant.</li> <li>0 marks - No response worthy of credit.</li> </ul>	8	Indicative points (not exhaustive):  Effects of cataracts e.g.  affects the lens  e.g. cloudy lens  blurred vision / unclear vision  difficult to see in dim light / bright light  dazzled by bright lights  may be difficult to see colours / appear faded / brown tinge  double vision  trouble seeing at night  halo around lights  can lead to blindness  Impacts on lifestyle e.g.  recovery period following surgery (surgery alone is TV)  need regular check-ups / appointments (time consuming)  inability to work  inability to take part in social activities  difficulty watching television  inability to use computer screen  problems reading  problems driving  may become housebound / fear of going out  mental health issues e.g. self-esteem / anxiety  greater risk of trips / falls	

Q	Question		Answer			Guidance
1	(c)		Statement	True (T) or False (F)	<b>4</b> (4x1)	Do not accept any other answer.
			Diabetes is diagnosed when tests show high concentrations of glucose in the blood.	True / T ✓		If more than one answer is given e.g. T/F: No mark should be awarded.
			Insulin injections can be used to treat diabetes.	True / T ✓		
			Obesity is a risk factor for diabetes.	True / T ✓		
			Type 2 diabetes can be caused by damage to cells in the kidney.	False / F ✓		

# Unit 4 Mark Scheme January 2024

Q	uesti	on	Answer	Marks	Guidance
2	(a)		central ✓ spinal cord ✓ sensory ✓ synapse ✓	<b>4</b> (4x1)	Do not accept any other answer.  Answers must be in order shown here.  If more than one answer is given in a space e.g. spinal cord/sensory:  No mark should be awarded.
2	(b)	(i)	Three marks for the outline of biological cause of MS Any three marks from: autoimmune disease ✓ immune system attacks neurones (nerve cell) / Schwann cells / myelin sheath ✓ damages myelin sheath ✓ inflammation occurs ✓ scar tissue is formed ✓ disrupts transmission of (nerve) impulses ✓	<b>3</b> (1x3)	Do not accept risk factors e.g. genetics  Must say immune system or white blood cells to be credited for this point. Your body attacks is TV

2 (b) (ii)*  Level 3 (7–8 marks)  • detailed understanding of impacts on Charlie's lifestyle, with explanation of why MS results in these impacts.  AND  • Uses accurate terminology.  There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated.  Level 2 (4–6 marks)  • sound understanding of impacts on Charlie's lifestyle.  AND  • Lises mostly accurate terminology   I	Question	Answer	Marks	Guidance
There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence.  Level 1 (1–3 marks)  Brief attempt on the impacts on Charlie's lifestyle but answer may be list like or unstructured.  AND  AND  Attempts to use terminology but may not be accurate.  There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant.  O marks - No response worthy of credit.  There is an intent social activities  have to attend appointments  reliant on family / carer to help with tasks  may need wheelchair.  embarrassment / anxiety  social isolation  may become housebound  Explanations:  eyesight become blurred  cognitive function impaired  coordination / balance issues  muscle stiffness  mobility issues  loss of bladder/bowel control  loss of vision  impulses are disrupted  can be relapsing remitting / flare ups	2 (b) (ii)*	<ul> <li>detailed understanding of impacts on Charlie's lifestyle, with explanation of why MS results in these impacts.</li> <li>AND</li> <li>Uses accurate terminology.</li> <li>There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated.</li> <li>Level 2 (4–6 marks)</li> <li>sound understanding of impacts on Charlie's lifestyle.</li> <li>AND</li> <li>Uses mostly accurate terminology.</li> <li>There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence.</li> <li>Level 1 (1–3 marks)</li> <li>Brief attempt on the impacts on Charlie's lifestyle but answer may be list like or unstructured.</li> <li>AND</li> <li>Attempts to use terminology but may not be accurate.</li> <li>There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant.</li> </ul>	8	Examples of possible impacts on lifestyle (not exhaustive):  tiredness difficulty walking inability to do simple tasks side-effects of medication loss of independence frustration depression unable to do hobbies inability to work affects social activities have to attend appointments reliant on family / carer to help with tasks may need wheelchair. embarrassment / anxiety social isolation may become housebound  Explanations: eyesight become blurred cognitive function impaired coordination / balance issues muscle stiffness mobility issues loss of bladder/bowel control loss of vision impulses are disrupted

