<table>
<thead>
<tr>
<th>Students must:</th>
<th>% in GCSE</th>
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<tbody>
<tr>
<td><strong>AO1</strong></td>
<td>35</td>
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<tr>
<td>Demonstrate knowledge and understanding of the key features and characteristics of the periods studied.</td>
<td>35</td>
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<tr>
<td><strong>AO2</strong></td>
<td>35</td>
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<tr>
<td>Explain and analyse historical events and periods studied using second-order¹ historical concepts.</td>
<td>35</td>
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<tr>
<td><strong>AO3</strong></td>
<td>15</td>
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<tr>
<td>Analyse, evaluate and use sources (contemporary to the period) to make substantiated judgements, in the context of historical events studied.</td>
<td>15</td>
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<tr>
<td><strong>AO4</strong></td>
<td>15</td>
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<tr>
<td>Analyse, evaluate and make substantiated judgements about interpretations (including how and why interpretations may differ) in the context of historical events studied.</td>
<td>15</td>
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<tr>
<td><strong>Total</strong></td>
<td>100</td>
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Medicine through time, c1250-present
3 Explain one way in which people’s reactions to the plague in Britain were similar in the fourteenth and seventeenth centuries.

Exemplar response J

People in Medieval times and people during the Renaissance reacted similarly to the Plague. In 1348, the Black Death led to a lot of superstition surrounding the Plague which wasn’t uncommon in the era c.1250-1500 during which astrology played a big part in diagnosis of disease generally (through star charts) and belief in witches and demons was very common. Surprisingly, despite the decline in astrology after 1500 and people beginning to look for scientific methods and ideas to explain disease during the Renaissance, during the time of the Black Plague epidemic in 1655 people once more forgot about rational causes and used astrology and its superstition as an explanation. In November 1664, there had been an unusual alignment of the planets and this was thought to be “unlucky”. Both Medieval and Renaissance people were struck by fear of a disease so foreign, deadly and unexplainable and consequently both reacted by turning to superstition as an explanation.

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<tbody>
<tr>
<td>• Simple or generalised comment is offered about a similarity. [AO2]</td>
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<tr>
<td>• Generalised information about the topic is included, showing limited knowledge and understanding of the periods. [AO1]</td>
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This response received 2 marks.

Examiner’s comments:
Much of this is general information explaining people’s ideas about the cause of the plague (AO2 – Level 1) and while it is valid information (AO1 – Level 1), it is not about their reactions to it and therefore does not address the focus of the question.
4 Explain why there was rapid change in the treatment of illness in Britain during the twentieth century.

You may use the following in your answer:

- magic bullets
- high-tech treatment

You must also use information of your own.

Exemplar response K

In the twentieth century medicine was strongly based on science and advancements in technology as well as government intervention, which caused a rapid change in the treatment of illness.

Magic bullets are an example of how people began making advancements in treatment by thinking more logically and scientifically; inspired by antibodies in the body that worked in a similar way; magic bullets killed causing-disease microbes without harming the human body. The first magic bullet discovered by Hata in 1909 led to the discovery of many more like Prontosil in 1932 and eventually the creation of antibiotics, which we still use today. Magic bullets caused such a rapid change in treatment because they were an innovative and effective treatment that had never been seen before. Furthermore because of them, people gained enough knowledge to go on and create antibiotic, the first of which was penicillin, discovered in 1928 by Fleming and produced on a larger scale by Florey and Chain who used it to successfully treat all allied casualties on D-Day 1944. Franklin and Sherman’s work also enabled the mass production and production of different versions of penicillin. All of this shows how magic bullets weren’t just a successful treatment, but also an inspiring one that rapidly changed treatment by inspiring people to expand on its principal leading to the essential creation of antibiotics.
The 20th century also provided new and high tech treatment which led to a massive improvement in treatment from previous centuries. Microsurgery made organ transplants possible and laparoscopic surgery with smaller instruments and incisions majorly reduced trauma, a big change from the common problem of pain and blood loss during the 1800s. Treatments for cancer utilised x-rays and radiotherapy as well as chemotherapy and improvement to robotics made prosthetic limbs more common and successful. These treatments were due to an increased understanding but also much more improved technology which quickly changed the way illness was treated. This big technological advance shows compared to previous centuries clearly shows a massive change in treatment.

