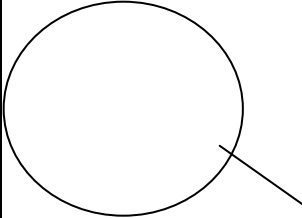
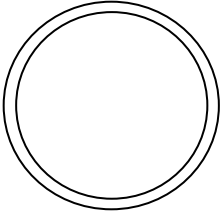
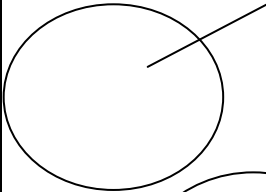
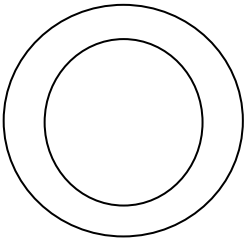
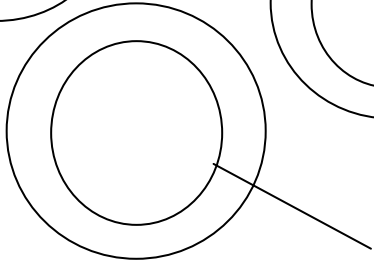


Question		Expected Answers	Marks	Additional Guidance
1	(a)	a single value between 67 and 80 ; ;	max 2	two marks for correct answer  If answer incorrect, allow one mark for appropriate working i.e. 60 divided by time from trace selected by candidate
1	(b)	heart rate, slower / lower / reduced / 60 – 63 beats per minute ;  rest period / diastole longer ;  ventricle takes longer to contract / ventricular systole longer ;	max 2	<i>Mark first point on each numbered line</i> <b>ACCEPT</b> length of one beat is longer <b>DO NOT CREDIT</b> 'slows heart's activity'  <b>ACCEPT</b> T wave elongated / increases from 0.24s to 0.32s / increases by 0.1 s <b>IGNORE</b> name of chamber  <b>ACCEPT</b> R wave slightly elongated / increases from 0.07s to 0.12s / increases by 0.05 s
1	(c)	SAN, is pacemaker / initiates heart beat ;  (SAN sends) impulse / wave of excitation, over atria (walls) ;  AVN delays impulse ; (AVN) sends impulse down, septum / bundle of His / Purkyne fibres ;	max 3	<b>ACCEPT</b> <i>starts</i> , wave of excitation / action potential / electrical impulse <b>IGNORE</b> 'sends out' (wave)  <b>IGNORE</b> <i>through / to</i> , the atrium <b>DO NOT CREDIT</b> signal / message for impulse, <b>allow ecf</b> <b>DO NOT CREDIT</b> pulse <b>IGNORE</b> delays contraction <b>ACCEPT</b> Purkinje
<b>Total</b>			<b>7</b>	

Question			Expected Answers	Marks	Additional Guidance
2	(a)	(i)	vein with thinner wall than artery ;		<p><b>CREDIT:</b> Correct position of endothelium as indicated by circle or label line Must be clearly <b>thinner</b> than shown on artery</p>   <p><b>DO NOT CREDIT:</b></p>   
				1	

Question			Expected Answers	Mark	Additional Guidance
2	(a)	(ii)	<p>Arteries have:</p> <p>no valves ;</p> <p>endothelium / tunica intima, folded / AW ;</p> <p>more / thicker, muscle / elastic tissue / tunica media ;</p> <p>more / thicker, collagen / tunica externa ;</p>	2 max	<p>Assume answer refers to wall of artery.</p> <p><b>IGNORE</b> any ref to artery wall being thicker, unqualified, as this has already been stated in the question</p> <p><b>IGNORE</b> reasons for differences</p> <p><b>ACCEPT</b> ORA if stated - 'vein is.....'</p> <p>Look for <b>comparative</b> statements</p> <p><b>ACCEPT</b> tunica adventitia for tunica externa</p>
2	(b)	(i)	contraction of <u>ventricle</u> , wall / muscle ;	1	<p><b>ACCEPT</b> ventricular systole</p> <p><b>DO NOT CREDIT</b> heart muscle unqualified</p> <p><b>DO NOT CREDIT</b> contraction of atria <b>and</b> ventricles</p> <p><b>DO NOT CREDIT</b> pump / squeeze / push / beat without ref to contraction</p>