Q	uesti	on		Answer	Marks	Guidance
2	(c)	(i)	One mark for each correct	et answer, <b>four</b> required.	<b>4</b> (4x1)	Do not accept any other answer.
			Structure	Letter		If more than one answer letter is given: No mark should be awarded.
			cerebellum	V ✓		
			cerebral cortex	<b>W</b> ✓		
			corpus callosum	Z√		
			hypothalamus	Y		
			medulla (oblongata)	<b>X</b> ✓		
2	(c)	(ii)	pituitary ✓		<b>1</b> (1x1)	Do not accept any other answer.
						If more than one box is ticked: No mark should be awarded.

Question	Answer	Marks	Guidance
2 (c) (iii)*	<ul> <li>Level 3 (5–6 marks)</li> <li>detailed description of both structures' role in control and coordination</li> <li>AND</li> <li>Clear use of terms</li> <li>There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated.</li> <li>Level 2 (3–4 marks)</li> <li>sound description of both structures' role in control and coordination</li> <li>AND</li> <li>Some use of terms.</li> <li>There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence.</li> <li>Sub max of 3 for one structure done well.</li> <li>Level 1 (1–2 marks)</li> <li>Brief attempt at a description on either or both structures role in control and coordination but may be list like or unstructured.</li> <li>AND</li> <li>May not use accurate terms.</li> <li>There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant.</li> <li>0 marks - No response worthy of credit.</li> </ul>	6	Indicative points (not exhaustive):  Cerebellum e.g.

Question		ion	Answer	Marks	Guidance
2	(d)		fixed ✓	<b>1</b> (1x1)	ALLOW immoveable or fibrous  If more than one answer is provided:
					Mark the first response only.

Q	uesti	ion	Answer	Marks	Guidance
3	(a)	(i)	pleural membrane ✓	<b>1</b> (1x1)	For an incorrect answer use the cross.  No other answers are acceptable.  If more than one answer is given e.g. bronchiole/bronchus:  No mark should be awarded.
3	(a)	(ii)	trachea ✓	<b>1</b> (1x1)	For an incorrect answer use the cross.  No other answers are acceptable.  If more than one answer is given e.g. bronchiole/bronchus:  No mark should be awarded.
3	(a)	(iii)	bronchiole ✓	<b>1</b> (1x1)	For an incorrect answer use the cross.  No other answers are acceptable.  If more than one answer is given e.g. bronchiole/bronchus:  No mark should be awarded.
3	(a)	(iv)	larynx ✓	<b>1</b> (1x1)	For an incorrect answer use the cross.  No other answers are acceptable.  If more than one answer is given e.g. bronchiole/bronchus:  No mark should be awarded.

Q	uesti	on	Answer	Marks	Guidance
3 3	(b)	on (i)	ANY TWO FROM:  Adaptation of alveoli:  many of them / numerous Explanation for role in gas exchange:  increases amount of gaseous exchange taking place  Adaptation of alveoli:  large surface area Explanation for role in gas exchange:  increases surface over which gaseous exchange can take place so increases exchange  Adaptation of alveoli:  thin walls / walls are one cell thick Explanation for role in gas exchange:  shortens distance for gases to pass through / shortens diffusion distance  Adaptation of alveoli:  lined with fluid / water Explanation for role in gas exchange:  gases dissolve into fluid to increase exchange  Adaptation of alveoli:  surrounded by capillary network Explanation for role in gas exchange:  gases cross easily to and from blood stream	Marks 4 (2x2)	Two marks: An adaptation identified with an explanation that shows understanding  One mark: An adaptation identified with little or no explanation.  Only mark the first two adaptation  Alveoli are thin is TV (must link to walls)
			gases cross easily to and from blood stream		