Finally, institutions also influenced the rapid change in treatment. The National Health Service set up in 1948 after World War 2 pioneered and helped by funding many individuals to make advancement, in medicine and technology.
- An analytical explanation is given which is directed consistently at the conceptual focus of the question, showing a line of reasoning that is coherent, sustained and logically structured. [AO2]
- Accurate and relevant information is precisely selected to address the question directly, showing wide-ranging knowledge and understanding of the required features or characteristics of the period studied. [AO1]

*No access to Level 4 for answers which do not go beyond aspects prompted by the stimulus points.*

This response received 12 marks.

**Examiner’s comments:**
This answer provides examples of changes in treatment since 1900 with an emphasis on ‘rapid’ improvement (AO2 – strong Level 4). It covers three aspects: magic bullets, antibiotics and high-tech treatment based on developments in technology. In addition, the NHS is covered briefly with less focus on ‘rapid’ improvements but the answer overall has explained various reasons for rapid improvement and supported the analysis with precise and relevant details (AO1 – Level 4).
Question 5

5 ‘There was little progress in medicine in Britain during the Renaissance period (c1500–c1700).’

How far do you agree? Explain your answer.

You may use the following in your answer:
- the work of William Harvey
- bloodletting and purging

You must also use information of your own.

(Total for spelling, punctuation, grammar and use of specialist terminology = 4 marks)
(Total for Question 5 = 20 marks)

Exemplar response

It may be argued that the Renaissance Period did not provide any progress in medicine overall; however I believe there was immense progress via new medical ideas.

Harvey was an extremely influential individual who caused a lot of progress by proving Galen wrong. His discovery of the heart and circulatory system in 1928 disproved Galen’s theory of the heart liver making blood. Though he received criticism and his
work at the time was not applicable to surgery, it was the basis for better anatomical understanding and further on improvements in surgery were made.

Other individuals including Sydenham as well as institution like the Royal Society of 1600 also showed a great amount of progress in the approach to medicine by disregarding older texts and encouraging scientific research and proof which became important in the understanding of microscopy and disease further on.

On the other hand it is arguable that discoveries made had little effect as they had no influence on practical medicine. Vesalius’s work, despite discrediting Galen and making dissection more acceptable, were still on anatomy and not illness or treatments for it.

The four Humours still persisted during this time; despite having been discredited they were still strongly believed in and used in everyday diagnosis along with miasmas, which was ever used to explain the Great Plague of 1665.

Conclusively I believe the Renaissance may not have been a time of change in practical change but it did partially help to innovate medicine by innovating ways of thinking and introducing scientific ideas. Although applications for this weren’t as useful in the Renaissance, individuals like Harvey’s work became of extreme importance later on.
### Level 3

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<th>9–12</th>
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| • An explanation is given, showing some analysis, which is mainly directed at the conceptual focus of the question. It shows a line of reasoning that is generally sustained, although some passages may lack coherence and organisation. [AO2]  
• Accurate and relevant information is included, showing good knowledge and understanding of the required features or characteristics of the period studied. [AO1]  
• The overall judgement is given with some justification, but some criteria selected for the required judgement are left implicit or not validly applied. [AO2] | Maximum 11 marks for Level 3 answers that do not go beyond aspects prompted by the stimulus points. |

### Intermediate

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<tr>
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| • Learners spell and punctuate with considerable accuracy.  
• Learners use rules of grammar with general control of meaning overall.  
• Learners use a good range of specialist terms as appropriate. |
This response received 13 (10+3) marks.

