



**NOMBRE DE ALUMNO: ROBERTO  
CARLOS GUILLEN VIDAL**

**NOMBRE DEL PROFESOR: ANA  
LAURA CULEBRO TORRES**

**NOMBRE DEL TRABAJO: # 5 HEALTH  
PROBLEMS AND ADVERBS OF  
FREQUENCY**

**MATERIA: INGLES III**

**GRADO: 3**

**GRUPO: B**

COMITÁN DE DOMÍNGUEZ CHIAPAS A 1 DE AGOSTO DE 2020.

6

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

- drink some water
- go to the grocery store
- have a hot drink
- stay up late
- go home early
- lift heavy things
- go outside
- work too hard



1. Don't work too hard.



2. Go outside



3. have a hot drink



4. lift heavy things



5. go home early



6. stay up late



7. go to the grocery store



8. drink some water

## 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. Oxygenated water for tooth and water pain with Sal for toothache
3. I have a sore throat. a little honey will do you good and stay hydrated
4. I have an earache. Olive oil and some naturopathic drops
5. I have a stomachache. Avoid lying down and taking a little
6. I have a backache. Relax and also Put on a warm compress
7. I have sore eyes. Cucumber slices and also a little ice
8. I have a fever. Drink plenty of fluids to stay hydrated as well

## 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 checked="" 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
get a cold	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
feel sleepy	<input checked="" type="checkbox"/>	<input 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 feel like I'm going to be sleepy
2. I snorted when I went outside when it was raining
3. I have a pain in my ear
4. I seem to have a headache