	Ques	tion	Answer	Marks	Guidance
3	(b)	(ii)*	<ul> <li>Level 3 (5–6 marks)</li> <li>detailed explanation of effects of emphysema on the body AND</li> <li>linked and relevant to emphysema with clear use of terms</li> <li>There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated.</li> <li>Level 2 (3-4 marks)</li> <li>sound explanation of effects of emphysema on the body AND</li> <li>mostly relevant to emphysema with some use of terms</li> <li>There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence.</li> </ul>	6	For levels 2 and 3 effects must include explanations  Indicative points (not exhaustive):  Effects:  • shortness of breath / difficulty breathing / wheezing  • tightness in chest  • persistent cough  • mucus / phlegm in cough  • sputum is yellow  • frequent chest infections  • symptoms do not improve / worsen  • weight loss  • fatigue / tiredness  • reduced cognitive function  • cyanosis (blue fingers and lips)
			<ul> <li>Level 1 (1–2 marks)</li> <li>brief attempt at explanation of effects of emphysema on the body</li> <li>AND</li> <li>may not be linked to emphysema and answer may be list like</li> <li>There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant.</li> <li>O marks - No response worthy of credit.</li> </ul>		<ul> <li>airways are obstructed / narrowed</li> <li>airways are inflamed</li> <li>air sacs / alveoli lose their shape / elasticity</li> <li>larger air spaces in lungs</li> <li>not enough air getting into lungs</li> <li>less surface area for gaseous exchange</li> <li>less / ineffective gas exchange</li> <li>air trapping</li> <li>less oxygen transfer to the blood</li> </ul>

Q	Question		Answer	Marks	Guidance
3	(b)	(iii)	<ul> <li>ANY ONE FROM:</li> <li>physiotherapy / breathing exercises</li> <li>oxygen therapy / oxygen cylinders</li> <li>lung transplant / bullectomy (lung volume reduction)</li> <li>anti-inflammatory medication / steroids</li> <li>inhalers / /bronchodilators</li> </ul>	<b>1</b> (1x1)	Any <b>one</b> treatment for <b>one</b> mark.  If more than one answer is provided: Mark the first response only.  Surgery and medication alone are TV
3	(c)		plasma √	<b>1</b> (1x1)	No other answers are acceptable.  If more than one box is ticked:  No mark should be awarded.

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Question	Answer	Marks	Guidance
3 (d) (ii)*	<ul> <li>Level 3 (5–6 marks)</li> <li>detailed description of heart action, linked and relevant to the three terms given.</li> <li>AND</li> <li>clear use of terms</li> <li>There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated.</li> <li>Level 2 (3–4 marks)</li> <li>sound description of heart action that is mostly relevant to three terms given.</li> <li>AND</li> <li>some use of terms</li> <li>There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence.</li> <li>Level 1 (1–2 marks)</li> <li>brief attempt at description of heart action that may not be linked to terms</li> <li>AND</li> <li>answer may be list like</li> <li>There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant.</li> <li>0 marks - No response worthy of credit.</li> </ul>	6	Indicative points (not exhaustive):  Double pump ref:  double circulation/blood pass through the heart twice in a full circuit of the body  one circuit to lungs / pulmonary circulation  one circuit to body / systemic circulation  oxygenated and deoxygenated blood separated  right side deoxygenated blood  left side oxygenated blood  systole ref:  atrial systole  both atria contract at same time  push blood into ventricles  ventricular systole  both ventricles contract at same time  blood from left ventricle pushed out to body  blood from right ventricle pushed out to lungs  diastole ref:  muscle of the atria and ventricles relax  heart refills with blood  others:  deoxygenated blood pumped from heart to lungs  deoxygenated blood returns from body to heart  oxygenated blood pumped from heart to body  oxygenated blood returns to heart from lungs