Examiner’s comments:
This answer makes a valid point made about Harvey discrediting Vesalius and improving anatomical knowledge but the claim that this led to improvements in surgery is not supported. There is a mention of Sydenham but not with detail and the assertion that Royal Society showed progress in medicine is unsupported. The brief comment about Vesalius is valid but not developed or linked to the comment about the belief in Four Humours.
This answer is strong analytically (AO2 – Level 3); it has understood the focus of the question and offered valid points. However, there is little detail – names are mentioned but with little explanation and therefore this cannot be described as ‘good’ knowledge. It does cover 3 aspects of the topic, meaning that this answer could receive a mark at the top of Level 3 or move to Level 4 but the knowledge included is not sufficient to warrant this (AO1 – Level 2).

There is a judgement being made, based on valid criteria, but these have not been applied and justified – progress tends to be asserted (this means Level 3 is reached for the third bullet point in the mark scheme). A ‘best fit’ answer is therefore low Level 3.
Exemplar response 1

3 Explain one way in which people’s reactions to the plague in Britain were similar in the fourteenth and seventeenth centuries.

One way in which people’s reactions to the plague were similar is that they both believed the plague was caused by humors being out of balance. This meant that for a cure, they looked at the theory of the four humors. This is why bleeding was still used at both time periods as a cure. This also shows that in the seventeenth century, they were still using Galen’s theories and ideas, and hadn’t moved forward.
Examiner’s commentary

This is a low Level 1 response. It offers a simple comment about the similarities (AO2) and generalised information about the topic which shows limited knowledge and understanding (AO1).

It has a general knowledge and understanding of reactions to the plague but these statements could be made about different diseases. It is explaining why there was continuity in treatment rather than specifically comparing reactions to the plague. It would require more specific information in relation to the actual focus of the question to be awarded L2. Low Level 1
Exemplar response 2

3 Explain one way in which people’s reactions to the plague in Britain were similar in the fourteenth and seventeenth centuries.

In both the fourteenth and seventeenth centuries people’s reactions to the plague were similar in many ways. One of the main ways people’s reactions were similar was that they both believed it was due to God’s punishment. They both fasted and used prayer. This shows a similarity between the two era’s as it shows that during these time periods both sets of medical knowledge were dominated by the church. Overall this also shows a lack of progress of medicine as from the C14th medical ideas and reactions had not progressed or moved forward.

Examiner’s commentary

This is a high Level 2 response. It identifies a similarity and analyses the similarity by showing how the reactions were similar and linking to the Church (AO2). Specific information about the reaction is shown in support (AO1).
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<tr>
<th>Level</th>
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<tbody>
<tr>
<td>0</td>
<td></td>
<td>No rewardable material.</td>
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</tbody>
</table>
| 1     | 1–3  | • A simple or generalised answer is given, lacking development and organisation. [AO2]  
       |      | • Limited knowledge and understanding of the topic is shown. [AO1] |
| 2     | 4–6  | • An explanation is given, showing limited analysis and with implicit or unsustained links to the conceptual focus of the question. It shows some development and organisation of material, but a line of reasoning is not sustained. [AO2]  
       |      | • Accurate and relevant information is included, showing some knowledge and understanding of the period. [AO1] |
| 3     | 7–9  | • An explanation is given, showing some analysis, which is mainly directed at the conceptual focus of the question. It shows a line of reasoning that is generally sustained, although some passages may lack coherence and organisation. [AO2]  
       |      | • Accurate and relevant information is included, showing good knowledge and understanding of the required features or characteristics of the period studied. [AO1] |
| 4     | 10–12| • An analytical explanation is given which is directed consistently at the conceptual focus of the question, showing a line of reasoning that is coherent, sustained and logically structured. [AO2]  
       |      | • Accurate and relevant information is precisely selected to address the question directly, showing wide-ranging knowledge and understanding of the required features or characteristics of the period studied. [AO1] |

*Maximum 5 marks for Level 2 answers that do not go beyond aspects prompted by the stimulus points.*

*Maximum 8 marks for Level 3 answers that do not go beyond aspects prompted by the stimulus points.*

*No access to Level 4 for answers which do not go beyond aspects prompted by the stimulus points.*
Exemplar response 2

3 Explain one way in which people’s reactions to the plague in Britain were similar in the fourteenth and seventeenth centuries.

