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**Nombre del trabajo;** Worbook.

**Materia:** Ingles III.

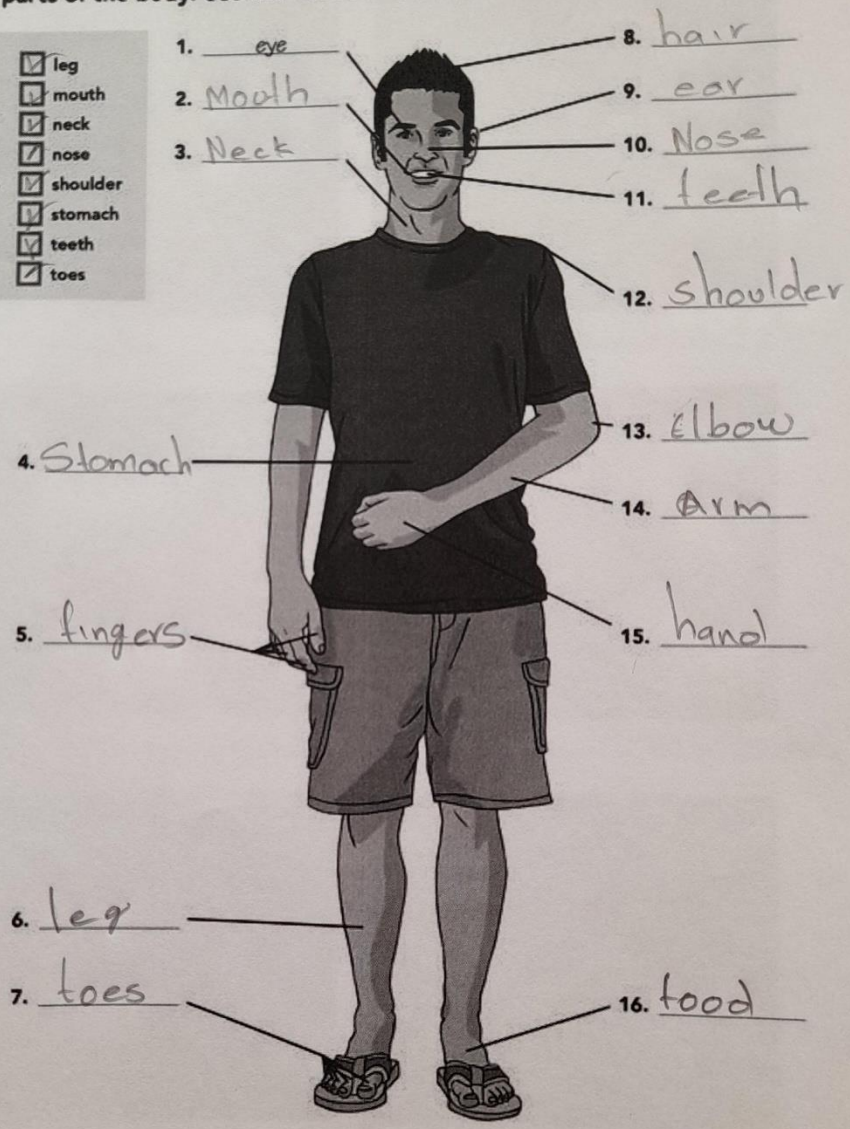
**Grado:** 3er . .cuatrimestre..

**Grupo:** "A".

Frontera Comalapa Chiapas a de 11 de junio del año 2022.

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

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



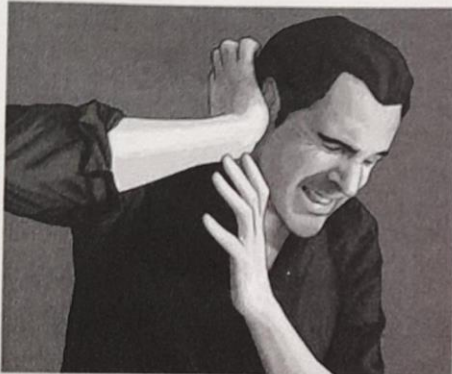
**2** What's wrong with these people? Write sentences.



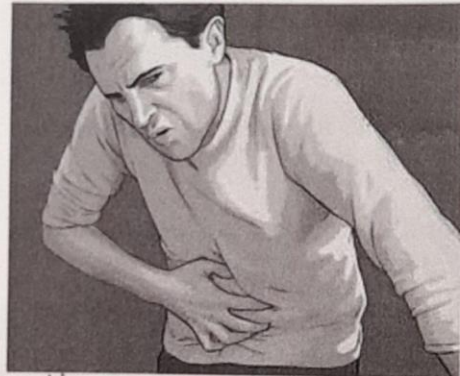
1. He has a toothache.



2. she has a throat pain



3. he has an earache



4. He has a stomachache.



5. He has a headache



6. she has a backache.

**3** Complete the conversations. Use the questions and sentences in the box.

- |  |  |
|--|--|
| <input type="checkbox"/> Great. See you later.                       | <input checked="" type="checkbox"/> OK. Get some rest.                                     |
| <input checked="" type="checkbox"/> How do you feel today?           | <input checked="" type="checkbox"/> So, are you going to go to the meeting this afternoon? |
| <input checked="" type="checkbox"/> I'm fine, thanks. How about you? | <input checked="" type="checkbox"/> That's too bad. Are you going to see a doctor?         |
| <input type="checkbox"/> I'm glad to hear that.                      | <input checked="" type="checkbox"/> What's wrong?  |

**Tuesday morning**

1. Jake: Hi, Camila. How are you?

Camila: I'm fine, thanks. How about you?

