2010 年度

英 語

注 意 事 項

- 1. 試験開始の合図があるまで、この問題冊子を開いてはいけない。
- 2. この問題冊子は13頁ある。試験開始後,頁の落丁・乱丁及び印刷不鮮明,また解答用紙の汚れ等に気付いた場合は,手を挙げて監督者に知らせること。
- 3. 監督者の指示にしたがって解答用紙の下記の該当欄にそれぞれ正しく記入し、 マークせよ。
- ① 受験番号欄

受験番号を 4 ケタで記入し、さらにその下のマーク欄に該当する 4 ケタをマークせよ。 (例) 受験番号 0025 番 \rightarrow 0 0 2 5 と記入。

- ② 氏名欄 氏名・フリガナを記入せよ。
- 4. 受験番号が正しくマークされていない場合は、採点できないことがある。
- 5. 解答は、解答用紙の解答欄にHB鉛筆で正確にマークせよ。

例えば 30 と表示された問題の正答として④を選んだ場合は、次の(例)のように解答番号30の解答欄の④を濃く完全にマークせよ。薄いもの不完全なものは解答したことにはならない。

(例)	解答 番号		解		***************************************	答			櫚		
	30	1	2	3		6	6	7	8	9	10

- 6. 解答を修正する場合は必ず「消しゴム」であとが残らないように完全に消すこと。鉛筆の色や消しくずが残ったり、 のような消し方などをした場合は、修正したことにならない。
- 7. 解答はそれぞれの解答番号につき一個だけ選ぶこと。二個以上**マーク**した場合は無解答とみなされる。
- 8. 試験終了後, 問題冊子および解答用紙を机上に置き, 試験監督者の指示に従い 退場しなさい。

第1問 の各群の単語①~⑤のうちから、下線部の発 次の 音が冒頭に示された単語の下線部と同じであるものを1つずつ選びなさい。 1 c<u>u</u>shion furious ruin brush 6 useful rude 2 tombmobile motion 3 motive motormove 3 3 jockey onion donor h<u>o</u>ney only pony 4 strength smooth fil<u>th</u>y south wor<u>th</u>y weal<u>th</u>y 3 exhibition execution examination exhaustion existence exotic

	り 次の a ~ f の各英プ のを,それぞれ下の ① ~				2
_ Y	·		1		
_	· L	6	me completely by su	_	
(1)	did	②.	left	(3)	made
4)	shook	(5)	took		
b. Y	You look worried. Do y	ou l	nave something on you	rГ	7 ?
1	heart	2	mind	3	spirit
4	soul	6	thought-		
c. I	'd like to have him	8	us with the work.		
1	help	2	helped	3	helping
4	to be helping	6	to help		
d.	9 being angry,	he l	listened to me patiently	y.	•
1	Although	2	As for	3	Because of
4	In spite of	6	On account of		
e. I	wish I 10 back	the	clock and do it all ove	r aga	ain.
1	can turn	2	could turn	3	had turned
4	have turned	6	turned		
	he question 11 plan till next month.	at 1	today's meeting is wl	nethe	er we should postpone
1	discussing	2	is discussed	3	to be discussed
4	to be discussing	6	to discussing		

第3問	別 次のa~fの各英文	文の 2	空欄を,それぞれ下の()~(の語または語句で埋め
て最近	適な英文にするとき,	1	2 ~ 23 にプ	人る言	吾または語句を示しなさ
67°					
a, F	He turned out the light		12 13]_	
1	as	2	electricity	3	not
4	so	6	to	6	waste
					ş
b. S	Someone threw a stone	e at	the speaker. It		
and	his glasses	15].		
0	him	2	hit	3	knocked
4	off	6	on	6	the head
	·				
c. I	saw the accident, bu	t it			
evic	dence as there were pl	enty	of other witnesses.		
0	for	2	give	3	me
4	necessary	6	to	6	wasn't
1 7					
a. I	t surprised him that t				
_	ambition is to get	_		_	
(1)	many	(2)	only	(3)	people
(4)	so	(5)	whose	6	young
,	_				
	he Japanese prime m				
_	h the American preside	_		_	
0	a meeting	2	an interpreter	3	by
4	having	6	precedent	6	with
					•

f. At the time of being	22	_ of the medical profession, he
solemnly 23	to the service	e of humanity.
1 admitted	2 a member	3 as
his life	6 promised	6 to dedicate

第4問 次の文章を読み, 24 ~ 37 に入る最も適当な語句を下の ①~ ①の中から1つずつ選びなさい。ただし、同一番号を重複使用した解答は無効とします。

注:

"Raindrops Keep Falling on My Head": B. J. Thomas が歌った「雨にぬれても」という曲で、映画 Butch Cassidy and the Sundance Kid(『明日に向って撃て』: 1969 年)の主題歌。

meteorologist: 気象学者。

In the movie Butch Cassidy and the Sundance Kid, there's a famous song called "Raindrops Keep Falling on My Head". 24 , raindrops also fall on the front and back and sides of your body — and you get wet. , people prefer not to get wet in the rain, and run away from some raindrops that they would have otherwise caught: When most of us get caught in the rain without an umbrella, we make a mad instinctive dash for the nearest natural instinct to run correct? 27 , what is the best tactic to use when you're caught in the rain - run or walk? It's actually quite a tricky question. , you'll spend less time in the rain. 29 , you'll run into some raindrops that would have otherwise 30 you. Which effect is greater?