In both the fourteenth and seventeenth centuries people’s reactions to the plague were similar in many ways. One of the main ways people’s reactions were similar was that they both believed it was due to God’s punishment. They both fasted and used prayer. This shows a similarity between the two era’s as it shows that during these time periods both sets of medical knowledge were dominated by the church. Overall this also shows a lack of progress of medicine as from the C14th medical ideas and reactions had not progressed or moved forward.
Examiner’s commentary
This is a high Level 2 response. It identifies a similarity and analyses the similarity by showing how the reactions were similar and linking to the Church (AO2). Specific information about the reaction is shown in support (AO1).
## Question 4

<table>
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<tr>
<td>0</td>
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<td>No rewardable material.</td>
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</table>
| 1     | 1–3  | - A simple or generalised answer is given, lacking development and organisation. [AO2]  
- Limited knowledge and understanding of the topic is shown. [AO1] |
| 2     | 4–6  | - An explanation is given, showing limited analysis and with implicit or unsustained links to the conceptual focus of the question. It shows some development and organisation of material, but a line of reasoning is not sustained. [AO2]  
- Accurate and relevant information is included, showing some knowledge and understanding of the period. [AO1] |

*Maximum 5 marks for Level 2 answers that do not go beyond aspects prompted by the stimulus points.*

| 3     | 7–9  | - An explanation is given, showing some analysis, which is mainly directed at the conceptual focus of the question. It shows a line of reasoning that is generally sustained, although some passages may lack coherence and organisation. [AO2]  
- Accurate and relevant information is included, showing good knowledge and understanding of the required features or characteristics of the period studied. [AO1] |

*Maximum 8 marks for Level 3 answers that do not go beyond aspects prompted by the stimulus points.*

| 4     | 10–12| - An analytical explanation is given which is directed consistently at the conceptual focus of the question, showing a line of reasoning that is coherent, sustained and logically structured. [AO2]  
- Accurate and relevant information is precisely selected to address the question directly, showing wide-ranging knowledge and understanding of the required features or characteristics of the period studied. [AO1] |

*No access to Level 4 for answers which do not go beyond aspects prompted by the stimulus points.*
Exemplar response 3

4 Explain why there was rapid change in the treatment of illness in Britain during the twentieth century.

You may use the following in your answer:
- magic bullets
- high-tech treatment

You must also use information of your own.

In the twentieth century, the treatment of illness improved. There are many reasons for this. One is the discovery of magic bullets. Following discoveries of germ theory made by Pasteur and Koch, people wanted to do more research and improve on their findings. Magic bullets were discovered to be able to cure a disease or infection in a person had without harming or affecting the patient.
Another way in which the treatment of illness improved was that they discovered penicillin. Penicillin was discovered when mould growing by chance, when mould grew on a dish that was left. The bacteria was shown not to be around the
mould. If people realised then realised
that they could use the penicillin
from the mould to fight of infection,
bacteria and germs. As it was
discovered after Koch's germ theory,
this meant they could research
the penicillin and the use of
it with extra informations of germs.

WW2 also meant a change in
the treatment of illness. As penicillin
needed to be used in vast
amounts, this meant they had to
learn a way to mass produce it
which is beneficial not only for
the war but medicine as a
whole. Another way WW2 improved
medicine is their way they
healed gunshot wounds. Ambroise Paré was a doctor on the battlefield. When the oil ran out, they had to find a new way to heal the wounds. Paré used silk ligatures, which resulted in fewer people dying from infection. However, although this was a good discovery, the fact that the surgery had to be done on the battlefield meant germs still got into the wound, which meant some still got infections.
Examiner’s commentary