Marks			Expected Answers	Mark	Additional Guidance
2	(b)	(ii)	<p>more, (smaller) vessels / named vessels ;</p> <p>(vessels) have larger, total lumen / cross sectional area ;</p> <p>reduced resistance to blood flow ;</p> <p>arteries, stretch / expand ;</p> <p>loss of, fluid / plasma, from capillaries ;</p>	2 max	<p><b>ACCEPT</b> <i>divides</i> into smaller vessels (implies more of them)</p> <p><b>ACCEPT</b> larger total surface area</p> <p><b>DO NOT CREDIT</b> further from the heart</p> <p><b>DO NOT CREDIT</b> loss of, blood / water</p> <p><b>DO NOT CREDIT</b> loss of fluid / plasma, unqualified or from other vessels</p>
2	(b)	(iii)	<p>plasma / fluid, moves out of, capillary / blood ;</p> <p>enters / forms, tissue fluid ;</p> <p>(plasma) proteins, remain in capillary / too large to pass through capillary wall / AW ;</p> <p>(fluid moves) down pressure gradient ;</p> <p>hydrostatic pressure greater than, water potential / <math>\Psi</math>;</p>	3 max	<p><i>Assume 'it' refers to plasma:</i></p> <p><b>DO NOT CREDIT</b> water / diffuses out</p> <p><b>ACCEPT</b> filters out</p> <p><b>DO NOT CREDIT</b> ref to osmosis</p>

Marks			Expected Answers	Marks	Additional Guidance
2	(c)		X = carbonic anhydrase ;	3	<b>ACCEPT</b> correct phonetic spelling <b>DO NOT ACCEPT</b> anhydrase
			Y = carbonic acid / $\text{H}_2\text{CO}_3$ ;		If formula <u>only</u> given, it must be correct. Incorrect formula can be ignored if correct name given.
			Z = hydrogen (ion) / $\text{H}^+$ ;		<b>DO NOT CREDIT</b> H alone
			<b>Total</b>	<b>12</b>	

Question			Expected Answers	Marks	Additional Guidance
3	(a)	(i)	cardiac ;	1	<b>ACCEPT</b> myogenic
3	(a)	(ii)	(muscle) contraction / systole ;	1	<b>ACCEPT</b> atrial or ventricular systole <b>DO NOT ACCEPT</b> atrial or systolic pressure
3	(b)	(i)	<i>correct answer = two marks</i>  75 ; ;  <i>if answer incorrect <b>ALLOW</b> one mark for correct working</i>  60 / 0.8	2	
3	(b)	(ii)	pressure in <b>ventricle</b> is below (pressure in) <b>atrium</b> ; <b>bicuspid / atrioventricular</b> valve, open(s) ; blood flows into (atrium and) ventricle ;  max 3  QWC - technical terms used appropriately and spelt correctly ; 1	4	ORA <b>ACCEPT</b> mitral <b>DO NOT ACCEPT</b> pushed or pumped <b>DO NOT ACCEPT</b> arterioventricular  Use three terms in correct biological context from: ventricle / ventricular, atrium / atrial, bicuspid, mitral, atrioventricular, diastole
<b>Total</b>				<b>8</b>	

Question			Expected Answers	Marks	Additional Guidance
4	(a)		<p><i>single circulatory system:</i> blood passes through the heart once for each, circulation / circuit / cycle, of the body ;</p> <p><i>closed circulatory system:</i> the blood is maintained inside vessels ;</p>	2	<p><b>DO NOT ACCEPT</b> ref to <u>cardiac</u> cycle  <b>DO NOT ACCEPT</b> 'blood passes through heart once' - it must be clear there is a circuit / return to heart  <b>ACCEPT</b> description e.g. heart to gills to body to heart  <b>ACCEPT</b> ref to no separate pulmonary and systemic systems  <b>ACCEPT</b> ref to lungs</p> <p><b>ACCEPT</b> names of two types of vessel as alternative to 'vessels'</p>
4	(b)	(i)	<p><b>T</b> SAN / sinoatrial node ;</p> <p><b>U</b> AVN / atrioventricular node ;</p> <p><b>V</b> bundle of His / Purkyne tissue ;</p>	3	<p><b>ACCEPT</b> pacemaker  <b>DO NOT ACCEPT</b> sinoarterial / atrial node  <b>DO NOT ACCEPT</b> arterioventricular node  <b>ACCEPT</b> Purkinje</p>

