



what's the matter?

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Write two pieces of advice for each problem.

1. I have a cold. Don't go to school today. Take a cold pill.
2. I have a toothache. You should Not eat candies, Got to the dentist.
3. I have a sore throat. You should not take cold things. You should drink cough syrup.
4. I have an earache. You should drink something for the pain. You should sleep.
5. I have a stomachache. You should not eat junk food. You should drink some antacid.
6. I have a backache. You should rest. You should put some muscle cream on.
7. I have sore eyes. You should use some eye drops. You should not use the computer.
8. I have a fever. You should take paracetamol. You should not go outside.

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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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
get an earache	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
get a stomachache	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
get a cold	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
get the flu	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
stay up late	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
feel sleepy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
get a fever	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Examples:

I hardly ever get a headache, an earache, or a stomachache.

I often stay up late on weekends, but I never stay up late on weekdays.

1. I usually get a stomachache. I never get an earache.
2. I often get a fever. I usually get a headache.
3. I never get the cold. I seldom get the flu.
4. I always stay up late. I often feel sleepy.