This response mainly describes change – magic bullet and penicillin – rather than explaining rapid change and so has limited analysis and an unsustained focus at AO2 (L2). The point made about the Second World War is valid but it does not have enough AO2 analysis or AO1 support to suggest L3. At AO1 most of the information which is accurate and relevant shows some understanding of the period but is not detailed or deployed to support the concept of rapid change (low L2). From ‘healed gunshot wounds’ the response provides material which is irrelevant to the time period and deals with material which is about surgery rather than treatment and so cannot be rewarded. It covers content which is beyond the stimulus points but is not sufficient to reach the high-band mark and so the overall best fit is mid-Level 2.
There was a rapid change in the treatment of illness in Britain during the twentieth century. This was because of the developments of penicillin. Penicillin was mass produced for the injured soldiers in WWII for the D-Day. It was discovered that the mould could be turned into a cure for infections and diseases. This meant that many of the people with illnesses could be cured. This was a rapid change because...
Penicillin could target a range of diseases and could cure them, instead of only providing a prevention for disease. So, in this way many people became & could have their illness cured.

There was also a rapid change in the treatment of illness in Britain because of the magic bullet. The magic bullet was a new great improvement because it could target and kill a disease but leave
the "Person Untouched." It was quite a breakthrough because it was the first chemical-based cure. The magic bullet was called "Savarsan 606" because a man named Paul Ehrlich had tested 606 dyes to try to find a cure for the killer disease syphilis. This meant that disease could start to be cured rather than prevented. Although the magic bullet had limitations because it was only capable of targeting the one disease syphilis. This meant that people who did not have a specific disease could not be cured.
But penicillin had limitations because it could not do anything to cure viruses.
Examiner’s commentary

This response addresses the question by reference to penicillin and magic bullets. Only one is directly related to the stimulus points but the content coverage does not cover sufficient content areas to be rewarded at the top of Level 2/Level 3 or Level 4 at all. The response identifies some elements of change and is attempting to explain change but does not securely focus on rapid change. It is suggesting that penicillin brought rapid change because it could ‘target a range of diseases’. At AO2 the explanation of penicillin has shows some analysis (L3) while the explanation of the magic bullet has limited analysis (L2). The best fit here is a low L3 as there is a focus on changing treatment of illness. At AO1 there is accurate and relevant information which shows sufficient knowledge understanding of the required features/characteristics of the period – mass production of penicillin in the Second World War and the development of the magic bullet - to reach low Level 3. The response is, therefore, low Level 3. Please note: This is weak L3 for both AO2 and AO1. Low Level 3
During the twentieth century there were rapid changes in the treatment of illness in Britain. There are many different reasons why there was rapid change in the treatment of illness, one of these reasons is through the use of the creation and use of the first magic bullet. Paul Ehrlich created the first magic bullet which fought the syphillis microbe inside the body by mixing chemicals with colourless dyes, through this discovery he created Salvarsan 606 which was the first chemical based cure. This shows that there was rapid change within the treatment of medicine as more scientific cures were being created which were overall less harmful to the body. This shows that the...
rapid change in the treatment of illness as before. Chemicals such as mercury were being used to treat syphilis which caused both harm to the body and eventually death. Overall this shows rapid change in the treatment of illness in Britain as it shows that more scientific cures were being created to produce a significant amount of progress within the treatment of illness throughout time. Also due to the release of the Germ Theory the impact of the treatment was instantaneous meaning that the rate of change for treatment was increasingly high showing overall vast knowledge and rapid changes throughout the treatment of illness.
A different major reason why there was rapid change in the treatment of illness in the twentieth century is due to the foundation of the NHS. The NHS was founded in 1949 by the British government and was a new source of healthcare for the population of Great Britain. The creation of the NHS created rapid change in the treatment of illness as it was free, which means that now everybody had access to successful chemical treatments and new technology. This showed rapid change in the treatment of illness as now everybody had access to medical treatment. Therefore, this shows rapid change as overall the population would be healthier. However, the creation of the NHS also did have limitations as, as more people began to use the NHS, funding began to run out which meant that in the future the NHS had to charge fees for prescriptions and dental care.
Examiner’s commentary

This response provides an explanation for change showing some analysis by reference to magic bullets (stimulus point), germ theory, and the NHS. The content goes beyond the stimulus points but is not wide-ranging enough to be considered for Level 4. At AO2, although it refers to rapid changes the points are more focused on showing change, putting it at Level 3. At AO1 there is accurate and relevant information included which shows good knowledge and understanding of the required features/characteristics of the period (Level 3). Both paragraphs include information which is less relevant and so is not precisely selected to address the question. Both AO1 and AO2 exhibit a best fit of Level 3, so overall this achieves a high Level 3.

