



Nombre del Alumno: David Aguilar Martinez

Nombre del tema: Parcial: 2

Nombre de la materia: Inglés 3

Nombre del profesor: Ana Laura Culebro Torres

Nombre de la Licenciatura: Ingeniería en Sistemas Computacionales

Cuatrimestre: 3

ACTIVITY 2 Jose Carlos Toledo Perez  
What's the matter

7 LISTENING Let's take a look.

Listen to Dr. Young talk to four other patients. What does she give them? Check (✓) the correct medications.

	Cough drops	Aspirin	Cold pills	Eyedrops	Nasal spray	Muscle cream
1. Chuck	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Pam	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Joey	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Sandra	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Amo 9/11*

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

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

✓ call	<del>stay</del>	<del>take</del>	<del>not go</del>	<del>not drink</del>
see	take	✓ not worry	not eat	

*Amo 9/11*

- |                                 |                              |
|---------------------------------|------------------------------|
| 1. <u>call</u> a dentist.       | 5. <u>stay</u> in bed.       |
| 2. <u>Don't worry</u> too much. | 6. <u>see</u> a doctor.      |
| 3. <u>take</u> two aspirin.     | 7. <u>not drink</u> coffee.  |
| 4. <u>not go</u> to school.     | 8. <u>not eat</u> any candy. |

Actividad 2



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

1. Her eyes are very tired. She needs some \_\_\_\_\_ eye drops.
2. Your cough sounds terrible. Buy some \_\_\_\_\_  
or some \_\_\_\_\_.
3. I have a headache, so I'm going to take  
some \_\_\_\_\_.
4. My arm is sore. I'm going to put some  
\_\_\_\_\_ on my arm.
5. Kristina has a stomachache, so I'm going  
to give her some \_\_\_\_\_.
6. Suzie has a terrible cold. She's going to take  
some \_\_\_\_\_.



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

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

1. What's the matter?  
What's wrong?
2. I feel sad.  
\_\_\_\_\_
3. That's too bad.  
\_\_\_\_\_
4. My stomach hurts.  
\_\_\_\_\_
5. My throat is sore.  
\_\_\_\_\_
6. I have a headache.  
\_\_\_\_\_
7. That's good.  
\_\_\_\_\_
8. I'm exhausted.  
\_\_\_\_\_



