



Mi Universidad

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Nombre del tema PAG 29, 37, 42

Parcial 2

Nombre de la Materia INGLES

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LICENCIATURA EN ENFERMERIA

3 Cuatrimestre

9 GRAMMAR FOCUS

▶ Imperatives

Get some rest.	Don't stay up late.
Drink lots of juice.	Don't drink soda.
Take one pill every evening.	Don't work too hard.

GRAMMAR PLUS see page 143

Complete these sentences. Use the correct forms of the words in the box.

✓ call stay not go not drink
see take ✓not worry not eat

- | | |
|--------------------------------------|-----------------------------------|
| 1. _____ Call _____ a dentist. | 5. _____ NOT GO _____ in bed. |
| 2. _____ Don't worry _____ too much. | 6. _____ STAY _____ a doctor. |
| 3. TAKE _____ a hot bath. | 7. _____ NOT DRINK _____ coffee. |
| 4. _____ SEE _____ to school. | 8. _____ NOT EAT _____ any candy. |

10 SPEAKING Good advice?

A Write two pieces of advice for each problem.



- | | | | |
|------------------------------------|---|---|---|
| 1. take a pill _____
rest _____ | 2. Dint wave your hand _____
take a pill _____ | 3. Put drops on it _____
Put cucuber on it _____ | 4. take a pill _____
Have a relaxing tea _____ |
|------------------------------------|---|---|---|

B **GROUP WORK** Act out the problems from part A. Your classmates give advice.

A: I don't feel well.

B: What's the matter?

A: My feet hurt.

B: I have an idea. Take a hot bath. And don't . . .