This is a borderline mid- to high- Level 3: to secure high Level 3, and even be considered for L4, the response would need more clearly to cover three areas of content (either stimulus or own knowledge based).
### Question 5

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<td></td>
<td>No rewardable material.</td>
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</table>
| 1     | 1-4  | - A simple or generalised answer is given, lacking development and organisation. [AO2]  
       |      | - Limited knowledge and understanding of the topic is shown. [AO1]  
       |      | - The overall judgement is missing or asserted. [AO2] |
| 2     | 5-8  | - An explanation is given showing limited analysis and with implicit or unsustained links to the conceptual focus of the question. It shows some development and organisation of material, but a line of reasoning is not sustained. [AO2]  
       |      | - Accurate and relevant information is included, showing some knowledge and understanding of the period. [AO1]  
       |      | - The overall judgement is given but its justification is asserted or insecure. [AO2]  
       |      | Maximum 7 marks for Level 2 answers that do not go beyond aspects prompted by the stimulus points. |
| 3     | 9-12 | - An explanation is given, showing some analysis, which is mainly directed at the conceptual focus of the question. It shows a line of reasoning that is generally sustained, although some passages may lack coherence and organisation. [AO2]  
       |      | - Accurate and relevant information is included, showing good knowledge and understanding of the required features or characteristics of the period studied. [AO1]  
       |      | - The overall judgement is given with some justification, but some criteria selected for the required judgement are left implicit or not validly applied. [AO2]  
       |      | Maximum 11 marks for Level 3 answers that do not go beyond aspects prompted by the stimulus points. |
| 4     | 13-16| - An analytical explanation is given which is directed consistently at the conceptual focus of the question, showing a line of reasoning that is coherent, sustained and logically structured. [AO2]  
       |      | - Accurate and relevant information is precisely selected to address the question directly, showing wide-ranging knowledge and understanding of the required features or characteristics of the period studied. [AO1]  
       |      | - Criteria for the required judgement are justified and applied in the process of reaching the overall judgement. [AO2]  
       |      | No access to Level 4 for answers that do not go beyond aspects prompted by the stimulus points. |
Exemplar response 6

5 ‘There was little progress in medicine in Britain during the Renaissance period (c1500-c1700).’

How far do you agree? Explain your answer.

You may use the following in your answer.
- the work of William Harvey
- bloodletting and purging
You must also use information of your own.

I agree with the statement that ‘There was little progress in medicine in Britain in the Renaissance period’ to a certain extent. This is because during the Renaissance period there were many medical breakthroughs which did create progress within the history of medicine. One of these medical breakthroughs was Harvey’s discovery that the heart was a pump and that it circulated blood around the body. This shows there was medical progress as in the long term as Harvey’s discoveries would inspire future doctors and lay the foundations for more medical progress in the future. For example his discovery created the stepping stones for future doctors to discover blood types which lead to the development of blood transfusions and heart surgeries.

A different reason why there was medical progress in the Renaissance period is shows in the work by Sydenham. His work as a physician added to medical progress at the time. This was because he used observation of patients and the use of records to diagnose illness and to find treatments such as laudanum for pain. This shows medical progress as he used his initiative and medical knowledge to create better and more effective treatments. Also his work with quinine gave future doctors the inspiration to use quinine to treat malaria which in the future would become a significant medical breakthrough.
However there were also many factors which showed lack of medical progress within the Renaissance period. For example the Church was still very dominant in the medical world. This shows lack of progress overall the Church was still supporting the ideas of Galen and the used of supernatural treatments such as self-punishment and lucky charms. Furthermore this shows lack of medical progress as most of the population chose to follow the Church which meant new medical ideas were being forgotten about and not used throughout the medieval community.