Two meteorologists, Thomas C. Peterson and Trevor W.R. Wallis, from the National Climatic Data Center in North Carolina in the USA decided to do an experiment. 31 they were roughly the same build, so they bought two identical sets of sweat shirts, pants and hats. They also bought two large plastic bags to wear underneath these clothes, so that any rain which ended up on their clothes would not get soaked into their underclothes. They then measured out a 100-meter track behind their office and waited for some rain. 32, some heavy rain came along—falling at around 18 millimeters per hour. They made sure that they weighed the clothes both 33 the rain.

Dr. Wallis ran the hundred meters at around 4 meters per second (about 14.4 kilometers per hour), and his clothes absorbed 130 grams of water. Dr. Peterson walked his hundred meters at a much more leisurely 1,4 meters per second (about 5 kilometers per hour), but his clothes soaked up 217 grams of , running meant that you got 40 percent 35 , which was water. pretty close to their predicted 44 percent. So if you run in heavy rain (as compared with walking), you'll stay somewhere between 30 percent and 50 percent drier. The greatest 36 is achieved by running in heavy windy rainy conditions, and by leaning forward. There is 37 in light rain, with no wind, and when you stay nearly vertical.

benefit before and after caught If you run Instead of walking less dry less improvement less wet Luckily missed On the other hand Scientifically shelter shutter Soon Unfortunately Usually

・第5問 次の文章の内容と合っていると思われるものを、下に示した①~@のなかから8つ選びなさい。ただし、解答の順序は問いませんが、同一番号を重複使用した解答は無効とします。 38 ~ 45

注:

cram schools:詰め込み主義の学校,学習塾,予備校。

pharmaceutical faculty:薬学部。

protein:プロテイン、タンパク質。

Japan is increasingly feeling the pain of an acute shortage of medical doctors. In an effort to perform first aid, the Education, Science and Technology Ministry recently decided to expand the annual quota for medical students accepted by universities. This is a bold and complete change on the part of the government, which has been capping the overall number of doctors in the country. In other words, the sudden decision to offer a structural remedy to ease the situation indicates how bad it has become.

From the point of view of patients, the ministry's decision is a welcome one. But this reminds me of an idea I have cherished for many years: The medical care crisis is a unique opportunity for us to review the qualifications of future doctors. I don't mean that the existing criteria to become a qualified doctor are wrong, but my long-cherished idea is that medical students should be chosen from a more diverse talent pool.

Under the current university entrance examination criteria, schools of medicine are seen as the peak of science studies. Cram schools offer special teaching programs for students aiming to enter medical schools, providing extensive studies in mathematics and physics, which constitute the basics of science. I hear that talented students taking medical school exams tend to feel a particular satisfaction in passing the two most difficult tests—math and physics. However, once they enter medical schools, math and physics knowledge

is not required so much as in the cases of students at science, technology and pharmaceutical faculties. What they have to learn, instead, are the complex physical and mental aspects of people.

In a sign that the emphasis on math and physics for medical students is shifting, at least one school of medicine no longer includes the two subjects in its exams. Instead, it places importance on Japanese ability and the interview portion of the screening. Similarly, another school of medicine has been keen to accept applications from university students studying in other departments. This school also does not place priority on math and physics, instead focusing on the applicants' breadth of general academic knowledge.

It is possible to say that whereas all science studies pursue universal truth, medicine represents knowledge that has to apply to individual patients. Of course, humans are nothing but matter, in a sense, simply following the mathematical and physical arrangement of proteins and fat. But the individual patients doctors treat are not so simple. Patients have physical constitutions and symptoms specific to each of them. Even if general treatment methods are used, it is indispensable for doctors to tailor such treatment to meet each patient's unique conditions. In addition, personal histories and living environments differ from person to person. Medicine, therefore, is defined as not only part of science but also part of integrated human studies.

To understand each patient's condition, it is not enough to apply analytical methods based purely on math and physics. Such analyses are fit for something that can be broken down into its component parts and then reassembled and restored to its original state. A mechanical approach such as this cannot be applied to human beings. What is necessary for treating people is a method that enables a doctor to immediately gauge a patient's entire condition and intuitively determine the nature of the problem — which is often very subtle.

