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Health Problems And Adverbs Of
Frequency**

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Grupo: "a"

Actividad #5_Health Problems And Adverbs Of Frequency

6

Give these people advice. Use the phrases in the box.

drink some water
 go home early

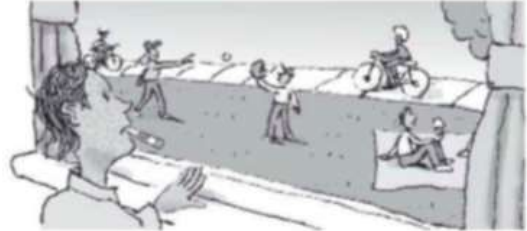
go to the grocery store
 lift heavy things

have a hot drink
 go outside

stay up late
 work too hard



1. Don't work too hard.



2. Go outside



3. Go home early



4. Don't lift heavy things



5. Drink some water



6. Don't stay up late



7. Go to the grocery store



8. Have a hot drink

7 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. Don't go out in the heat, take a pill for the toothache
3. I have a sore throat. Don't go out without covering your throat, take syrup for the throat
4. I have an earache. Don't expose yourself much to the heat and take pill for the earache
5. I have a stomachache. Don't go to work today, and take a pill to calm stomach pain
6. I have a backache. Don't carry heavy things, take a pill to relieve back pain
7. I have sore eyes. Rest today put a few drops in your eyes
8. I have a fever. Don't go to meeting and take some pills for fever

8 Health survey

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

	Often	Sometimes	Hardly ever	Never
get a headache	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
get an earache	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
stay up late	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
feel sleepy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 have almost no stomach pain sometimes I stay awake almost all night and in the morning I get up early
2. I hardly get a fever often I get sick but not often
3. I Hardly get body pain and stress even if I have many activities for perform
4. They hardly give me headaches but if I expose myself a lot to the heat my children start to paint but slight pain