Another factor that shows little progress throughout the Renaissance period is that the work of Harvey and Vesalius was all theory which meant that there was no impact at the time of their discoveries. Overall this shows lack of medical progress as not only were their idea frowned upon by the Church, but also most of the population was illiterate. This overall shows a lack of progress as many people couldn't read their theories, therefore decided to follow the Church's medical ideas.

In conclusion I believe that there wasn't much progress in medicine throughout the Renaissance period. This is because even though discoveries made by individuals lead to the discovery of blood groups and more accurate diagnosis in the future. During the Renaissance period the Church dominance of medicine and lack of practical work meant that there were no impacts at the time due to these discoveries, therefore there was little progress made throughout the Renaissance period.
Examiner’s commentary

This response is an analytical explanation which is directed consistently at the focus of the question (Strand 1 – AO2) by showing arguments for and against progress having justified an overall judgement (Strand 3 – AO2). The content goes beyond the stimulus points with reference to other individuals and the Church (AO1) but is not always sufficiently detailed for a depth study. The line of reasoning uses supporting information which refers to the future and which may seem to be less relevant but the conclusion defines these references as criteria for judgement (AO2) – clearly making this valid. The overall best fit would suggest Strand 1 low Level 4, Strand 2 low Level 4 and Strand 3 Level 4 – overall low Level 4.
Option 11: Medicine in Britain, c1250—present and The British sector of the Western Front, 1914—18: injuries, treatment and the trenches.

SECTION A

Question 1

1 Describe two features of the support trench system on the Western Front.

Exemplar response G

Feature 1
The support trench system consisted of support trenches as its main feature. These support trenches were so metres back from the frontline trenches and could be connected to the frontline via communication trenches. These were made for soldiers to retreat into if the frontline was under attack.

Feature 2
Another feature of support trenches was that due to their distance from the frontline they were much safer and could be used to store artillery or even for the mobilisation of larger reserve troops thanks to this safety feature.
**Marking instructions**

Award 1 mark for each valid feature identified up to a maximum of two features. The second mark should be awarded for supporting information.

e.g.

- The support trenches were a few hundred yards behind the front line (1). They provided additional supplies and men in case of attack (1).
- Support trenches were safer than the front line (1). Support trenches were rarely targeted by enemy snipers (1).
- Support trenches were often in better condition than the front line (1). They were less likely to have been hit by artillery (1).

Accept other appropriate features and supporting information.

**This response received 4 marks.**

**Examiner’s comments:**

Two valid features of the support trench system are identified and explained. In question 1, the candidate needs to identify two features – key themes, significant points etc. The additional detail or explanation needs to clearly relate to the feature identified and should not be simply additional information about the topic.
Question 2 (a)

2 (a) Study Sources A and B in the Sources Booklet.

How useful are Sources A and B for an enquiry into the problems involved in performing operations on the Western Front?

Explain your answer, using Sources A and B and your knowledge of the historical context.

Exemplar response H

Source A is fairly useful for an enquiry into the problems involved in performing operations on the Western Front as it gives details about the difficulties of treating the wounded in casualty cleaning stations. The Reverend mentions that they couldn’t get the wounded into hospital quickly enough and the journey from the battlefield was simply terrible showing the great difficulties in transportation probably by horse drawn ambulances or motor ambulances where the “shaking” wagons often worsened wounds, making operations even more difficult. The Reverend states the need of “operating as quickly as possible” showing the severity of wounds caused by new weapons used in trench warfare such as machine guns. The large amounts of wounded and pressure of numbers seem to be the main problem and it is deductable that many operations were not aseptic because of the large numbers and how quickly operations had to be done. The source is from a casualty cleaning stations, which often dealt with operations. In this particular source, it is shown that they were unprepared for this large number of casualties, the great amount of casualties is backed up by statistics which show the
Battle of the Somme in 1916 resulted in roughly 400,000 deaths. It is important to note that the source is not from an experienced aim doctor but the chaplain, which not only shows the shortage of staff but also decreases the source’s credibility as it is a personal diary entry in which their chaplain may be overdramatizing the situation. However, my personal knowledge of 1916 indicates that the description given by the chaplain is most probably an accurate reflection of the problems during operations to do with pressure of numbers and unseen wounds on the Western Front, making this a fairly useful source.

