令和８年度
東北医科薬科大学 大学院 医学研究科
医学専攻博士課程
一般・社会人入学試験（二次募集）
【語学（英語）】

注意事項

１．試験中に問題冊子の印刷不鮮明、ページの落丁・乱丁および解答用紙の汚れ等に気づいた場合は、手を挙げて知らせること。

２．不正行為に対しては厳正に対処します。

３．解答終了後は本冊子を置いておくこと。

受験番号：	氏　名：

次の英文を読み、(1) から (10) の質問に対する解答を解答用紙の所定欄に記述しなさい。

著作権の都合上、省略

Question (1)

What is the main purpose of the hospital discharge summary?

A. To collect data for AI model development

B. To evaluate physicians' communication skills

C. To summarize hospital performance statistics

D. To record patients' insurance details for billing

E. To facilitate safe transition of care and share essential clinical information

Question (2)

According to the study by Small et al., what was a distinctive feature of their LLM summarization tool?

A. It automatically corrected all factual errors

B. It included linked citations to original clinical notes

C. It produced summaries only from structured data fields

D. It relied on external reviewers for content validation

E. It removed clinician input to test AI independence

Question (3)

When comparing LLM-generated and clinician-written hospital courses (HCs), what result did the study report?

A. LLM HCs needed more editing but were more cohesive

B. Clinician HCs were shorter and less complete

C. LLM HCs required less editing but contained fabricated information

D. Clinician HCs were significantly preferred in overall quality

E. LLM HCs were rejected by reviewers due to citation issues

Question (4)

Why did the researchers limit the time that residents could review and edit each summary?

A. To encourage participants to focus on key details

B. To prevent bias from excessive exposure to the same cases

C. To reduce variability in editing style among residents

D. To simulate real clinical workflow constraints

E. To test how fatigue affects editing quality

Question (5)

Why do the authors argue that continuous monitoring of AI summarization tools is essential?

A. Because AI systems can increase data storage costs

B. Because AI summaries are legally restricted in hospitals

C. Because AI tools cannot adapt to new medical terminology

D. Because clinicians may overtrust AI outputs and adopt its errors

E. Because regulatory approval must be renewed annually

Question (6)

Which of the following best summarizes the author's main argument about the use of large language models (LLMs) in clinical writing?

A. LLMs can completely replace clinicians in generating accurate and consistent medical documentation.

B. LLMs improve writing quality but offer little benefit in clinical efficiency.

C. LLMs are promising tools for clinical documentation, but their outputs must be carefully verified by humans.

D. The author believes that ethical concerns about LLMs are exaggerated and can be ignored.

E. The study shows that LLM-generated discharge summaries are already error-free.

Question (7)

According to the passage, what is implied about the future integration of LLMs in healthcare settings?

A. It will be delayed until AI models can independently make clinical decisions.

B. It depends on combining AI-generated drafts with structured human oversight.

C. It requires hospitals to eliminate manual documentation entirely.

D. It will be determined mainly by advances in computer hardware.

E. It will only succeed if AI models are allowed to edit medical records autonomously.

Question (8)

下線部(ア)を日本語に訳しなさい。

Question (9)

下線部(イ)を日本語に訳しなさい。

Question (10)

医療分野で"LLM tools"を試験的に導入する際の大きな課題は何だと述べられていますか。

Small らはそれらに寄与する重要なものとして何をあげていますか。日本語で説明しなさい。