Q	Question		Answer	Marks	Guidance
3	(e)	(i)	Any one CHD medication from:     statins / cholesterol lowering drugs     ACE inhibitors     nitrates     anti-coagulants / blood thinners / aspirin / warfarin     angina pump     calcium channel blockers     beta blockers     blood pressure medication	<b>1</b> (1x1)	Any <b>one</b> medication for <b>one</b> mark.  For an <b>incorrect</b> answer use the <b>cross</b> .  If more than one answer is provided: Mark the first response only.

Questic	on	Answer	Marks	Guidance
3 (e)	(ii)	Two marks for a description. One monitoring method required.  Monitoring method:  blood tests  Description:  blood samples taken to check levels of e.g. protein / cholesterol / fats  Monitoring method:  ECG / electrocardiogram  Description:  electrodes attached to the chest  which measures electrical activity of heart / heart rhythm cardiac cycle  can detect abnormalities / damage to heart muscle  Monitoring method:  angiogram  Description:  wire passed from artery in wrist/thigh into the heart  dye is injected  blood vessels shown on special x-ray machine  shows narrowed arteries in the heart	<b>2</b> (1x2)	Two marks: A monitoring method identified and description that shows understanding.  One mark: A monitoring method identified with little or no description OR description of method with incorrect / no method identified.

Question	Answer	Marks	Guidance	
3 (e) (iii)	ANY ONE FROM:      smoking     obesity / overweight     diabetes     hypertension / high blood pressure     high cholesterol levels / high fat diet     genetics / family history     ageing     inactivity     excessive alcohol consumption     stress	<b>1</b> (1x1)	Any one risk factor for one mark.  If more than one answer is provided: Mark the first response only.	

Q	Question		Answer		Marks	Guidance
4	(a)		One mark for each correct answer, fou	ark for each correct answer, <b>four</b> required.  (4x1)		No other answers are acceptable.
			Function	Liver OR Pancreas		If more than one answer is given: No mark should be awarded.
			Assimilating glucose into cells	Liver ✓		
			Deaminating amino acids	Liver √		
			Producing bile to emulsify fats	Liver ✓		
			Producing digestive enzymes	Pancreas √		
			Producing hormones to regulate blood glucose	Pancreas		
4	(b)	(i)	Two marks for a description. One requ  villi / finger-like projections		<b>2</b> (1x2)	Two marks: Identifies villi and a description of change to lining of small intestine.
			have become flattened / damaged / area	/ shorter / less surface		One mark: A change to lining of small intestine identified with little or no description OR identifies that villi line the small intestines.

Q	Question		Answer	Marks	Guidance	
4	(b)	(ii)	Any two marking points from: e.g.  less absorption of nutrients due to reduced surface area into the blood stream / lacteals nutrients can't be assimilated / can't be taken into cells cells don't receive nutrients e.g. glucose for respiration	<b>2</b> (1x2)	Two marks for an explanation.	

Question	Answer		Guidance	
4 (c)*	<ul> <li>Level 3 (5–6 marks)</li> <li>detailed description of social and dietary impacts that is linked and relevant to coeliac's disease.</li> <li>AND</li> <li>clear use of terms</li> <li>There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated.</li> <li>Level 2 (3–4 marks)</li> <li>sound description of social and dietary impacts that is mostly relevant to coeliac's disease.</li> <li>AND</li> <li>some use of terms</li> <li>There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence.</li> <li>Sub max of 3 if social impacts or dietary impacts done well.</li> <li>Level 1 (1–2 marks)</li> <li>brief attempt at description of social AND/OR dietary impacts that may not be linked to coeliac's disease.</li> <li>AND</li> <li>may be list like</li> <li>There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant.</li> <li>0 marks - No response worthy of credit.</li> </ul>	6	(not exhaustive):  Social impacts e.g.  must take when eating out in restaurants / cafes must take care when getting takeaway meals must take care when eating with friends / family may become isolated fear / anxious of eating out embarrassment  Dietary impacts e.g. can't eat wheat products gluten-free diet need to read menus carefully need to read food labels carefully can't use e.g. oil which has had gluten products in it named digestive problem e.g. anaemia / osteoporosis must take vitamin / mineral supplements gluten free food is more expensive	