Source B is particularly useful for an enquiry into the problems involved in performing operations on the Western Front as it is from Oswald Robertson, an important army doctor who created the first blood bank in 1917 using sodium nitrate to prevent blood from clotting. The source is also from November 1917, the month of the Battle of Cambrai which we know was part of the action in trench warfare. This battle also resulted in 45,000 casualties. Again we see how poor transportation worsened wounds as “men were horribly mutilated” and “dying when brought into the ward”. This shows how taking too long to transport the wounded made the operations much more difficult. As it is from November horse drawn ambulance were probably used over motor ambulances that couldn’t handle muddy terrains; these ambulances worsened hands through shaking operations also seem difficult as these were unseen wounds and blood loss seems nearly impossible to prevent – “blood everywhere, clothes...pools of blood in the stretchers”. Robertson himself could only “transfuse an occasional patient” still knowing that transfusions hadn’t been perfected and couldn’t be done quickly or effectively. The source does not contain statistics which is a drawback but it is expected as it is a diary entry and overall, the source is very useful as it shows problems associated with blood loss that made performing operations harder.
Judgements on source utility for the specified enquiry are given, applying valid criteria with developed reasoning which takes into account how the provenance affects the usefulness of the source content. The sources are analysed to support reasoning about their utility. Contextual knowledge is used in the process of interpreting the sources and applying criteria for judgements on their utility.

This response received 8 marks.

Examiner’s comments:
Comments on both sources explain why the historian would find the content useful and what inferences could be made but there is also a good focus on how the provenance affects the way the historian would use the information. Additional knowledge is also used to place Source A in the context of the Battle of the Somme and Source B in the context of developments in blood transfusions. This is then used to show that the sources do give an accurate impression of the situation. Therefore, for each source, Level 3 has been reached. A judgement on its usefulness has been made, based on valid criteria, and integrating reasoning about the provenance, analysis of source content and additional contextual knowledge.
Question 2 (b)

(b) Study Source B.

How could you follow up Source B to find out more about the problems involved in performing operations on the Western Front?

In your answer, you must give the question you would ask and the type of source you could use.
Exemplar response I

Detail in Source B that I would follow up:
“I could only transfuse an occasional patient”.

Question I would ask:
Why was carrying out transfusions so difficult?

What type of source I could use:
Official records showing the exact number of transfusions done during 1917-18.

How this might help answer my question:
The source would help to see if transfusions were always hard or if on the particular occasion of the 30th November 1917 Robertson was simply unable to carry out transfusions.
Marking instructions

Award 1 mark for selecting a detail in Source B that could form the basis of a follow-up enquiry and 1 mark for a question which is linked to it.

e.g.

- *Detail in Source B that I would follow up:* 'I could only transfuse an occasional patient.' *(1)*
- *Question I would ask:* Why were transfusions such a problem? *(1)*

(No mark for a question that is not linked to following up Source B, e.g. 'because it would be an interesting question to ask'.)

Award 1 mark for identification of an appropriate source and 1 mark for an answer that shows how it might help answer the chosen follow-up question.

e.g.

- *What type of source I would look for:* Army medical records about how blood was stored and made available to the hospitals. *(1)*
- *How this might help answer my question:* This would help me to see if the problem was about the actual transfusion process or about the quantity of blood available. *(1)*

Accept other appropriate alternatives.

This response received 4 marks.

Examiner’s comments:
The answer identifies a valid detail from Source B to be investigated and outlines a possible enquiry, together with an appropriate follow up source and explanation of what information that source could provide.
In question 2b, the question to be asked must be linked to both the detail that has been selected from the source and to the enquiry stated in the question.