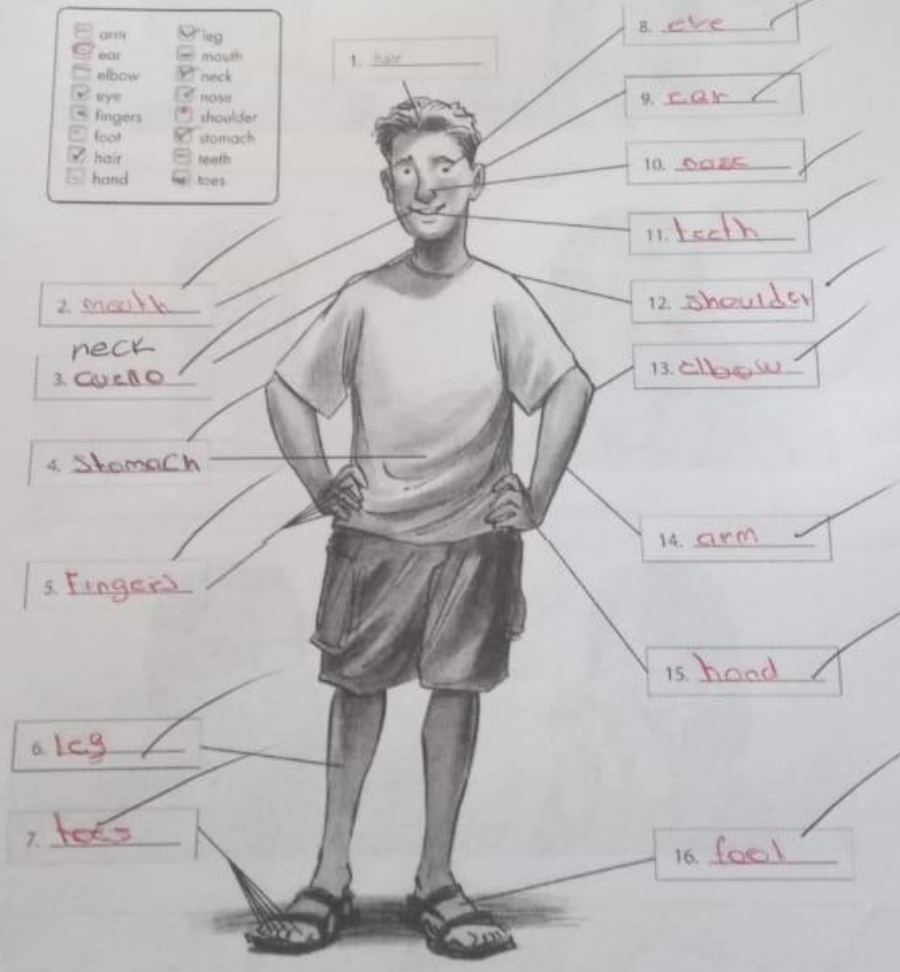
Activity 2  
03/06/22

## UNIT 2: What's the matter? WORKBOOK

*Amo qm*  
*AUTORIZADO*

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 type="checkbox"/>            | eye     | <input type="checkbox"/> | nose     |
| <input type="checkbox"/>            | fingers | <input type="checkbox"/> | shoulder |
| <input type="checkbox"/>            | foot    | <input type="checkbox"/> | stomach  |
| <input checked="" type="checkbox"/> | hair    | <input type="checkbox"/> | teeth    |
| <input type="checkbox"/>            | hand    | <input type="checkbox"/> | toes     |



1. hair

2. mouth

neck  
3. CUELLO

4. Stomach

5. Fingers

6. leg

7. toes

8. eye

9. ear

10. nose

11. teeth

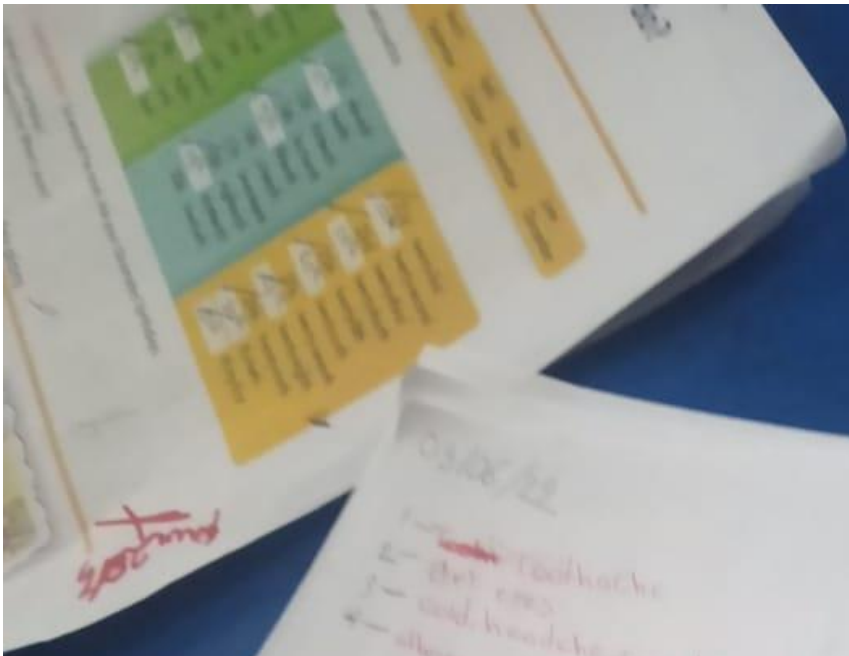
12. shoulder

13. elbow

14. arm

15. head

16. foot



- 03/08/22
- ~~1~~ - 100k/ha
  - det. 1000
  - 100k/ha/1000
  - 100k/ha/1000

100k/ha









