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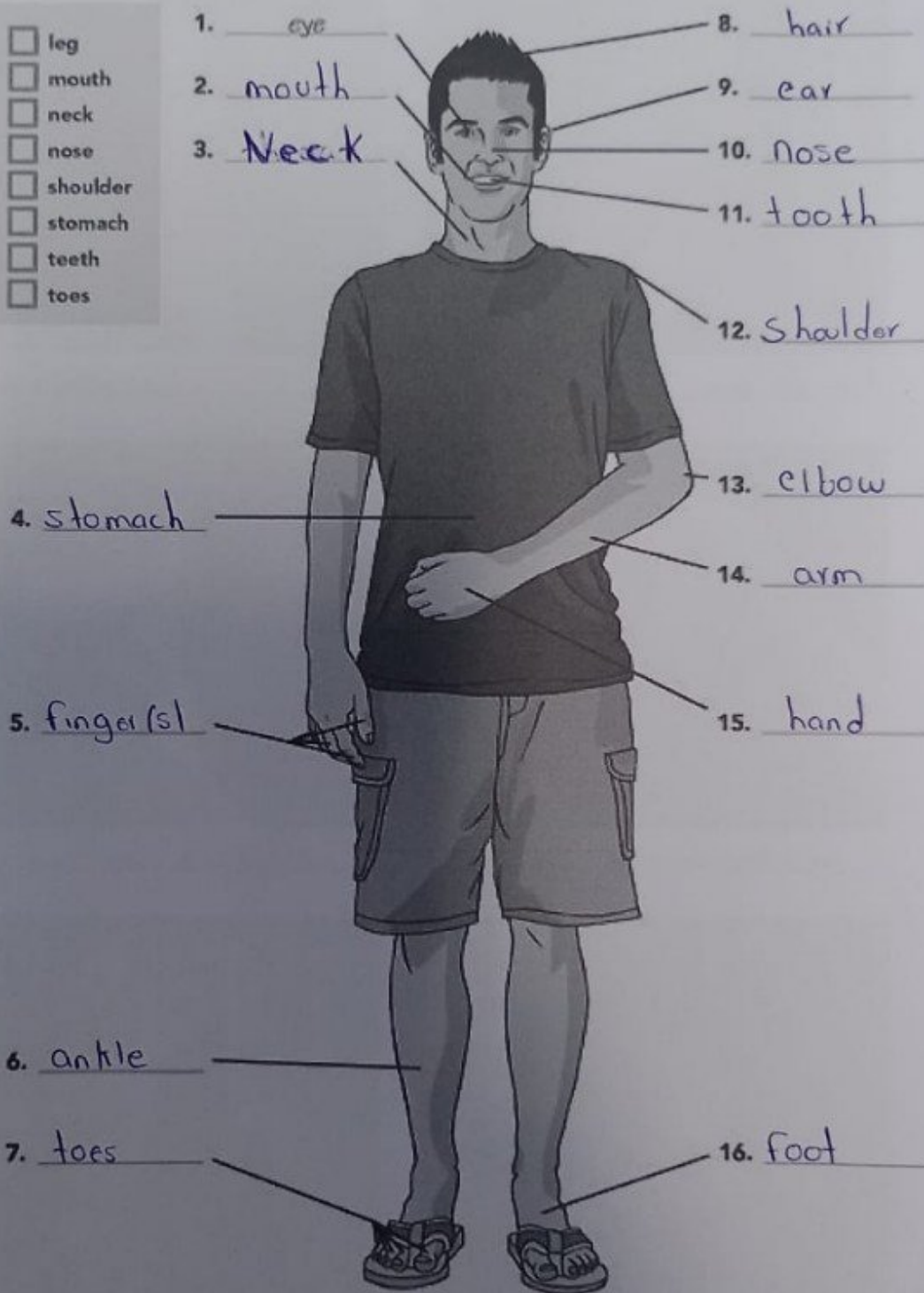
Grupo: A

FRONTERA COMALAPA CHIAPAS

WORKBOOK

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



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

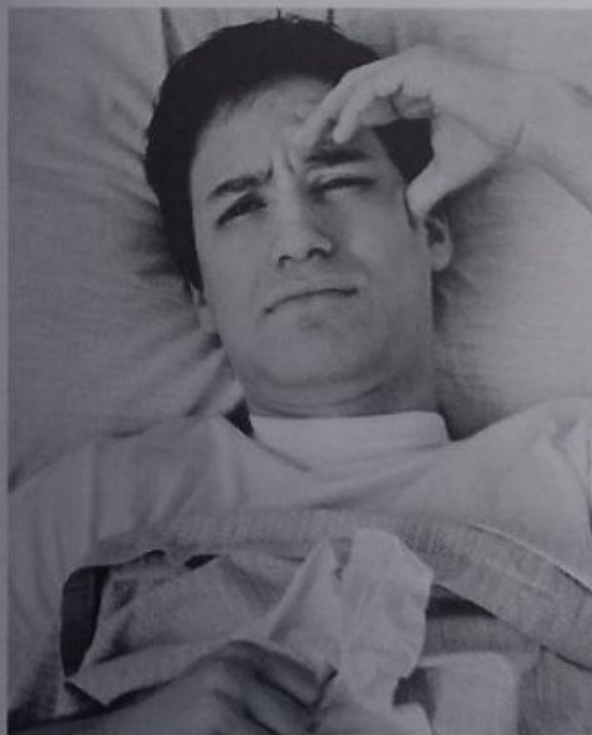
1. His nose is very congested. He needs some nasal spray.
2. I have a horrible cold, so I'm going to buy some Chicken soup.
3. Your eyes look red and tired. Get some eye drops.
4. Alan has a stomachache, so he's going to get some Chamomile tea.
5. I have a terrible headache. I need some aspirin.
6. Mandy's 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 type="checkbox"/> My head feels terrible.  | <input checked="" type="checkbox"/> I'm not happy.                  |
| <input type="checkbox"/> I have a stomachache.    | <input type="checkbox"/> I'm <sup>laments</sup> sorry to hear that. |
| <input checked="" type="checkbox"/> What's wrong? | <input type="checkbox"/> I'm <sup>with congest</sup> very tired.    |
| <input 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 a stomachache
8. My throat is sore.  
I have a sore throat.