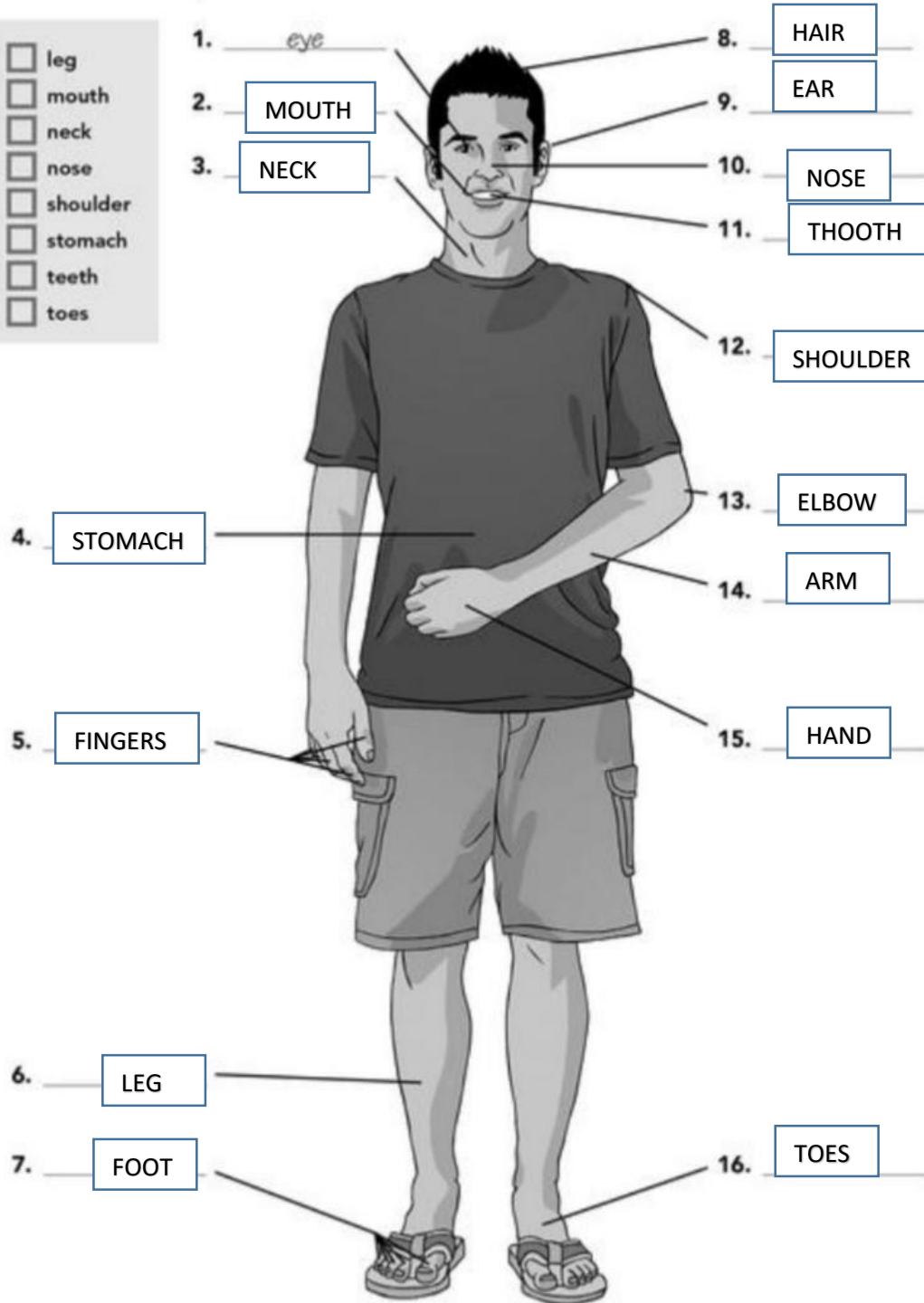
11 INTERCHANGE 12 Problems, problems

Give advice for common problems. Go to Interchange 12 on page 126.

WORKBOOK

1 Label the parts of the body. Use the words in the box.

- | | |
|---|-----------------------------------|
| <input type="checkbox"/> arm | <input type="checkbox"/> leg |
| <input type="checkbox"/> ear | <input type="checkbox"/> mouth |
| <input type="checkbox"/> elbow | <input type="checkbox"/> neck |
| <input checked="" type="checkbox"/> eye | <input type="checkbox"/> nose |
| <input type="checkbox"/> fingers | <input type="checkbox"/> shoulder |
| <input type="checkbox"/> foot | <input type="checkbox"/> stomach |
| <input type="checkbox"/> hair | <input type="checkbox"/> teeth |
| <input type="checkbox"/> hand | <input type="checkbox"/> toes |



7 Write two pieces of advice for each problem.

1. I have a sore throat.
2. I have a toothache.
3. I have a cough.
4. I have a cold.
5. I have a stomachache.
6. I have a headache.
7. I have the flu.
8. I have a fever.

Don't go to work today. Drink some chamomile tea.

Take a naproxeno and sleep
Drink a tea and dontgo out
Take a chicken broth and rest
Take a pill
rest
Have a syruo
Take a shawer and take a pill

8 Health survey

A How healthy and happy are you?
Complete the survey.

How often do you . . . ?

	Often	Sometimes	Hardly ever	Never
get a headache	<input type="checkbox"/> #	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
get an earache	<input type="checkbox"/>	<input type="checkbox"/> #	<input type="checkbox"/>	<input type="checkbox"/>
get a cold	<input type="checkbox"/>	<input type="checkbox"/> #	<input type="checkbox"/>	<input type="checkbox"/>
get the flu	<input type="checkbox"/> #	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
get a stomachache	<input type="checkbox"/>	<input type="checkbox"/> #	<input type="checkbox"/>	<input type="checkbox"/>
stay up late	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> #	<input type="checkbox"/>
feel sleepy	<input type="checkbox"/> #	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
get a fever	<input type="checkbox"/>	<input type="checkbox"/> #	<input type="checkbox"/>	<input type="checkbox"/>

B Write four sentences about your health. Use the information from the survey in part A.

Examples:

I sometimes stay up late, but I hardly ever feel sleepy.

I hardly ever get a cold or the flu.

1. _____
2. _____
3. _____
4. _____