	Questic	n	Answer	Marks	Guidance
5	(a)	(i)*	<ul> <li>Level 3 (5–6 marks)</li> <li>detailed explanation for causes and effects that are linked and relevant to osteoporosis</li> <li>AND</li> <li>clear use of term</li> <li>There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated.</li> <li>Level 2 (3–4 marks)</li> <li>sound explanation for causes and effects that is mostly relevant to osteoporosis.</li> <li>AND</li> <li>some use of terms</li> <li>There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence.</li> </ul>	6	<ul> <li>(not exhaustive) points are interchangeable and do not need to be separated but some explanation required</li> <li>e.g. caused by</li> <li>ageing</li> <li>menopause</li> <li>decline in oestrogen / testosterone</li> <li>medication e.g. cancer drugs</li> <li>lifestyle e.g. diet low in dairy products</li> <li>eating disorder e.g. anorexia</li> <li>lack of exercise</li> <li>low peak bone mass</li> <li>genetic inheritance e.g. poor bone density</li> <li>coeliac disease</li> <li>long term alcohol abuse</li> </ul>
			<ul> <li>Level 1 (1–2 marks)</li> <li>attempt at explanation with cause and/or effects</li> <li>AND</li> <li>may be description or list like</li> <li>There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant.</li> <li>0 marks - No response worthy of credit</li> </ul>		<ul> <li>e.g. explanations</li> <li>loss of bone density / enlarge holes in bones</li> <li>loss of proteins in bone</li> <li>loss in bone strength</li> <li>osteoblast activity lower than osteoclast</li> <li>e.g. effects</li> <li>brittle / weak bones</li> <li>bones that break easily</li> <li>curvature of spine</li> </ul>

Q	uesti	ion	Answer	Marks	Guidance
5	(a)	(ii)	load-bearing exercise   For / positive:   increase / maintain bone density ✓     strengthens muscles and bone ✓     additional overall health benefits ✓     falls less likely ✓     Against / negative:     injury ✓     may be difficult if have other conditions / if immobile ✓     requires willpower ✓     bone strengthening medication and supplements     For / positive:     increase / maintain bone density ✓     calcium / vitamin D tablets readily available ✓     vitamin D helps absorption of calcium     easy to take e.g. tablet form ✓     relatively inexpensive ✓     Against / negative:     problems taking supplements e.g. at same time / remembering to take them ✓     take a long time to work / long time to see benefits ✓     named side effects; stomach pain / digestive issues / headaches / fatigue ✓     hormone therapy     For / positive:     increase of maintain bone density ✓     increase ostrogen levels ✓     increase osteoblast activity ✓     HRT can also help with menopausal symptoms ✓     parathyroid hormone regulates calcium in body ✓     Against / negative:     HRT can only be used for women ✓     parathyroid only used when other treatments don't work ✓     named side effects e.g. nausea ✓     increased risk of developing other conditions e.g. cancer / blood clots ✓	3 (1x3)	Three marks: a sound evaluation that includes at least three statements including BOTH positive AND negative statements for one of the treatments for osteoporosis  Two marks: an evaluation that includes a positive and negative statement OR at least two positive or negative statements for one of the treatments  One mark: one statement about one treatment for osteoporosis only credit first treatment covered

Question		Answer	Marks	Guidance
5 5	(b)	Component Cartilage Synovial capsule Synovial fluid  Component Cartilage  Attaches muscle to bone Reduces friction	3 (3x1)	One mark per link.  DO NOT ACCEPT: more than one link between boxes.
		tendon Lubricates the joint		

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