In fact, doctors diagnose cases by seeing and touching the affected parts of patients or by laboring through the results of X-rays and other tests. In essence,

they apply a comprehensive and intuitive diagnostic approach. Advanced technologies, such as the magnetic resonance imaging (MRI) system that produces highly analytical images of affected parts, can be used, but the intuition of a doctor fostered through experience is indispensable to accurately and quickly read those MRI data. Such an intuition obviously has nothing to do with the talent required to pass required math and physics exams. It is regrettable that the existing medical school entrance exam system ignores from the very start a key indicator of the great potential in students striving to be doctors.

Another point we should keep in mind with regard to medicine is that people are different from the objects of pure science — human beings speak and express themselves. Patients tell doctors of their symptoms because they want doctors to understand their problems. Also, patients want doctors to learn of their mental state on top of diagnoses of their illnesses.

As a clinical philosopher emphasizes in his book *Kiku Koto no Chikara* (*The Power to Listen*), listening to patients itself can be perceived as part of the cure from a patient's point of view. A situation in which patients feel that their problems are understood and shared by doctors can be as much a source of relief for them as medicine. This was the situation commonly seen a long time ago, before the development of modern medicine, and practitioners were not as busy as today's doctors. In those days, many of those who were famous as excellent doctors earned that reputation thanks to their willingness to listen to patients. Doctors need to have excellent speaking skills. Human beings are so sensitive that they readily sense who is truly willing to understand them and tend to speak only to such people. To be a good listener, a doctor has to be a good speaker. In this regard, it makes sense to add Japanese lessons to medical education to help students develop a good bedside manner.

While the lack of doctors is an acute issue that must be remedied urgently, medical education does take time. One emergency step to cope with the matter is to raise the quota of medical students accepted from other university

departments. If this were to happen, the gap between science students and liberal arts students would be narrowed—and the door for the latter should be opened as widely as possible.

45

- The government has always been trying to increase the number of medical students, but medical universities have not been ready for it.
- It is not surprising that the Education, Science and Technology Ministry decided to expand the annual quota for medical students, because the ministry has been increasing the overall number of doctors gradually.
- The government decided to expand the annual quota for medical students accepted by universities because a severe shortage of medical doctors has affected social life in the country.
- The shortage of medical doctors in Japan is too serious for the government to make a move about it at this stage.
- The author thinks that patients should welcome the ministry's sudden decision to increase the number of doctors, because doctors will start to compete with each other and thus lower medical fees.
- The author thinks of the problem of lack of doctors as a good opportunity to change the qualifications of doctors to be.
- The author has cherished the idea that medical students should be chosen from a more diverse talent pool because he realizes that the current criteria to qualify as doctors cannot function any more.
- The author thinks that math and physics ability is required more of medical students than of students at science, technology and pharmaceutical faculties.
- According to the author, medical students have to learn the complex physical and mental aspects of people more than math and physics.
- A few schools of medicine do not place priority on math and physics because they consider that the two subjects have nothing to do with medical education.

- The author considers that medicine represents knowledge concerning universal truth that individuals patiently pursue.
- Medical doctors have to keep in mind that each individual patient they treat is nothing but matter simply following the mathematical and physical arrangement of proteins and fat.
- When medical doctors apply general treatment methods, they have to modify them to individual patients' conditions.
- The author defines medicine as not only part of science but also part of integrated human studies, because individual patients are extremely complex and different from each other.
- Human beings are so fragile that they can be broken down into their component parts but the development of modern medicine makes it possible to assemble the parts again and restore them to their original state.
- The author considers that the intuition of a doctor fostered through experience is indispensable but that intuition cannot have anything to do with human nature.
- The author regrets that most schools of medicine do not recognize the importance of intuition in students striving to be doctors at screening.
- (b) The intuition of a doctor fostered through experience is essential because it can be obtained through an accumulation of math and physics knowledge.
- Math and physics ability is required of students at entrance exams because that ability will still be necessary for them to apply an intuitive diagnostic approach.
- Patients tell doctors of their symptoms because they want doctors to diagnose their illnesses, to understand their problems, and to learn of their mental state.
- (a) A long time ago, many doctors who were considered excellent could earn much money as well as fame just by listening to their patients.

- ② A good doctor has to be a good listener by learning to be a good speaker, because patients readily sense who is truly willing to speak to them and to apply several remedies to them.
- The author thinks that the introduction of Japanese lessons into medical education can help produce better doctors who are good speakers and listeners with good bedside manners.
- The author suggests as one emergency step to remedy the lack of doctors that schools of medicine should accept more applicants from other university departments, in particular science, technology and pharmaceutical departments.