Question			Expected Answers	Marks	Additional Guidance
4	(b)	(ii)	<p>T / SAN, creates / initiates / starts / originates, <b>excitation</b> ;</p> <p>wave (of excitation) spreads over <b>atrial, wall / muscle</b> ;  ref to, AVN / <b>U</b> ;  atria contract / atrial <b>systole</b> ;  contraction is synchronised / AW ;  delay at AVN ;  (excitation spreads) down <b>septum</b> ;</p> <p>ref to, <b>bundle of His / Purkyne</b> fibres ;  ventricles contract / ventricular systole, from, <b>apex</b> / bottom ;</p> <p>QWC – technical terms, spelled <b>AND</b> used in correct context</p>	<p>4 max</p> <p>1</p>	<p><b>ACCEPT</b> acts as <b>pacemaker</b>  <b>ACCEPT</b> impulse / action potential / depolarisation  <b>DO NOT ACCEPT</b> electricity / signal / message  <b>DO NOT ACCEPT</b> if response suggests that brain needed to trigger SAN</p> <p><b>ACCEPT EITHER</b> in context of both atria OR both ventricles contracting together  <b>ACCEPT</b> Purkinje</p> <p>any <b>three</b> from: pacemaker, sinoatrial node, atrioventricular node, excitation, atrial / atrium / atria, septum, Purkyne, bundle of His, ventricle(s) / ventricular, apex, systole.</p>
				[Total: 10]	



Question		Answer	Marks	Guidance
5	(a)	<p>low / small, surface area to volume ratio ;</p> <p>diffusion, too slow / distance too great ;</p> <p>to supply enough, oxygen / (named) nutrients ;</p> <p>to prevent, CO<sub>2</sub> / (named) waste product, building up ;</p> <p>active ;</p>	3 max	<p><b>Mark the first 3 suggestions</b></p> <p><b>CREDIT</b> SA/Vol, SA:Vol</p> <p><b>ACCEPT</b> surface area to volume (ie if 'ratio' missed)</p> <p><b>IGNORE</b> lower SA / Vol</p> <p><b>ACCEPT</b> diffusion pathway too long</p> <p><b>ACCEPT</b> diffusion insufficient because, body too large / tissues too deep</p> <p><b>ACCEPT</b> 'transport enough' for 'supply enough'</p> <p>idea of 'enough' is important</p> <p><b>ACCEPT</b> to remove waste products</p> <p><b>ACCEPT</b> to prevent waste reaching toxic levels</p> <p><b>ACCEPT</b> high demand for oxygen / energy</p> <p><b>OR</b> high metabolic rate</p> <p><b>OR</b> endotherm / maintaining temperature / exercising</p>
	(b)	(i)	1	<p><b>Mark the first answer.</b> If the answer is correct and an additional answer is given that is incorrect or contradicts the correct answer then = <b>0 marks</b></p> <p><b>IGNORE</b> ECG</p> <p><b>DO NOT CREDIT</b> electrocardiograph</p>
		(ii)	2	<p><b>Mark the first answer on each prompt line.</b> If the answer is correct and an additional answer is given that is incorrect or contradicts the correct answer then = <b>0 marks</b></p> <p>sinalatrial node / sanatrial node = NBOD</p> <p>atroventricular / atrialventricular, node= BOD</p> <p>artrialventricular / avioventricular node = NBOD</p>
				<p><b>A</b> sinoatrial node / SAN ;</p> <p><b>B</b> atrioventricular node / AVN ;</p>

Question		Answer	Marks	Guidance
	(c) (i)	(to allow time) for the atria to (fully) contract ; to allow (time for), atria to empty / blood to move / ventricles to fill ; so that ventricle(s) do not contract, too early ;	2 max	<b>ACCEPT</b> systole for contraction <b>IGNORE</b> pumping  <b>ACCEPT</b> so atria and ventricles do not contract at the same time <b>ACCEPT</b> (atria contract ) before ventricular systole occurs  <b>Note:</b> so ventricles do not contract before they are full = 2 so ventricles do not contract before atria are empty = 2 so atria have time to empty before the ventricles start to contract = 2
	(ii)	so that (ventricular) contraction starts at, apex / base / bottom ;  to push blood upwards OR into/ towards, (named) arteries ;  complete / efficient, emptying of ventricles ;	2 max	<b>IGNORE</b> ref to gravity / ref to blood pressure  <b>ACCEPT</b> systole for contraction <b>ACCEPT</b> contract from the apex <b>IGNORE</b> pumping  <b>ACCEPT</b> force all blood out of heart
		<b>Total</b>	<b>10</b>	