Jake: Not so good. Actually, I feel really awful.

Camila: what's wrong?

Jake: I think I have the flu.

Camila: That's too bad. Are you going to see a doctor?

Jake: No, I'm going to go home now.

Camila: OK. Get some rest.

Jake: OK. Thanks.

**Thursday morning**

2. Camila: How do you feel today?

Jake: I feel much better.

Camila: I'm glad to hear that

Jake: Thanks.

Camila: So, are you going to go to the meeting this afternoon

Jake: Yes, I am.

Camila: Great. See you later.



**4 Complete the sentences with the correct medications.**

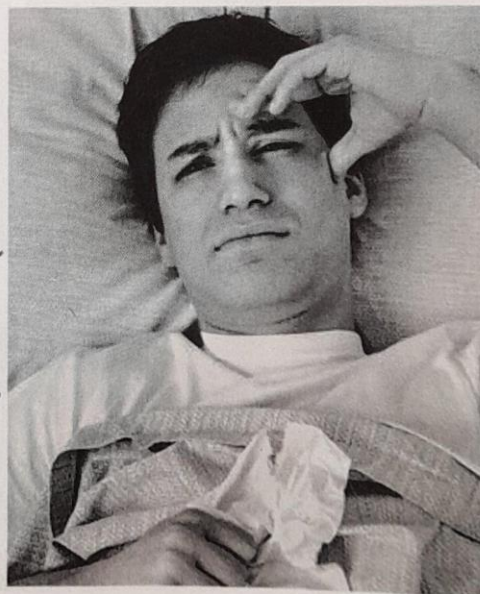
1. His nose is very congested. He needs some nasal spray.
2. I have a horrible cold, so I'm going to buy some Cold medicine "heroflo".
3. Your eyes look red and tired. Get some eye drops.
4. Alan has a stomachache, so he's going to get some aspirin and ibuprofen.
5. I have a terrible headache. I need some aspirin.
6. Mandy's cough sounds awful. I'm going to give her some cough syrup.



**5 Write each sentence a different way. Use the sentences in the box.**

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> My head feels terrible. | <input checked="" type="checkbox"/> I'm not happy.          |
| <input checked="" type="checkbox"/> I have a stomachache.   | <input checked="" type="checkbox"/> I'm sorry to hear that. |
| <input checked="" type="checkbox"/> What's wrong?           | <input checked="" type="checkbox"/> I'm very tired.         |
| <input checked="" type="checkbox"/> I'm glad to hear that.  | <input type="checkbox"/> I have a sore throat.              |

1. I feel sad.  
I'm not happy.
2. What's the matter?  
What's wrong?
3. I'm exhausted.  
I'm very tired.
4. That's too bad.  
I'm sorry to hear that.
5. That's good.  
I'm glad to hear that.
6. I have a headache.  
my head feels terrible.
7. My stomach hurts.  
I have stomachache.
8. My throat is sore.  
I have a sore throat.



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

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> drink some water        | <input type="checkbox"/> have a hot drink             |
| <input type="checkbox"/> go home early                      | <input checked="" type="checkbox"/> lift heavy things |
| <input checked="" type="checkbox"/> go outside              | <input checked="" type="checkbox"/> stay up late      |
| <input checked="" type="checkbox"/> go to the grocery store | <input checked="" type="checkbox"/> work too hard     |



1. Don't go outside.



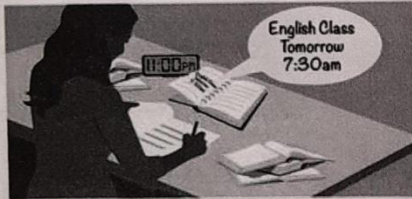
2. He has <sup>to</sup> drink



3. Don't drink some water



4. Go to the grocery store.



5. Don't stay up late



6. Go home early



7. Don't lift heavy things



8. Don't work too hard

**7 Write two pieces of advice for each problem.**

1. I have a sore throat. Don't go to work today. Drink some chamomile tea.
2. I have a toothache. Don't eat any cold food, take a pain reliever
3. I have a cough. Don't miss take cough syrup
4. I have a cold. Don't drink alcohol drink take cold medicine
5. I have a stomachache. Don't drink alcohol take a chamomile tea
6. I have a headache. Don't drink coffee take a aspirin
7. I have the flu. Don't drink alcohol, take paracetamol
8. I have a fever. Don't eat too cold things take a warm bath

**8 Health survey**

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

**How often do you . . . ?**

	Often	Sometimes	Hardly ever	Never
<sup>de cabeza</sup> get a headache	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<sup>oído</sup> get an earache	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<sup>enfrío</sup> get a cold	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<sup>gripe</sup> get the flu	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<sup>dolor de estómago</sup> get a stomachache	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<sup>despertarse tarde</sup> stay up late	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<sup>sentirse cansado</sup> feel sleepy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<sup>fiebre</sup> get a fever	<input type="checkbox"/>	<input checked="" 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. I sometimes get a headache, but hardly ever get a fever.
2. I hardly ever get a stomachache.
3. I often stay up late.
4. I often get a cold.