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

- Great. See you later.
- How do you feel today?
- I'm fine, thanks. How about you?
- I'm glad to hear that.

- OK. Get some rest.
- So, are you going to go to the meeting this afternoon?
- That's too bad. Are you going to see a doctor?
- 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.

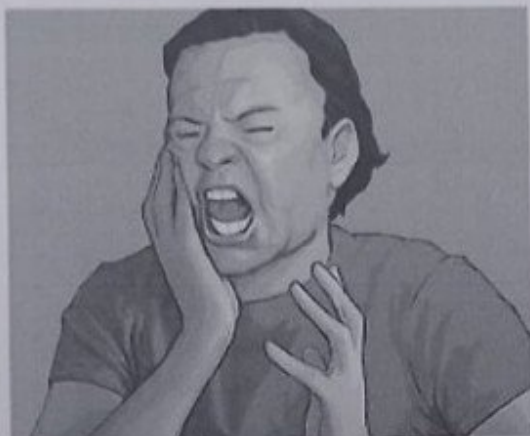
**Camila:** Great. See you later.



Tuesday morning



Thursday morning

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

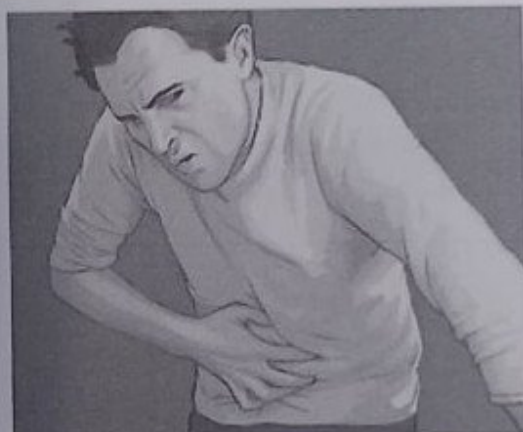
1. He has a toothache.



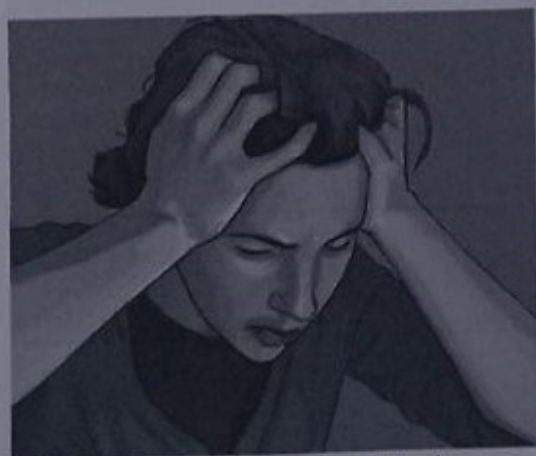
2. She has a sore throat.



3. He has an earache.



4. He has a stomachache.



5. She has a headache.



6. She has a backache.

date consejos a las personas  
**6** Give these people advice. Use the phrases in the box.

- |  |  |
|--|--|
| <input type="checkbox"/> drink some water<br><i>no beber agua</i>                        | <input type="checkbox"/> have a hot drink<br><i>una bebida caliente</i>                |
| <input type="checkbox"/> go home early<br><i>ir a casa temprano</i>                      | <input checked="" type="checkbox"/> lift heavy things<br><i>levantar cosas pesadas</i> |
| <input checked="" type="checkbox"/> go outside<br><i>salir</i>                           | <input type="checkbox"/> stay up late<br><i>quedarse despierto</i>                     |
| <input checked="" type="checkbox"/> go to the grocery store<br><i>ir al supermercado</i> | <input type="checkbox"/> work too hard<br><i>trabajar demasiado</i>                    |



1. Don't go outside.



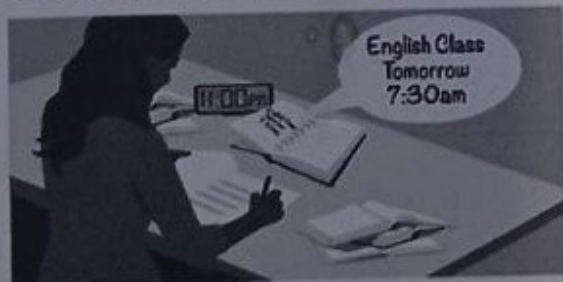
2. have a hot drink



3. drink some water



4. go to the grocery store



5. Don't stay up late



6. go home early.



7. Don't lift heavy thing



8. Don't work 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 go outside. Take cold medicine              |
| 3. I have a cough.       | Don't drink soda. Drink cough syrup               |
| 4. I have a cold.        | Get some rest. Drink chicken soup                 |
| 5. I have a stomachache. | Get some rest. Drink some chamomile tea           |
| 6. I have a headache.    | Don't work too hard. Take aspirin                 |
| 7. I have the flu.       | Don't drink soda. Drink tea                       |
| 8. I have a fever.       | Get some rest. Drink cold medicine.               |

**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 checked="" type="checkbox"/>	<input 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 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"/>
get a stomachache	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
stay up late	<input type="checkbox"/>	<input checked="" 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 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'm have feel sleepy all day tired
2. I'm have headaches frequently
3. I'm get sick with a sore throat.
4. \_\_\_\_\_